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PEER-REVIEW REPORT

Name of journal: World Journal of Psychiatry

Manuscript NO: 77052

Title: Suicidal Behavior - Advances in Clinical and Neurobiological Research and

Improvement of Prevention Strategies

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06254769 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Netherlands

Author's Country/Territory: Germany

Manuscript submission date: 2022-04-13

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-13 08:02

Reviewer performed review: 2022-04-13 08:24

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y] Yes [] No



Baishideng **Publishing**

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Peer-reviewer statements

Peer-Review: [Y] Anonymous [] Onymous

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Its important to clarify the studies done with ketamine and esketamine as is not the same thing. A number of studies have used ketamine and not esketamine and it seems that esketamine is more promoted in this article ,where following a systematic review and meta-analysis, esketamine was found to be less effective, compared to racemic IV ketamine, in treating depression. Bahji A, Vazquez GH, Zarate CA Jr. Comparative efficacy of racemic ketamine and esketamine for depression: A systematic review and meta-analysis. J Affect Disord. (2021) 278:542-55. doi: 10.1016/j.jad.2020.09.071 So it would need to be clarified accordingly. Also its important to highlight if the Information in this editorial is somehow any different from already published literature?



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06183728 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: United States

Author's Country/Territory: Germany

Manuscript submission date: 2022-04-13

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-15 08:55

Reviewer performed review: 2022-04-29 06:01

Review time: 13 Days and 21 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No



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Peer-Review: [Y] Anonymous [] Onymous

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This manuscript highlights the recent research for suicide prevention. Although the manuscript focuses well on the current issues about it, minor revisions as specified below are required prior to publication. 1. In this manuscript, the term "suicidal behavior" and the abbreviations "SB" and "SBD" are used interchangeably. I recommend using "suicidal behavior" without the abbreviations. 2. It would be helpful for the readers to provide a brief explanation for the following terms: "universal," "selective," and "indicated prevention strategies." 3. In the following sentence on page 7, "The situation differs in the developing countries in this regard; here oppression, poverty and aporia are important factors in the emergence of suicidal behavior." I think these factors could also be the risk for mood disorders. Therefore, the dissimilarity between developed and developing countries might only be due to a lack of access to a medical facility for diagnosis in a developing country. If so, there may be no significant difference in the risk factors for suicide between the two types of countries.

4. Please revise the following section to clarify the context. Page 17–18 "Some of the association between antidepressant use and suicide attempt in cross-sectional studies may be due to confounding of indication and treatment. Thus, a suicide attempt is a common reason to initiate treatment with antidepressants. Therefore, a positive correlation between suicidal behavior and therapy by antidepressants does not allow for the conclusion of a causal relationship." 5. The following sentence can be excluded to improve the clarity of context. Page 10 "We will go into more detail about the individual-level strategies in the following sections." 6. I recommend elaborating on the following sentences: Page 15 "For example, a lack of decrease in



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cortisol levels was associated with an increased risk of a future suicide death" Is this a lack of decrease in cortisol level in dexamethasone suppression test? Page 16 "Blunted prolactin response to fenfluramine challenge was found in high vs low lethality suicide attempters" Was the blunted response seen in high lethality suicide attempters? Page 16 "Recently, PET studies showed higher raphe 5-HT1A receptor binding in high vs low lethality suicide attempters" Was the binding higher in high lethality suicide attempters?

7. Please specify the appropriate information for references, such as the one stated below: Page 18 "(e.g.,79)" 8. Please correct the inappropriate usage of comma in the following sentence. Page 20 "Regarding psychotherapeutic treatment it has to be noted, that results differ considerably and even the adequate targets of suicide interventions are still a matter of debate."