

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Psychiatry*

**Manuscript NO:** 82360

**Title:** Differences between DSM-5-TR and ICD-11 revisions of Attention Deficit/Hyperactivity Disorder: A commentary on implications and opportunities

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 02445209

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** Czech Republic

**Author's Country/Territory:** Australia

**Manuscript submission date:** 2022-12-16

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2023-01-23 13:11

**Reviewer performed review:** 2023-01-30 06:01

**Review time:** 6 Days and 16 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

Dear authors, I have only a few comments on your manuscript: - The part "Differences in partitioning..." starts with "2" and the first sentence starts with "The third difference". On the other hand, the part "Differences in clarity..." starts with "3" and the first sentence starts with "Second". This is confusing. - It is nice that you suggest to develop and validate an ICD-11 based ADHD rating scale. Nevertheless, any scale is only a scale, with a broad possibility of a subjective interpretation of its content. A biological marker of ADHD would be better,. You can state this in "Implications of the differences...". The reviewer

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**Peer-review model:** Single blind

**Reviewer's code:** 06476441

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Spain

**Author's Country/Territory:** Australia

**Manuscript submission date:** 2022-12-16

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2023-02-01 19:39

**Reviewer performed review:** 2023-02-08 06:15

**Review time:** 6 Days and 10 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

I would like to express my pleasure in reading your work. It reveals the constant growth of knowledge and the responsibility that concerns us in that process. I would like to share three specific ideas: - The differences related to the number of criteria, the thresholds for the diagnosis and the segregation of the criteria in the HY/MI dimension are evident. These differences have repercussions for the research and also for clinical practice. - The scale that usually accompanies the exploration of the disorder, according to the DSM 5 checklist, contains an item expressed in a negative way, a fact matter that is not usually not recommended and that can have unpredictable consequences not only in the clinic but in research. -I think that the identification of the underlying structure will be determined not only by the clinical elements but also by the scope of the tools that are used in its recognition

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**Reviewer's code:** 05849395

**Position:** Peer Reviewer

**Academic degree:** BSc

**Professional title:** Adjunct Professor, Chief Physician

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Australia

**Manuscript submission date:** 2022-12-16

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2023-02-01 06:14

**Reviewer performed review:** 2023-02-09 12:14

**Review time:** 8 Days and 6 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

The authors briefly compare the differences and implications of the diagnostic criteria for ADHD in the latest ICD-11 and DSM-5-TR, which were officially promulgated in 2022, to promote a deeper understanding of the relevant classification systems, with implications for clinical practice and future research. It is recommended that this opinion review be revised to address the following points: 1. In the abstract section, it is suggested that "first, second, and third" be consolidated into the corresponding "(i), (ii), and (iii)." 2. On page 7, "3. Differences in clarity and standardization of diagnostic thresholds", the authors suggest that unclear diagnostic thresholds such as "several symptoms" may lead to diagnostic difficulties. Therefore, on page 8, "Implications of the differences between DSM-5/DSM-5-TR and ICD-11 for research and clinical practice", the authors suggest that clinicians should be guided by the definite thresholds proposed in DSM-5-TR until further revisions of ICD-11 provide clearer guidance. This is contrary to the original intent of the ICD-11 revision supported by field trials and may mislead the understanding of ICD-11 CDDR. According to Leeds et al., arbitrary cutoffs and precise requirements related to symptom counts and duration are generally avoided in

ICD-11, with more use of terms such as "several days", "several weeks", and "several symptoms" intended to conform to the way clinicians actually make diagnoses. This allows flexibility in the exercise of clinical judgment and avoids algorithmic pseudo-precision requirements such as symptom counts or precise durations, making ICD-11 innovative and consistent with the dimensional classification.( Reed GM, First MB, Kogan CS, et al. Innovations and changes in the ICD-11 classification of mental, behavioural and neurodevelopmental disorders. World Psychiatry. 2019;18(1):3-19.) 3. It is suggested that the only table in the text be revised to a three-line table.



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Peer-review model:** Single blind

**Reviewer's code:** 05849395

**Position:** Peer Reviewer

**Academic degree:** BSc

**Professional title:** Adjunct Professor, Chief Physician

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Australia

**Manuscript submission date:** 2022-12-16

**Reviewer chosen by:** Jia-Ru Fan

**Reviewer accepted review:** 2023-03-09 04:33

**Reviewer performed review:** 2023-03-09 13:57

**Review time:** 9 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous





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statements

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

## **SPECIFIC COMMENTS TO AUTHORS**

The authors have largely addressed the concerns presented in the first review comments