Response to Reviewer 1 Comments

General Comments:

Scientific Quality: Grade C (Good)
Language Quality: Grade B (Minor language polishing)
Conclusion: Major revision

Specific Comments to Authors:

Point 1: Please see attached manuscript with editor"s comments. There are several sections that need expanded on and terminology used needs clarified.

Response 1: We have polished the manuscript, and revised the paper in accordance with the editor's comments.

Point 2: More literature review is needed in some domains, such as health living and evidenced based treatments of depression. Authors should review, make corrections and additions to their literature review/manuscript.

Response 2: Thanks for your kind suggestion. We have added the literature regarding the impacts of lifestyle on depression problems among college students and the evidence of the cultivation of healthy lifestyles as one of the treatments of depression, which has also been shown as follows:

*"**Lifestyle.** The depression issues of college students can largely be attributed to their lifestyles. First, the lack of regular physical activities increases the risk of depression, particularly for individuals whose amount of weekly physical activity fails to meet the standards of the World Health Organization. Second, substance abuse, such as excessive smoking, alcohol abuse or alcohol intake, can cause depressive disorders, and it should be noted that their relationship might be bidirectional. Studies have shown that individuals with depression are more likely to drink obsessively to relieve their negative emotions due to their poor self-control, which will in turn trap them in a vicious cycle between excessive drinking and depressive disorders. Third, unhealthy sleeping habits such as daytime sleepiness, poor sleep quality, and short or long sleep duration may lead to depressive symptoms. Fourth, unhealthy nutritional habits are also among the crucial factors that are strongly correlated with depression. From the perspective of dietary structure and nutritional habits, individuals with depression often report excessive intake of high-fat snacks and margarine/butter/meat fat and*

inadequate intake of fruits, vegetables, and lean protein. Overeating and skipping breakfast, especially for males, are also related to depressive disorders."

*"**Cultivation of healthy lifestyles.** Apart from external support from family and intervention by higher education institutions, the prevention of depression also needs to rely on the patient's own efforts. Studies have shown that healthy lifestyles, including proper physical exercise, healthy sleep and diet, and regular sun exposure, can help prevent or reduce the occurrence of depression in college students(Vieira, F., Muraro, A. P., Rodrigues, P., Sichieri, R., Pereira, R. A., & Ferreira, M. G. 2021). For instance, students with a consistent sleep schedule and sufficient sleep duration are less likely to suffer from depression. Meanwhile, regular sun exposure aids in the synthesis of vitamin D in the body, which is crucial to release fatigue and change the negative moods that individuals with mild or moderate depression may experience. Proper physical activities are also important for stress and depression relief among college students(Melnyk, B., Kelly, S., Jacobson, D., Arcoleo, K., & Shaibi, G. 2014; Liang, A. , Zhao, S. , Song, J. , Zhang, Y. , Zhang, Y. , & Niu, X. , et al. 2021). Additionally, improving diet and overall nutrition is also an effective way to treat depression(Quirk, S. E., Williams, L. J., O'Neil, A., Pasco, J. A., Jacka, F. N., Housden, S., Berk, M., & Brennan, S. L. 2013). In particular, eating breakfast on time helps reduce the risk of depression. Certain nutrients, including zinc, magnesium, B vitamins, and cooking fats, have also been proven to be associated with depressive symptoms(Jacka, F. N., Mykletun, A., Berk, M., Bjelland, I., & Tell, G. S. 2011；Tolmunen, T., Hintikka, J., Ruusunen, A., Voutilainen, S., Tanskanen, A., Valkonen, V. P., Viinamäki, H., Kaplan, G. A., & Salonen, J. T. 2004；Sanchez-Villegas, A., Henríquez, P., Figueiras, A., Ortuño, F., Lahortiga, F., & Martínez-González, M. A. 2007). Therefore, colleges and universities can help prevent the occurrence of depression in college students by providing a regular diet with adequate intake of vitamins and nutrients(Saha, S., Okafor, H., Biediger-Friedman, L., & Behnke, A. 2021)."*

References:

Jacka FN, Mykletun A, Berk M, Bjelland I, Tell GS. The association between habitual diet quality and the common mental disorders in community-dwelling adults: the Hordaland Health study. *Psychosom Med* 2011; 73: 483-490 [PMID: 21715296 DOI: 10.1097/PSY.0b013e318222831a]

Liang A, Zhao S, Song J, Zhang Y, Zhang Y, Niu X, Xiao T, Chi A. Treatment effect of exercise intervention for female college students with depression: analysis of electroencephalogram microstates and power spectrum. Sustainability 2021; 13: 6822 [DOI:10.3390/su13126822]

Melnyk B, Kelly S, Jacobson D, Arcoleo K, Shaibi G. Improving physical activity, mental health outcomes, and academic retention in college students with Freshman 5 to Thrive: COPE/Healthy Lifestyles. *J Am Assoc Nurse Pract.* 2014; 26: 314-322 [PMID: 24170429 DOI: 10.1002/2327-6924.12037]

Quirk SE, Williams LJ, O'Neil A, Pasco JA, Jacka FN, Housden S, Berk M, Brennan SL. The association between diet quality, dietary patterns and depression in adults: a

systematic review. *BMC Psychiatry* 2013 Ju; 13: 175 [PMID: 23802679 DOI: 10.1186/1471-244X-13-175]

Saha S, Okafor H, Biediger-Friedman L, Behnke A. Association between diet and symptoms of anxiety and depression in college students: A systematic review. *Journal of American College Health* 2021; 1-11 [PMID:34087087] DOI:10.1080/07448481.2021.1926267]

Sanchez-Villegas A, Henríquez P, Figueiras A, Ortuño F, Lahortiga F, Martínez-González MA. Long chain omega-3 fatty acids intake, fish consumption and mental disorders in the SUN cohort study. *Eur J Nutr* 2007; 46: 337-346. [PMID: 17717628 DOI: 10.1007/s00394-007-0671-x]

Tolmunen T, Hintikka J, Ruusunen A, Voutilainen S, Tanskanen A, Valkonen VP, Viinamäki H, Kaplan GA, Salonen JT. Dietary folate and the risk of depression in Finnish middle-aged men. A prospective follow-up study. *Psychother Psychosom* 2004; 73: 334-339 [PMID: 15479987 DOI: 10.1159/000080385]

Vieira FDST, Muraro AP, Rodrigues PRM, Sichieri R, Pereira RA, Ferreira MG. Lifestyle-related behaviors and depressive symptoms in college students. *Cad Saude Publica* 2021; 37: e00202920 [PMID: 34644759 DOI: 10.1590/0102-311X00202920.]

Point 3: You may want to mention COVID-19 in the abstract, since you talk about it several times in the manuscript. It may also help bring more attention to your article.

Response 3: Thanks for your helpful advice, and we have mentioned COVID-19 in the abstract as noted by the reviewer.

"The outbreak of COVID-19 has exacerbated the severity of depression among college students worldwide and poses grave challenges to the prevention and treatment of depression, given that the coronavirus has spread quickly with high infection rates, and the pandemic has changed the daily routines of college life."

Point 4: *"The median ratio of depression for college students in six ASEAN countries (Cambodia, Laos, Malaysia, Myanmar, Thailand and Vietnam) amounted to 29.4% (median point prevention was 29.4% for depression), and 7% to 8% of students commit suicide; despite the high prevalence of mental illness, their willingness to seek professional help was relatively low."*

-- Was there a sample size or even estimate of how many students were looked at in these studies (e.g. sample of over 10000 the median was...?

Response 4: We feel grateful for your careful reading, and we have included the sample size of these studies.

"The median prevalence rate for depression among 15,859 college students in six ASEAN countries (Cambodia, Laos, Malaysia, Myanmar, Thailand and Vietnam)

was 29.4%, and 7% to 8% of students committed suicide; despite the high prevalence of mental illness, their willingness to seek professional help was relatively low."

Point 5: "*A series of factors including family, colleges, studies and social interaction are likely to induce college students' depression, which is also conducive to their physical and mental health. "*

--Does depression impact it in a negative way? Since depression is part of mental health, are you saying it contributes to other mental health concerns?

Response 5: Thank you for the constructive advice of the reviewer. We meant to express the influencing factors of depression, and we have revised the manuscript to avoid misunderstanding.

"A series of factors, including family, college, studies, and social interactions, are likely to induce college students' depression."

Point 6: "*Women are more vulnerable to internalization obstacles such as depression because of their delicate and sensitive emotions, while men have masculinity, self-confidence and more prominent externalization behaviors such as smoking, alcoholism and drug abuse. "*

-- This sounds discriminatory and stereotypical, I would not use this!

You need to include information that women are more help seeking than men and therefore tend to have more diagnoses and treatment. Socially women are more likely to discuss their difficulties to others as a form of coping, such as family and friends. Men may be more likely to internalize their problems and not share, and engage in poor coping skills such as smoking, drug use, etc.(however women do this too) societal expectations for men are different, and men who express vulnerable emotions are seen as weak, men's symptoms of depression may manifest as anger, since this is a more acceptable masculine emotion in society, but the emotion under the anger may be sadness.

Response 6: Thanks for your valuable suggestion. We have supplemented and revised this section to avoid ambiguity, which are as follows:

"Some studies have asserted that the risk of depression in female college students is significantly higher than that in male students. The possible mechanism lies in physiological differences between the sexes (such as genetic vulnerability, hormone, and cortisol levels), differences in self-concept, and different role expectations from society lead to different emotional responses and behavior patterns. Females are more likely to internalize their negative feelings, whereas males resort to externalizing behaviors such as smoking and alcoholism(Seedat, S. et al.,2009; Rith-Najarian, L. R.,

Boustani, M. M. & Chorpita, B. F.,2019; Mackenzie CS, Gekoski WL, Knox VJ.,2006). However, some analyses did not find significant sex differences. Other studies have shown that men have a higher prevalence of depression. This may be ascribed to their conservative attitudes toward mental health counseling and treatment under certain social expectations. For instance, women are more help-seeking than men and therefore tend to have more diagnoses and treatment. In particular, gregarious women are more likely to discuss their difficulties with others, such as family and friends, as a form of coping. Nevertheless, considering that societal expectations for men might be different, with those who express vulnerable emotions being regarded as weak, the depressive symptoms of men may manifest as anger and excessive indulgence in smoking and drinking, which are more acceptable masculine expressions in society."

References:

Mackenzie CS, Gekoski WL, Knox VJ. Age, gender, and the underutilization of mental health services: The influence of help-seeking attitudes. *Aging Ment. Health* 2006; 10: 574-582 [PMID: 17050086 DOI:10.1080/13607860600641200]

Rith-Najarian LR, Boustani MM, Chorpita BF. A systematic review of prevention programs targeting depression, anxiety, and stress in university students. *Journal of Affective Disorders* 257, 568-584 [PMID: 31326690 DOI:10.1016/j.jad.2019.06.035]

Seedat S, Scott KM, Angermeyer MC, Berglund P, Bromet EJ, Brugha TS, Demyttenaere K, de Girolamo G, Haro JM, Jin R, Karam EG, Kovess-Masfety V, Levinson D, Medina Mora ME, Ono Y, Ormel J, Pennell BE, Posada-Villa J, Sampson NA, Williams D, Kessler RC. Cross-national associations between gender and mental disorders in the World Health Organization World Mental Health Surveys. *Arch Gen Psychiatry* 2009; 66: 785-795 [PMID: 19581570 DOI: 10.1001/archgenpsychiatry.2009.36]

Point 7: *"Other studies have shown that men have a higher prevalence of depression. -- In these studies, did culture play a part in the males expression of depression during the study?"*

Response 7: We appreciate your kind suggestion. Culture indeed may play a part in the males expression of depression, yet we did not focus on the culture differences in this study.

Point 8: *"However, these people often lack the ability to build good interpersonal relationships, so even in virtual space, it is usually difficult to obtain the expected support or even conflict easily, which aggravates the risk of depression."*

--I don"t understand this, who are "these people" people who rely solely on meeting people virtually? Who then struggle to make in person connections in their day-to-day life, which may be the case, frequently this lack of in person interaction can be related to anxiety in social relationships, which can increase risk for depression.

Response 8: Thanks for your careful reading. We have revised the expression to avoid possible misunderstanding.

"Third, it is quite impossible for those who struggle with depressive disorders to establish satisfactory interpersonal relationships in virtual space since they usually maintain poor relationships in the real world. The lack of expected support from social networks undoubtedly aggravates their depression."

Point 9: *"Nonetheless, individuals who surf the internet for 2-3 hours are often in a high-risk depression state where rumors or inaccurate information browsing increases, but they do not have the time to check their authenticity one by one, thus being easily misled ."*

--I don"t understand this, if people are online for 2-3 hours looking up things this increases risk for depression? Or looking up things related to COVID?

Response 9: We feel grateful for your suggestion, and we have restated the description of the relationship between the depression of students and their time spent browsing the Internet to make it more understandable.

"Considering that the internet serves as the main channel for college students to obtain information about COVID-19, those who browse the internet for a short time will not suffer from too much anxiety because of the small amount of information they receive. Meanwhile, students surfing the internet for a long time will be able to obtain more accurate details about COVID-19, which can prevent misunderstanding relevant information. Nevertheless, individuals with shorter browsing times often have a higher risk for depression given that they may be easily misled by the rumors and have limited time to verify the authenticity of relevant information."

Point 10: *"However, the psychological scale can only be used as an auxiliary means to diagnose depression, which cannot be used as the basis for diagnosis."* -- It is a screening tool, that when elevated scores are detected, further evaluation is needed by a clinician.

Response 10: We have revised the expression as suggested by the reviewer.

"Similar to the DASS-21, the prediction reliability and validity of the SDS scale for depression have also been confirmed and recognized by relevant studies. These are screening tools, and when elevated scores are detected, further evaluation is needed by a clinician."

Point 11: *"Mentors, peers and campus social clubs can effectively alleviate the negative impact of online games on depression and at the same time reduce the economic cost of depression intervention."*

-- How?

Response 11: We have added the detailed mechanisms of how mentors, peers, and social clubs on campus may affect the depression situations of college students in the paper as suggested by the reviewer.

"Prior literature has shown that the faculties, peers, and social clubs on campus can help alleviate the negative effects of online games on depression. Students may seek social support from their teachers, peers, or psychological counseling centers to prevent addiction to online video games that may lead to depressive disorders. Therefore, colleges and universities should build mental health services involving faculty, students, and psychological counseling centers. In addition, some studies have indicated that the implementation of related courses and projects in universities, such as resilience programs (including goal‐building, mindfulness, and resilience skills), might be effective in improving college students' mental health."

Point 12: *"Research shows that the cultivation and persistence of good daily habits, such as adequate and high-quality sleep, regular physical exercise, outdoor activities, sunshine, and eating breakfast every day, have significant effects on the prevention and treatment of depression."*

-- I would expand on this because it is a big one for prevention of depression. As a clinician these are some of the first things I address with my patients in treatment.

Sleep is essential for emotional and cognitive functioning

Exercise and physical activity are important for stress relief, individuals who are spending a lot of time gaming and on social networks, are likely engaging in minimal activity

Sunshine and vitamin D, if you are low on vitamin d this results in fatigue and changes in mood, similarly vitamin B and iron can also impact energy Additionally diet is important overall not just eating breakfast, need to make sure getting vitamins needed, and avoiding certain foods, such as those high in preservatives and carbohydrates. As we can imagine college students eating behaviors are likely not optimal since they are relying on themselves to obtain and make food and not their family.

Response 12: Thanks for your thoughtful suggestion, and we have elaborated on how to prevent depression by the cultivation and persistence of good daily habits. The relevant content is excerpted and shown as follows:

*"**Cultivation of healthy lifestyles.** Apart from external support from family and intervention by higher education institutions, the prevention of depression also needs to rely on the patient's own efforts. Studies have shown that healthy lifestyles, including proper physical exercise, healthy sleep and diet, and regular sun exposure, can help prevent or reduce the occurrence of depression in college students(Vieira, F., Muraro, A. P., Rodrigues, P., Sichieri, R., Pereira, R. A., & Ferreira, M. G. 2021). For instance, students with a consistent sleep schedule and sufficient sleep duration are less likely to suffer from depression. Meanwhile, regular sun exposure aids in the synthesis of vitamin D in the body, which is crucial to release fatigue and change the negative moods that individuals with mild or moderate depression may experience. Proper physical activities are also important for stress and depression relief among college students(Melnyk, B., Kelly, S., Jacobson, D., Arcoleo, K., & Shaibi, G. 2014; Liang, A. , Zhao, S. , Song, J. , Zhang, Y. , Zhang, Y. , & Niu, X. , et al. 2021). Additionally, improving diet and overall nutrition is also an effective way to treat depression(Quirk, S. E., Williams, L. J., O'Neil, A., Pasco, J. A., Jacka, F. N., Housden, S., Berk, M., & Brennan, S. L. 2013). In particular, eating breakfast on time helps reduce the risk of depression. Certain nutrients, including zinc, magnesium, B vitamins, and cooking fats, have also been proven to be associated with depressive symptoms(Jacka, F. N., Mykletun, A., Berk, M., Bjelland, I., & Tell, G. S. 2011；Tolmunen, T., Hintikka, J., Ruusunen, A., Voutilainen, S., Tanskanen, A., Valkonen, V. P., Viinamäki, H., Kaplan, G. A., & Salonen, J. T. 2004；Sanchez-Villegas, A., Henríquez, P., Figueiras, A., Ortuño, F., Lahortiga, F., & Martínez-González, M. A. 2007). Therefore, colleges and universities can help prevent the occurrence of depression in college students by providing a regular diet with adequate intake of vitamins and nutrients(Saha, S., Okafor, H., Biediger-Friedman, L., & Behnke, A. 2021)."*

References:

Jacka FN, Mykletun A, Berk M, Bjelland I, Tell GS. The association between habitual diet quality and the common mental disorders in community-dwelling adults: the Hordaland Health study. *Psychosom Med* 2011; 73: 483-490 [PMID: 21715296 DOI: 10.1097/PSY.0b013e318222831a]

Liang A, Zhao S, Song J, Zhang Y, Zhang Y, Niu X, Xiao T, Chi A. Treatment effect of exercise intervention for female college students with depression: analysis of electroencephalogram microstates and power spectrum. Sustainability 2021; 13: 6822 [DOI:10.3390/su13126822]

Melnyk B, Kelly S, Jacobson D, Arcoleo K, Shaibi G. Improving physical activity, mental health outcomes, and academic retention in college students with Freshman 5 to Thrive: COPE/Healthy Lifestyles. *J Am Assoc Nurse Pract.* 2014; 26: 314-322 [PMID: 24170429 DOI: 10.1002/2327-6924.12037]

Quirk SE, Williams LJ, O'Neil A, Pasco JA, Jacka FN, Housden S, Berk M, Brennan SL. The association between diet quality, dietary patterns and depression in adults: a systematic review. *BMC Psychiatry* 2013 Ju; 13: 175 [PMID: 23802679 DOI: 10.1186/1471-244X-13-175]

Saha S, Okafor H, Biediger-Friedman L, Behnke A. Association between diet and symptoms of anxiety and depression in college students: A systematic review. *Journal of American College Health* 2021; 1-11 [PMID:34087087] DOI:10.1080/07448481.2021.1926267]

Sanchez-Villegas A, Henríquez P, Figueiras A, Ortuño F, Lahortiga F, Martínez-González MA. Long chain omega-3 fatty acids intake, fish consumption and mental disorders in the SUN cohort study. *Eur J Nutr* 2007; 46: 337-346. [PMID: 17717628 DOI: 10.1007/s00394-007-0671-x]

Tolmunen T, Hintikka J, Ruusunen A, Voutilainen S, Tanskanen A, Valkonen VP, Viinamäki H, Kaplan GA, Salonen JT. Dietary folate and the risk of depression in Finnish middle-aged men. A prospective follow-up study. *Psychother Psychosom* 2004; 73: 334-339 [PMID: 15479987 DOI: 10.1159/000080385]

Vieira FDST, Muraro AP, Rodrigues PRM, Sichieri R, Pereira RA, Ferreira MG. Lifestyle-related behaviors and depressive symptoms in college students. *Cad Saude Publica* 2021; 37: e00202920 [PMID: 34644759 DOI: 10.1590/0102-311X00202920.]

Point 13: *"However, its therapeutic effect was inconclusive. "*

-- I don"t think this is true. It is likely some studies may not find significant changes in symptoms, but the treatment, when applied correctly and the patient is engaged, alleviates symptoms of depression in like 70-80% of patients, so you should add additional citations for this.

"However, other studies argued that the brief, classroom-based cognitive-behavioral workshop designed by them had little effect on relieving depression symptoms of college students."

-- Who are "them" what is this classroom CBT?

"Compared with reading therapy and booklet therapy, cognitive behavioral therapy has no more significant therapeutic effect on depression symptoms."

-- I would definitely look into other therapies that can be compared to CBT, this "reading therapy" and "booklet therapy" are not something that is evidenced based, I don"t think.
Most treatments involve reading by the patient and psychoeducation.

Response 13: Thank you for the careful reading. We have checked pertinent studies, which generally reach the consensus that CBT serves as an effective tool in the treatment of depression. Thus, we have reorganized the expressions with this concern.

"Cognitive behavioral therapy (CBT), which aims to change individual thoughts and behaviors, has been the most widely used treatment method for depression thus far.

Mindfulness intervention programs based on cognitive behavioral therapy and dialectal behavior group therapy can effectively alleviate the depressive symptoms of college students."

Point 14: *"In recent years, benefiting from the rapid development of Internet technology and mobile terminal devices, an increasing number of online technologies have been applied to the treatment of depression among college students, even skillfully combined with behavioral cognitive therapy, with remarkable results. Compared with behavioral cognitive therapy and online intervention, the efficacy of traditional educational/personalized feedback interventions in the past is slightly inferior. Some projects have evaluated the effectiveness of mailing personalized standardized alcohol feedback for college students' depression prevention, but unfortunately, there is no obvious improvement effect."*

-- There are a lot of apps, that do a variety of things, may be you can give a few examples. Many of these apps incorporate elements of CBT and mindfulness.

Response 14: Thanks for your kind suggestion, and we have added a few examples of the apps incorporating elements of CBT and mindfulness.

"For example, there are many apps that incorporate elements of CBT and mindfulness. A study from Switzerland revealed that apps such as MoodKit, MoodMission and MoodPrismying can successfully deliver ecological momentary interventions (EMIs) based on cognitive behavioral therapy principles to users through smartphones, thereby improving their well-being and effectively reducing the symptoms of depression. The study also noted that EMI has been generally accepted by users of different ages, sex, educational backgrounds and occupations and is expected to provide scalable global mental health solutions(Marciniak, M. A. et al.,2020)."

References:

Marciniak MA, Shanahan L, Rohde J, Schulz A, Wackerhagen C, Kobylińska D, Tuescher O, Binder H, Walter H, Kalisch R, Kleim B. Standalone Smartphone Cognitive Behavioral Therapy–Based Ecological Momentary Interventions to Increase Mental Health: Narrative Review. JMIR mHealth and uHealth 2021; 8: e19836 [PMID:33180027 DOI:10.2196/19836]

Point 15: -- You should also comment on COVID in the conclusion section.

Response 15: We have added comments on COVID-19 in the conclusion section as suggested by the reviewer.

"The outbreak of COVID-19 exacerbated the severity of depression among college students worldwide and posed grave challenges to the prevention and treatment of depression, given that the coronavirus spread quickly with high infection rates,

changing the daily routines of college life and creating financial stress, academic stress, and long-term home isolation."

Point 16: *"Higher education institutions should clearly understand the potential risk factors related to college students' depression and employ advanced technology for more accurate screening and prevention."*

-- They should also work on increasing access to resources and clinical support, in a lot of college counseling centers there are long wait times to be seen, which is a barrier for care.

Response 16: We agree with the reviewer and have revised the original expression, which can also be found in the following paragraph.

"Higher education institutions should clearly understand the potential risk factors related to college students' depression and employ advanced technology for more accurate screening and prevention. They should also work on increasing access to resources and clinical support considering the common difficulties in making appointments and long-term waits for psychological consultation."

Point 17: *"Many traditional intervention measures, including e-mail, posters, campus popularization activities, pamphlets and first aid training courses for mental health, have little effect on the prevention and treatment of depression among college students, which may be due to the risk of stigmatization and psychological worries of patients."*

-- Are these measures? Or advertising, outreach efforts to bring mental health awareness.

Advertising and promoting mental health awareness, can"t prevent depression, I don"t think that is the aim, it is more to bring awareness and advertise where resources are available. Then this hopefully would improve access and resources, which could then lead a person to engage in treatment for the depression.

Response 17: We appreciate your careful reading. The measures mentioned here are indeed preventative measures to increase college students' awareness of depression at early stages. We have revised the original expressions in order to avoid possible misunderstandings.

"Many traditional precautionary measures are used to help students identify whether they suffer from depression, including e-mail, posters, campus activities, pamphlets, and first aid training courses about mental health. However, these measures may result in further concerns about the risk of stigmatization and psychological worries

of students. Therefore, in the future, we should avoid stigmatizing issues in the prevention of depression among college students and pay more attention to personalization and privacy in the development and application of precautionary measures. Second, the importance of general measures for the prevention and treatment of college students' depression should be combined with professional interventions such as cognitive intervention therapy and other evidenced-based treatment."

Point 18: *"Therefore, in the future, we should avoid the stigma issues in the prevention and treatment of depression among college students ."*

-- We definitely shouldn"t stop trying to destigmatize mental health, this is important to help connect people with resources,

When you say intervention measures, what are you referring to? Are you referring to screening tools to help with identifying individuals with depression to help them get connected with treatment? "intervention" is something we do in treatment to treat the depression.

Response 18: The interventions here refer to precautionary measures, and we have modified relevant expressions to avoid ambiguity.

"Many traditional precautionary measures are used to help students identify whether they suffer from depression, including e-mail, posters, campus activities, pamphlets, and first aid training courses about mental health. However, these measures may result in further concerns about the risk of stigmatization and psychological worries of students. Therefore, in the future, we should avoid stigmatizing issues in the prevention of depression among college students and pay more attention to personalization and privacy in the development and application of precautionary measures. Second, the importance of general measures for the prevention and treatment of college students' depression should be combined with professional interventions such as cognitive intervention therapy and other evidenced-based treatment."

Point 19: *"cognitive behavioral therapy and mindfulness-based interventions are effective in relieving depression symptoms in college students, the intervention effects of art, exercise, and peer support were better."*

-- Can you truly say "better" overall in the studies? So if I have a patient do more exercise their depression will improve more than if they start therapy? Or if they do art? Or have more friends? I don"t think this is always the case.

Response 19: Thanks for your kind comments. We have adjusted the words

and expressions to make it more precise and accurate.

"A meta-analysis showed that apart from cognitive behavioral therapy and mindfulness-based interventions, other measures, such as art, exercise, and peer support, are also effective in relieving depressive symptoms in college students."

Point 20: *"One limitation was that this paper analyzed relevant literature written in English, but the research in other languages, such as Chinese, Japanese, German, Italian, etc., were not included."*

-- Other limitations? Such as it was a retrospective review of data? Others? I would try to name at least 3.

Response 20: Thanks for your helpful advice, and we have added other limitations as suggested.

"Limitations of this study include the following. First, this paper analyzed relevant literature written in English, but research in other languages, such as Chinese, Japanese, German, and Italian, were not included. Second, the paper is a narrative review of extensive studies including the influencing factors, prediction, and prevention of depression in college students. We did not undertake explicit methods such as systematic reviews, nor did we involve substantial clinical results and corroborate the evidence in prior literature such as retrospective reviews. The study merely presents studies in the pertinent field by summarizing their main conclusions, which cannot be directly applied to clinical treatment."

Response to Reviewer 2 Comments

General Comments:

Very pertinent topic in today's day and age. Authors have done a good job in the comprehensive review of psychosocial factors attributing to the development of depression in college students. They did a decent job in reviewing the investigating methods of predicting depressive symptoms in this subset of population. The section on non-pharmaceutical prevention of depression is well-written.

Scientific Quality: Grade B (Very good)
Language Quality: Grade B (Minor language polishing)
Conclusion: Accept (General priority)

Specific Comments to Authors:

Point 1: May be authors can consider summarizing the salient points of non-pharmaceutical prevention measures in a table form. Please see attached the manuscript with a few more points that need to be addressed.

Response 1: We feel grateful for your constructive advice, and we have presented the prevention measures in a table form as suggested by the reviewer. Furthermore, we have addressed the points mentioned in the attached manuscript.

Table 2 General intervention measures

General intervention	Specific measures
High level of family support	emotional support from family
Interventions by colleges and universities	mental health services from the faculty, peers, and psychological counseling centers
Cultivation of healthy lifestyles	proper physical exercise, healthy sleep and diet, and regular sun exposure
Resilience therapy	Self-healing for positive emotional and cognitive outcomes, and increasing life

| | | satisfaction and resilience[错误!未找到引用源。,错误!未找到引用源。] |

Point 2: Table 1 Factors related to depression in college students -- Helpful table- to make it even more effective may consider utilizing the broad categories of biological, psychological and social factors and use the sub-categories as listed below.

Response 2: Thanks for your thoughtfulness, and we have adjusted the table according to the suggestion.

Table 1 Factors related to depression in college students

Category	Specific variable	Factor positively correlated with high levels of depression
Biological factors	Sex	Inconclusive
	Nationality	Ethnic minorities[错误!未找到引用源。], International student[错误!未找到引用源。,错误!未找到引用源。,错误!未找到引用源。]
		Low family socioeconomic status[错误!未找到引用源。,错误!未找到引用源。,错误!未找到引用源。,错误!未找到引用源。]
		Non-only child[错误!未找到引用源。], too many siblings[错误!未找到引用源。]
	Family	Parents divorced or having mental problems [错误!未找到引用源。,错误!未找到引用源。], family dysfunction[错误!未找到引用源。]
		Adverse childhood experiences such as injury, physical violence, psychological abuse and lack of family care[错误!未找到引用源。,错误!未找到引用源。]
		Insufficient social support especially family support[错误!未找到引用源。,错误!未找到引用源。,错误!未找到引用源。,错误!未找到引用源。]
	Personality and psychological state	Neuroticism[错误!未找到引用源。]
		Presence of psychological illness[错误!未找到引用源。,错误!未找到引用源。]

		High level of psychological stress (including value, aspiration, deprivation, or coping)[错误!未找到引用源。]
		Low self-efficacy[错误!未找到引用源。,错误!未找到引用源。]
		Solitude[错误!未找到引用源。]
	Year of study	Inconclusive
	Academic performance	Poor academic performance[错误!未找到引用源。,错误!未找到引用源。]
College experience	Financial support	Lack of financial resources and support[错误!未找到引用源。]
	Living arrangement	Do not have own room[错误!未找到引用源。,错误!未找到引用源。]
	College satisfaction	Low satisfaction with teachers and low satisfaction with college major[错误!未找到引用源。], Low satisfaction with university facilities[错误!未找到引用源。]
	Physical exercise	Lack of physical exercise[错误!未找到引用源。,错误!未找到引用源。,错误!未找到引用源。]
	Substance abuse	Smoking and drinking[错误!未找到引用源。,错误!未找到引用源。,错误!未找到引用源。] (especially alcohol intake[错误!未找到引用源。,错误!未找到引用源。])
Lifestyle	Sleep	Daytime drowsiness[错误!未找到引用源。,错误!未找到引用源。], poor sleep quality[错误!未找到引用源。], Sleep too short[错误!未找到引用源。] or too long[错误!未找到引用源。]
	Diet	Unhealthy food intake[错误!未找到引用源。], gluttony[错误!未找到引用源。], skipping breakfast[错误!未找到引用源。], malnutrition[错误!未找到引用源。]
	Network usage	Social Networking Sites, online game addiction[错误!未找到引用源。,错误!未找到引用源。]

Response to Reviewer 3 Comments

General Comments:

The paper brings an important and common concept of depression among college students. The paper discussed and well described about influencing factors, prediction and non-pharmacological preventions Table 1 succinctly brings out the influencing factors well Heading looks appropriate; the headings for areas of review given were appropriate. Literature review is adequate and up to date References are adequate and up to date.

Scientific Quality: Grade C (Good)
Language Quality: Grade A (Priority publishing)
Conclusion: Minor revision

Specific Comments to Authors:

Point 1: Heading 2 non pathological factors first sentence - "*Through literature analysis, the quantitative methods of nonpathological related factor analysis of college students' depression mainly include T-test, variance analysis, Pearson correlation analysis, and least square regression.*" This sentence is more about statistics and it does not fit well in there. It was difficult to understand and not clear why researchers brought the statistical analysis done in various papers being mentioned there.

Response 1: Thanks for your kind suggestion, and we have revised the sentence to make it more understandable.

"*The related factors can be roughly divided into four categories: biological factors, personality and psychological state, college experience, and lifestyle. The literature review presented the specific risk factors under four categories in Table 1. Subsequently, this paper explained certain factors with controversial research conclusions.*"

Point 2: Heading 3 paragraph 1 – "*Specific methods include support vector machines, decision trees, naïve Bayes classifiers, K-nearest neighbor classifiers and logistic regression [76].*" Support vector machines, decision trees and naïve Bayers classifiers are algorithms whereas K nearest neighbors and logistic regressions are statistical methods. They are accepted methods of prediction using statistics. They are not confined to depression alone and this may be

discussed separately in the manuscript.

Response 2: Thanks for your constructive comments, and we have elaborated on the prediction methods of support vector machines, decision trees, naïve Bayes classifiers, K-nearest neighbor classifiers and logistic regression respectively.

"Typical methods include support vector machines, decision trees, naïve Bayes classifiers, K-nearest neighbor classifiers and logistic regression(Srividya, M., Mohanavalli, S., & Bhalaji, N. 2018). More specifically, support vector machines are applied to classify handwritten digits and organize cancer tissue samples using microarray expression data(Lee Y,1991; Statnikov A, Wang L, and Aliferis CF.2008). Decision trees serve as a hierarchical classifiers, employing certain rules to divide the predictor space. The naïve Bayes classifier is based on Bayes" theorem and is employed to predict class membership probabilities. K-nearest neighbor classifiers are instance-based learning classifiers that compare a new datapoint with the k nearest sample datapoints, regarding the class with the nearest neighbors to the new datapoint as the class of the datapoint. Logistic regression, as a probabilistic linear classifier, directly estimates class probabilities with the logit transform(Srividya, M., Mohanavalli, S., & Bhalaji, N. 2018)."

References:

Lee Y, Handwritten digit recognition using k nearest-neighbor, radial-basis function, and backpropagation neural networks. Neural Comput. 3(3):440–449, 1991. 37 [PMID:31167319 DOI: 10.1162/neco.1991.3.3.440]

Srividya M, Mohanavalli S, Bhalaji N. Behavioral modeling for mental health using machine learning algorithms. J Med Syst 2018; 42:88 [PMID: 29610979 DOI: 10.1007/s10916-018-0934-5]

Statnikov A, Wang L, and Aliferis CF. A comprehensive comparison of random forests and support vector machines for microarray-based cancer classification. BMC Bioinformatics 9(1): 319, 2008 [PMID: 18647401 doi: 10.1186/1471-2105-9-319]

Point 3: Heading 4.1 *"In addition, the role of family support in the prevention and treatment of depression may have some heterogeneity."* Could authors please describe how did you conclude on heterogeneity?

Response 3: We appreciate your thoughtful question, and we have added statements on the heterogeneity of the effects of family support in the prevention and treatment of depression.

"In addition, some studies have found that the role family support plays in the prevention and treatment of depression also depends on the levels of perceived stress reactivity of individuals. Specifically, family emotional support can significantly alleviate the symptoms of depression when the perceived stress reactivity is low, but when the individual shows a high level of the perceived stress response, the effect of

family emotional support in preventing depression will be greatly reduced."

Point 4: In 4.2 on CBT discussion says *"its therapeutic effect was inconclusive."*
a. In the manuscript reference 116, which is a meta-analysis shows clear benefit of CBT. There were around 24 studies included in that meta-analysis, though your (reference 105) is not included and is different approach too. Rationale for this statement may be further modified.
b. In authors conclusion at the same time you mentioned that CBT has a positive effect with reference 116 being quoted. These two statements appears to be contradictory and needs further refinement.
c. Authors may note that in another meta-analysis Seligman study was included and still showed benefit Authors may have considered resilience therapy as a method of non-pharmacological approach too. I just bring attention to tow studies on this area. (Chronotype and depressive symptoms: A moderated mediation model of sleep quality and resilience in the 1st-year college students. Zhou J; Hsiao FC; Shi X; Yang J; Huang Y; Jiang Y; Zhang B; Ma N, Journal of clinical psychology [J Clin Psychol], ISSN: 1097-4679, 2021 Jan; Vol. 77 (1), pp. 340-355; Effectiveness of resilience training versus cognitive therapy on reduction of depression in female Iranian college students. Zamirinejad S; Hojjat SK; Golzari M; Borjali A; Akaberi A, Issues in mental health nursing [Issues Ment Health Nurs], ISSN: 1096-4673, 2014 Jun; Vol. 35 (6), pp. 480-8;)

Response 4: Thanks for your constructive suggestion, and we have further modified the statements, and added studies regarding resilience therapy as mentioned by the reviewer. The revised expressions are excerpted and shown as follows:

"Cognitive behavioral intervention (CBT), which aims to change individual thoughts and behaviors, has been the most widely used treatment method for depression thus far. Mindfulness intervention programs based on cognitive behavioral therapy and dialectal behavior group therapy can effectively alleviate the depressive symptoms of college students."

*"**Resilience therapy.** Some research has shown that resilience therapy can help individuals maintain mental health in the face of negative emotions and stressful events, thereby reducing the occurrence of depression(Zamirinejad, S., Hojjat, S. K., Golzari, M., Borjali, A. & Akaberi, A.,2014). Others have also found that it can reduce depressive symptoms by modulating the effects of timing and sleep quality on depression(Zhou, J. et al.2020)."*

References:

Zamirinejad S, Hojjat SK, Golzari M, Borjali A, Akaberi A. Effectiveness of Resilience Training versus Cognitive Therapy on Reduction of Depression in Female

Iranian College Students. *Issues in Mental Health Nursing* 2014; 35: 480-488 [PMID:24857532 DOI:10.3109/01612840.2013.879628]

    Zhou J, Hsiao FC, Shi X, Yang J, Huang Y, Jiang Y, Zhang B, Ma N. Chronotype and depressive symptoms: A moderated mediation model of sleep quality and resilience in the 1st-year college students. *J Clin Psychol* 2021; 77: 340-355 [PMID: 32761628 DOI: 10.1002/jclp.23037.]

Point 5: It was not clear from the literature review how the authors selected articles.

Response 5: We mainly searched articles published in the SCIE/SSCI journals in the Web of Science Core Collection, with depression of college student, influencing factors of depression, prediction of depression, and intervention measures of depression as the topic.

Point 6: Aim of the study mentions "*this paper reviewed the extant literature related to college students' depression and aimed to systematically present the status quo of nonpathological related factors, prediction and nonpharmaceutical prevention of college students' depression to provide a reference for the identification, prediction and prevention of college students' depression around the world in the future.*" But it was not clear how "systematically" they approached this study. If it is meant to be a literature review only then systematically did not go very well there. Or if they want to make it "systematic review", they may be able to mention methods and how they approached review.
In addition it requires a section of "methods" needs to be added and appropriate tables of papers reviewed may be added.
Authors could also possibly mention why a systematic review was not attempted which would have given high external validity.
Authors may include a table of studies they have reviewed A PRISMA check list may be included.

Response 6: Thanks for your kind comments. The paper is a narrative review of extensive studies including the influencing factors, prediction, and prevention of depression in college students. Given that it involves a broad range of topics, we did not undertake explicit methods such as systematic reviews, though we took some advantages of systematic reviews.

Response to Reviewer 4 Comments

General Comments:

Scientific Quality: Grade C (Good)
Language Quality: Grade B (Minor language polishing)
Conclusion: Minor revision

Specific Comments to Authors:

Point 1: This review demonstrates the factors related to depression in college students. Some description on the network usage and time may be added around Table 1.

Response 1: Thanks for your kind advice, and we have added description on the network usage and time as suggested by the reviewer.

*"**Network usage.** Relevant studies have indicated that depression in college students is associated with their time spent on the internet(Elhai JD, Vasquez J K, Lustgarten S D, Levine J C. & Hall B J.,2017; Huckins JF, daSilva AW, Wang R.et al.2019). Those who suffer from internet addiction and dependence are more likely to struggle with depression(Fortson BL, Scotti JR, Chen YC.et al.2007), and phubbing (a portmanteau of the words "phone" and "snubbing") has been proven to be a mediator of the relationship between depression and problematic internet use (Ivanova A, Gorbaniuk O, Błachnio A.et al.2020) mainly focusing on social networking and entertainment(Elhai J. D. & Contractor, A.2018)."*

References:

Elhai JD, Contractor AA. Examining latent classes of smartphone users: Relations with psychopathology and problematic smartphone use. *Computers in Human Behavior* 2018; 82: 159-166 [DOI: 10.1016/j.chb.2018.01.010 (2018)]

Elhai JD, Vasquez J K, Lustgarten S D, Levine J C, Hall B J. Proneness to Boredom Mediates Relationships Between Problematic Smartphone Use With Depression and Anxiety Severity. *Social Science Computer Review* 2018; 36: 707-720 [DOI:10.1177/0894439317741087]

Fortson BL, Scotti JR, Chen YC, Malone J, Del Ben KS. Internet use, abuse, and dependence among students at a southeastern regional university. *J Am Coll Health* 2007; 56: 137-144 [PMID: 17967759 DOI: 10.3200/JACH.56.2.137-146]

Huckins JF, DaSilva AW, Wang R, Wang W, Hedlund EL, Murphy EI, Lopez RB, Rogers C, Holtzheimer PE, Kelley WM, Heatherton TF, Wagner DD, Haxby JV, Campbell

AT. Fusing Mobile Phone Sensing and Brain Imaging to Assess Depression in College Students. *Front Neurosci* 2019; 13: 248 [PMID: 30949024 DOI: 10.3389/fnins.2019.00248]

Ivanova A, Gorbaniuk O, Błachnio A, Przepiórka A, Mraka N, Polishchuk V, Gorbaniuk J. Mobile Phone Addiction, Phubbing, and Depression Among Men and Women: A Moderated Mediation Analysis. *Psychiatric Quarterly* 2020; 91: 655-668 [PMID: 32146681 DOI:10.1007/s11126-020-09723-8]

Response to Science editor Comments

General Comments:

The paper discussed and well described about influencing factors, prediction and non-pharmacological preventions of depression in college students. Depression in college students is a very pertinent topic in this day and age.

Language Quality: Grade B (Minor language polishing)
Scientific Quality: Grade C (Good)

Point 1: Domains such as healthy living and evidence-based treatment of depression require further elaboration.

Response 1: Thanks for the valuable suggestion, and we have included further elaboration on the healthy lifestyles as influencing factors and treatment of depression in the manuscript.

*"**Lifestyle.** The depression issues of college students can largely be attributed to their lifestyles. First, the lack of regular physical activities increases the risk of depression, particularly for individuals whose amount of weekly physical activity fails to meet the standards of the World Health Organization. Second, substance abuse, such as excessive smoking, alcohol abuse or alcohol intake, can cause depressive disorders, and it should be noted that their relationship might be bidirectional. Studies have shown that individuals with depression are more likely to drink obsessively to relieve their negative emotions due to their poor self-control, which will in turn trap them in a vicious cycle between excessive drinking and depressive disorders. Third, unhealthy sleeping habits such as daytime sleepiness, poor sleep quality, and short or long sleep duration may lead to depressive symptoms. Fourth, unhealthy nutritional habits are also among the crucial factors that are strongly correlated with depression. From the perspective of dietary structure and nutritional habits, individuals with depression often report excessive intake of high-fat snacks and margarine/butter/meat fat and inadequate intake of fruits, vegetables, and lean protein. Overeating and skipping breakfast, especially for males, are also related to depressive disorders."*

*"**Cultivation of healthy lifestyles.** Apart from external support from family and intervention by higher education institutions, the prevention of depression also needs to rely on the patient's own efforts. Studies have shown that healthy lifestyles, including proper physical exercise, healthy sleep and diet, and regular sun exposure,*

can help prevent or reduce the occurrence of depression in college students(Vieira, F., Muraro, A. P., Rodrigues, P., Sichieri, R., Pereira, R. A., & Ferreira, M. G. 2021). For instance, students with a consistent sleep schedule and sufficient sleep duration are less likely to suffer from depression. Meanwhile, regular sun exposure aids in the synthesis of vitamin D in the body, which is crucial to release fatigue and change the negative moods that individuals with mild or moderate depression may experience. Proper physical activities are also important for stress and depression relief among college students(Melnyk, B., Kelly, S., Jacobson, D., Arcoleo, K., & Shaibi, G. 2014; Liang, A. , Zhao, S. , Song, J. , Zhang, Y. , Zhang, Y. , & Niu, X. , et al. 2021). Additionally, improving diet and overall nutrition is also an effective way to treat depression(Quirk, S. E., Williams, L. J., O'Neil, A., Pasco, J. A., Jacka, F. N., Housden, S., Berk, M., & Brennan, S. L. 2013). In particular, eating breakfast on time helps reduce the risk of depression. Certain nutrients, including zinc, magnesium, B vitamins, and cooking fats, have also been proven to be associated with depressive symptoms(Jacka, F. N., Mykletun, A., Berk, M., Bjelland, I., & Tell, G. S. 2011；Tolmunen, T., Hintikka, J., Ruusunen, A., Voutilainen, S., Tanskanen, A., Valkonen, V. P., Viinamäki, H., Kaplan, G. A., & Salonen, J. T. 2004；Sanchez-Villegas, A., Henríquez, P., Figueiras, A., Ortuño, F., Lahortiga, F., & Martínez-González, M. A. 2007). Therefore, colleges and universities can help prevent the occurrence of depression in college students by providing a regular diet with adequate intake of vitamins and nutrients(Saha, S., Okafor, H., Biediger-Friedman, L., & Behnke, A. 2021)."

References:

Jacka FN, Mykletun A, Berk M, Bjelland I, Tell GS. The association between habitual diet quality and the common mental disorders in community-dwelling adults: the Hordaland Health study. *Psychosom Med* 2011; 73: 483-490 [PMID: 21715296 DOI: 10.1097/PSY.0b013e318222831a]

Liang A, Zhao S, Song J, Zhang Y, Zhang Y, Niu X, Xiao T, Chi A. Treatment effect of exercise intervention for female college students with depression: analysis of electroencephalogram microstates and power spectrum. *Sustainability* 2021; 13: 6822 [DOI:10.3390/su13126822]

Melnyk B, Kelly S, Jacobson D, Arcoleo K, Shaibi G. Improving physical activity, mental health outcomes, and academic retention in college students with Freshman 5 to Thrive: COPE/Healthy Lifestyles. *J Am Assoc Nurse Pract.* 2014; 26: 314-322 [PMID: 24170429 DOI: 10.1002/2327-6924.12037]

Quirk SE, Williams LJ, O'Neil A, Pasco JA, Jacka FN, Housden S, Berk M, Brennan SL. The association between diet quality, dietary patterns and depression in adults: a systematic review. *BMC Psychiatry* 2013 Ju; 13: 175 [PMID: 23802679 DOI: 10.1186/1471-244X-13-175]

Saha S, Okafor H, Biediger-Friedman L, Behnke A. Association between diet and symptoms of anxiety and depression in college students: A systematic review. *Journal of American College Health* 2021; 1-11 [PMID:34087087] DOI:10.1080/07448481.2021.1926267]

Sanchez-Villegas A, Henríquez P, Figueiras A, Ortuño F, Lahortiga F, Martínez-González MA. Long chain omega-3 fatty acids intake, fish consumption and mental disorders in the SUN cohort study. *Eur J Nutr* 2007; 46: 337-346. [PMID: 17717628 DOI: 10.1007/s00394-007-0671-x]

Tolmunen T, Hintikka J, Ruusunen A, Voutilainen S, Tanskanen A, Valkonen VP, Viinamäki H, Kaplan GA, Salonen JT. Dietary folate and the risk of depression in Finnish middle-aged men. A prospective follow-up study. *Psychother Psychosom* 2004; 73: 334-339 [PMID: 15479987 DOI: 10.1159/000080385]

Vieira FDST, Muraro AP, Rodrigues PRM, Sichieri R, Pereira RA, Ferreira MG. Lifestyle-related behaviors and depressive symptoms in college students. *Cad Saude Publica* 2021; 37: e00202920 [PMID: 34644759 DOI: 10.1590/0102-311X00202920.]

Point 2: The author can further refine some sentences and give clearer conclusions and suggestions.

Response 2: We feel grateful for your constructive suggestion, and we have polished the language of the manuscript, and in particular, have made the conclusions and suggestions more understandable.

Point 3: The form of the table in the article should adopt the form of three-line table.

Response 3: Thanks for your careful reading, and we have adjusted the table in the form of three-line table as suggested by the reviewer.

Response to Company editor-in-chief Comments

General Comments:

I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Psychiatry, and the manuscript is conditionally accepted.

Point 1: I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office"s comments and the Criteria for Manuscript Revision by Authors. Please be sure to use Reference Citation Analysis (RCA) when revising the manuscript. RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. For details on the RCA, please visit the following web site: https://www.referencecitationanalysis.com/.

Response 1: We feel grateful for your kind comments. RCA is indeed a useful tool for literature analysis, and we find it helpful in the revision of our manuscript.

Point 2: Please authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content.

Response 2: Thanks for your careful reading, and we have adjusted the table format as suggested by the reviewer.