

Dear Editor,

We are very glad that we have this opportunity for considering our manuscript for publishing in the *World Journal of Psychiatry*. The revision process and all suggestions have greatly improved our manuscript. We tried to answer all reviewers' comments point by point and marked them in the text in yellow. New references were also added and marked in the text in yellow.

Answers to Reviewer's #1 comments

1. Introduction: Kindly refer to the sentence: It is the most common chronic disabling disease in young adults and middle-aged people..... The authors cited the reference: Browne P, Chandraratna D, Angood C, Tremlett H, Baker C, Taylor B V., Thompson AJ. Atlas of multiple sclerosis 2013: A growing global problem with widespread inequity. Neurology 2014; 83: 1022-1024. [PMID: 25200713 DOI: 10.1212/WNL.0000000000000768]. However the article cited mentions: "Multiple sclerosis (MS) is one of the world's most common neurologic disorders, and in many countries it is the leading cause of nontraumatic neurologic disability in young adults." The authors interpretation about MS as most common chronic disabling disease in young adults and middle-aged people, is not correct. The authors may rephrase their sentence.

This sentence is now rephrased per the reviewer's recommendation into: "It is one of the most common neurologic disorders and represents the most common cause of acquired neurological disability among young adults, affecting 2.5 million people worldwide".

2. Introduction: Kindly refer to the sentence: MS patients are two or three times more likely than general population to suffer from mood and mental health disorders..... It would be better if the authors will report it as... two to three times... instead of two or three times.

This sentence is now revised per the reviewer's recommendation. We changed the sentence: "MS patients are two or three times more likely than general population to suffer from mood and mental health disorders" to "MS patients are two to three times more likely than the general population to suffer from mood and mental health disorders.

3. Introduction: Paragraph 2 and 3 looks disjointed.

Thank you for this suggestion. Now we reordered paragraphs 2 and 3.

4. The authors need to discuss about the genetics of multiple sclerosis and its possible association with psychosis.

[https://www.thelancet.com/journals/laneur/article/PIIS1474-4422\(22\)002551/fulltext](https://www.thelancet.com/journals/laneur/article/PIIS1474-4422(22)002551/fulltext)

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<https://www.frontiersin.org/articles/10.3389/fimmu.2017.00425/full>

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We additionally discussed the multiple sclerosis genetics and possible association with psychosis (section Neuroimmunological aspects of MS and psychosis, paragraph 2). We also added new references and marked them in the text in yellow (reference number 16, 17, 18, 19).

5. The authors also need to discuss about role of immunomodulators used in the treatment of MS, in causation of psychosis.

Now, we discuss the role of immunomodulators used in the treatment of MS, in the causation of psychosis (section Known facts and treatment challenges in MS-related psychosis, paragraph 1). We also added new references and marked them in the text in yellow (reference number 60, 61, 62).

6. The authors should discuss about practice implications of treating psychosis in MS (Safety and efficacy of antipsychotic drugs).

Per the reviewer's recommendation, we discussed the practice implications of treating psychosis in MS (safety and efficacy of antipsychotic drugs) (section Known facts and treatment challenges in MS-related psychoses, paragraph 5). We also added new references and marked them in the text in yellow (reference number 82, 83, 84, 85, 86).

7. Conclusion is lengthy. It does not require references. It should be the summary and implications on the theme.

We have now excluded citations from the Conclusion, summarized the content of the manuscript, and altogether shorter the Conclusion section. Hope that this section is now greatly improved per the reviewer's suggestions.

Answers to Reviewer's #2 comments

This minireview paper summarizes recent advances in the explanation of comorbidity between psychosis and multiple sclerosis. Authors analyze the shared

and distinct immuno-pathogenetic pathways and mechanisms which underpin the two conditions and their exacerbations. Implications for pharmacological treatment strategies are reviewed as well. The manuscript may benefit from inclusion of few more sources, in order to exceed the usually considered minimum of 80 titles for minireview. Those sources may be focused on the issue of psychiatric validity and construction of nomothetic networks for diagnosis, which may approximate psychiatry to the disciplinary context of medicine.

We have now added the references per the requirements of both reviewers and especially discussed the importance of nomothetic networks in this context (section Neuroimmunological aspects of MS and psychosis, paragraph 6, reference number 52, in summary, more than 80 titles).

The search strategy should be outlined in the introduction, including key words, covered time frame and data bases.

Per the reviewer's recommendation, now we added in the Introduction a search strategy, including keywords, covered time frame, and databases, considering also the special requirements of the mini-review (section Introduction, paragraph 5).

We have checked and corrected all technical aspects for the manuscript preparation, as required below:

ABBREVIATIONS

In general, do not use non-standard abbreviations, unless they appear at least two times in the text preceding the first usage/definition. Certain commonly used abbreviations, such as DNA, RNA, HIV, LD50, PCR, HBV, ECG, WBC, RBC, CT, ESR, CSF, IgG, ELISA, PBS, ATP, EDTA, and mAb, do not need to be defined and can be used directly.

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Example 2: *Helicobacter pylori* (*H. pylori*)

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Language Quality: Grade B (Minor language polishing)
Scientific Quality: Grade B (Very good)

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Best regards,

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