Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
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
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Name of journal: World Journal of Psychiatry Manuscript Type: ORIGINAL ARTICLE Manuscript Number: 87583 Effect of cognitive-behavior therapy training and psychological nursing on the midwifery process in the delivery room   In this article, the authors attempted to investigate the clinical effects of CBT training and psychological care in the process of assisting in the delivery room and to analyze their therapeutic effects on women in labor. Although the article has scientific rigor, several minor flows need to be improved before publication. Minor Comments: 1. The abstract section is worthy; just need to add a focus point in the abstract section. 2. Delete we, our etc. from the manuscript. 3. Originality of the work should be improved by the author (either in the conclusion or introduction section). 4. The discussion section is unclear and wordy. Many redundant sentences need to be deleted. 5. The flow of the discussion is still not perfect and unspecific.

PEER-REVIEW REPORT

Name of journal: *World Journal of Psychiatry*

Manuscript NO: 87583

Title: Analysis of the effect of cognitive behavior training and psychological nursing in the process of midwifery in delivery room

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 07746706

Position: Peer Reviewer

Academic degree: PhD

Professional title: Doctor, Research Assistant

Reviewer's Country/Territory: Norway

Author's Country/Territory: China

Manuscript submission date: 2023-09-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-09-26 09:14

Reviewer performed review: 2023-10-08 09:37

Review time: 12 Days

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
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
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors conducted a retrospective study to explore the effect of cognitive-behavior therapy training and psychological nursing on the midwifery process in the delivery room. A total of 140 mothers were selected for the study. They found that CBT training and psychological care for mothers in the process of midwifery can effectively improve maternal anxiety and depression, shorten labor duration, reduce postnatal complications, and improve nursing satisfaction and nurse-patient relationships. This is a well-presented and well-conducted study. The experimental design of this study is very good and the purpose is clear. The limitations of the study are well underlined in the discussion. I have few comments: -On page 9 Baseline data and pathological characteristics Section: 1.30 weeks and 1.25 ± 0.15 births. What does that mean? Is it redundant? - Domicile-related content is presented in Table 1, but the results in the main text are not analyzed. Is more analysis necessary? - On page 9 Mental status scores before and after delivery in both groups: The results in the article do not match the presentation in Table 2, and please confirm.

Reviewer #1:

Q1: On page 9 Baseline data and pathological characteristics Section: 1.30 weeks and 1.25 ± 0.15 births. What does that mean? Is it redundant?

Response:Thank you very much for your advice on our paper, and we are very sorry for the errors in the last submission of the manuscript We have carefully reviewed what you have mentioned and have revised it as follows:

A total of 140 study subjects were included in this study. The baseline data of the study subjects were collected for comparison, which showed no statistically significant difference between the age, weight, domicile, number of births, gestational week between the two study groups ($P>0.05$), and the data of the two groups were comparable. The results showed that the mean age of the study subjects in the observation group was 27.23 ± 1.46 years, the mean weight was 72.91 ± 5.44 kg, the gestational period was 39.41 ± 1.22 weeks, and the number of births was 1.23 ± 0.30, while the mean age of the study subjects in the control group was 27.25 ± 1.25 years, the mean weight was 72.91 ± 5.44 kg, the gestational period was 39.25 ± 1.30 weeks, and the number of births was 1.18 ± 0.21. The results are presented in Table 1.

Q2: Domicile-related content is presented in Table 1, but the results in the main text are not analyzed. Is more analysis necessary?

Response:Thank you very much for your advice on our paper, and we are very sorry for the errors in the last submission of the manuscript We have carefully reviewed what you have mentioned and have revised it as follows:

A total of 140 study subjects were included in this study. The baseline data of the study subjects were collected for comparison, which showed no statistically significant difference between the age, weight, domicile, number of births, gestational week between the two study groups ($P>0.05$), and the data of the two groups were comparable. The results showed that the mean age of the study subjects in the observation group was 27.23 ± 1.46 years, the mean weight was 72.91 ± 5.44 kg, the gestational period was 39.41 ± 1.22 weeks, and the number of births was 1.23 ± 0.30, while the mean age of the study subjects in the control group was 27.25 ± 1.25 years, the mean weight was 72.91 ± 5.44 kg, the gestational period was 39.25 ± 1.30 weeks, and the number of births was 1.18 ± 0.21. The results are presented in Table 1

Q3: On page 9 Mental status scores before and after delivery in both groups: The results in the article do not match the presentation in Table 2, and please confirm.

Response:Thank you very much for your advice on our paper, and we are very sorry for the errors in the last submission of the manuscript We have carefully reviewed what you have mentioned and have revised it as follows:

The psychological state scores of the mothers pre- and post- delivery were assessed in both groups, and the results showed no statistically significant difference in those of the mothers before delivery. After childbirth, the SAS and SDS scores of the observation group have significant compared with control group ($p<0.05$). The results are presented in Table 2.

Reviewer #2:

Q1: The abstract section is worthy; just need to add a focus point in the abstract section.

Response: Thank you very much for your advice on our paper, and we are very sorry for the errors in the last submission of the manuscript. We've made changes to the abstract

Q2: Delete we, our etc. from the manuscript.

Response: Thank you very much for your advice on our paper, and we are very sorry for the errors in the last submission of the manuscript. We have carefully reviewed what you have mentioned and have deleted or corrected "we" and "our" throughout the text.

Q3: Originality of the work should be improved by the author (either in the conclusion or introduction section).

Response: Thank you very much for your advice on our paper, and we are very sorry for the errors in the last submission of the manuscript We have carefully reviewed what you have mentioned.

Q4: The discussion section is unclear and wordy. Many redundant sentences need to be deleted.

Resonse: Thank you very much for your advice on our paper, and we are very sorry for the errors in the last submission of the manuscript. We have carefully reviewed what you mentioned and removed the repeated sentences in the discussion.

Q5: The flow of the discussion is still not perfect and unspecific.

Response: Thank you very much for your advice on our paper, and we are very sorry for the errors in the last submission of the manuscript. We have carefully reviewed what you mentioned and removed the repeated sentences in the discussion