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ESPS Peer-review Report

Name of Journal: World Journal of Psychiatry

ESPS Manuscript NO: 4263

Title: Comfortable interpersonal distance and coping strategies associated with psychopathology in patients with depression and schizophrenia

Reviewer code: 02445256

Science editor: Wen, Ling-Ling

Date sent for review: 2013-06-24 21:03

Date reviewed: 2013-06-29 16:39

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This manuscript represents an interesting and well-done study and the authors' effort is appreciated. I have no suggestions for the authors.



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ESPS Peer-review Report

Name of Journal: World Journal of Psychiatry

ESPS Manuscript NO: 4263

Title: Comfortable interpersonal distance and coping strategies associated with psychopathology in patients with depression and schizophrenia

Reviewer code: 02445222

Science editor: Wen, Ling-Ling

Date sent for review: 2013-06-24 21:03

Date reviewed: 2013-07-04 00:26

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The MS entitled "Comfortable interpersonal distance and coping strategies associated with psychopathology in patients with depression and schizophrenia" is generally well-written, the topic is interesting, invigorating and of potential clinical relevance. The study has been completely described, Results are clear and the Discussion is adequate. I have some comments and questions which should be addressed in a revision: (1) patients or people with ... (instead of, e.g. schizophrenia patients...) should be preferred throughout the MS. (2) the term "depression" could be misleading. If I got it right, all patients with "depression" had an adjustment disorder with depressive symptoms (not fulfilling criteria of DSM major depression or dysthymia...). Thus, to avoid misinterpretation, this point should be clarified throughout. (3) About 50% of patients with schizophrenia have substantial depressive symptoms during the course of their illness (ref. e.g. H?fner H et al. 2005 Schiz Res; an der Heiden W et al. 2005 Eur Arch Psychiatry Clin Neurosci; Müller MJ et al. 2001 Schiz Bull, Siris S et al.). Did the authors address this issue in their study? (e.g. assessment of depressive symptoms in schizophrenia) Some "conflicting" findings could be partly explained by an "overlap" of affective and cognitive disturbances related to schizophrenia. If no assessment for further analyses is available, this point should at least be mentioned. (4) Practical implications? Finally, a few - more or less clear-cut - recommendations for clinicians could be very helpful with regard to "interpersonal distance" ("diagnostic/therapeutic" distance?) and "coping strategies". Best regards.



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ESPS Peer-review Report

Name of Journal: World Journal of Psychiatry

ESPS Manuscript NO: 4263

Title: Comfortable interpersonal distance and coping strategies associated with psychopathology in patients with depression and schizophrenia

Reviewer code: 02445261

Science editor: Wen, Ling-Ling

Date sent for review: 2013-06-24 21:03

Date reviewed: 2013-07-04 05:49

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This is, in summary, a manuscript aimed to investigate whether comfortable interpersonal distance and coping strategies were associated with psychopathology in depressed and schizophrenic patients. The manuscript is well-written as presented and only minor changes are needed in my opinion in order to enhance the general structure as well as the quality of the paper. The authors may find as follows my comments/suggestions. First, both the Introduction and Discussion sections are too long and need to be reduced in length. When the authors described the following conceptual foundations: emotion regulation, coping strategies and approach-avoidance distress regulation, these sections may be synthesized in order to more directly clarify the importance of understanding the interplay between emotion-regulation strategies and individual symptoms of psychiatric conditions (as stated by the same authors in their abstract). Similarly, when the authors mentioned the relationships between distancing and diagnosis; distancing and symptomatology; distancing and coping, they should focus on the assumption that the depressed and schizophrenic patients simply use different dysfunctional emotion-regulation strategies in order to cope with psychiatric symptoms as well as related distress. Also, in the Materials and Methods section, when the inclusion criteria have been reported, the authors should clarify whether patients with other comorbid Axis-I disorders and/or personality disorders could be recruited in the present study. In addition, whether BDI has been administered in healthy controls needs to be explained. More details are requested in order to clarify this point. Furthermore, when the authors listed the limitations of the present study at the end of the Discussion section, they should also mention the small size of their sample and the utilization of BDI, which is well known as a self-reported psychometric instrument, to assess depressive



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symptomatology. I suggest to more carefully describe the main limitations of their study. Moreover, the last lines in the Conclusion section seem too generic and quite unclear. Which kind of interventions, in the authors' opinion, could be provided to make patients able to cope with acute stressors together with reducing the likelihood of future re-hospitalizations? Should these interventions be conducted on depressed or schizophrenic patients or both of them? Finally, the manuscript should be revised by a Native English speaker for the quality of language.