

Answering Reviewers

Dear Editor and Reviewers,

Thank you for your comments on the primary draft of this manuscript. Each recommendation was carefully considered. In bulleted format below, we address the reviewers' specific concerns and note how the manuscript was revised based on the recommendations. Comments are separated by reviewer. We sincerely appreciate the time and effort given by the editor and reviewers in providing such insightful comments.

Reviewer # 506093

"Dear author, this is an interesting work that highlights the use of hypnosis as a complementary therapy to conventional treatment related of burn injury pain. It's clear and well written, the quality of the English language is fairly good and, moreover, a good revision of literature about the clinical use of hypnosis as complementary analgic analgesic therapy. This work may suscitae a fair interest because medical doctors, who are experts in pain management, are not always prone to the use non medical therapies in pain treatment. The paragraph, where a plausible physiopathological explanation is given: clinical hypnosis may increase tolerance and lower pain perception is given, is very interesting. I have, though, a few observations: -

- "It is often reported that patients that underwent therapeutical clinical hypnosis, request a lower amount of opioid drugs in order to control pain. Which were the opioid drugs that were used? And which were the dosages? It would be helpful if you put in detail the precise therapeutical scheme of drugs given, in order to have a broader and more complete vision of the treatment the patients went through."
 - **This information varied from study to study (possibly among patients as well) and was not always reported in full detail in the cited works. More information is now provided in paragraph 8 under case studies.**
- "There are a few hypnosis techniques that were described and used: are they equivalent among each other, or some of them are more efficient than others?"
 - **This information is now clarified in the manuscript (under "Hypnosis Techniques and Suggestions for Burn Care").**

Reviewer # 504975

"Re: Hypnosis for burn-related pain: Case studies and a review of the literature This is a timely, well written review that highlights the beneficial effects of hypnosis as part of an integrated approach to manage pain in the burn patient. However, I have a few comments as specified below:

- "Introduction 2nd paragraph, 1st sentence: Please mention allodynia as this is one of the features of burn pain."
 - **'allodynia' was added.**
- "3rd paragraph, last sentence: "As previously mentioned, ..." Where was that mention in the manuscript? If not mentioned before, please amend."
 - **'As previously mentioned' was deleted.**

- “4th paragraph, 2nd sentence: “... and ensure the best care” Consider changing to “...best possible care””
 - **‘possible’ was added**
- “4th paragraph, 3rd sentence: Isn’t this sentence repeating what was said in the previous one? Consider deleting or integrating it with previous sentence.”
 - **This sentence was deleted, and ‘integrative’ was added to the sentence above.**
- “At the end of the introduction, please include an introductory sentence/paragraph that links with next sections and explains the goal of this review. Efficacy of hypnosis for burn pain & associated symptoms The paragraph in this section could be part of the introductory sentence/paragraph for the review.”
 - **An introductory sentence was added to the end of the introduction.**
- “Please indicate the criteria for searching and selecting the cited papers in this review.”
 - **Selection criteria of the papers are detailed in paragraph 1 of the Efficacy of Hypnosis for Burn Pain & Associated Symptoms section. A paragraph detailing the search criteria is now also included.**
- “This section, which includes case studies, case series and controlled trials, summarizes the findings of each manuscript, in an isolated way, without analysing and discussing them any deeper. Probably the one time that integration and comparisons were made was in the 8th paragraph under “Controlled trials”. Readers will really like to know what are your thoughts regarding these findings. These could be integrated all along the presentation of cases/trials or at the end of each subsection.”
 - **Cases and studies are presented in chronological order in the manuscript, but further discussion and comparisons were added throughout pages 9-18.**
- “Case studies & case series 6th paragraph, last sentence: “but also decreased swelling and increased blood flow to the injured site.” As it reads right now, a decrease in swelling and increase in blood flow to the injured site was attributed to hypnosis. Although this may have been stated in the cited work, it could be misleading to the readers of this review since there is not enough scientific evidence to back up this statement. Consider deleting or rephrasing.”
 - **“may have” was added to this sentence to clarify.**
- “8th paragraph, 2nd sentence: “... low dosage opioid treatment.” Please indicate drug name, dose/dosage, route and frequency of administration”
 - **Drug name (fentanyl), dosages, and administration frequency added; Route was not explicitly stated in cited work.**
- “9th paragraph, 1st and 3rd sentences: instead of “virtual reality” use the abbreviation “VR”.”
 - **Abbreviation used.**
- “10th paragraph: Please expand your concluding remarks for this section. Readers will like to know what are your thoughts regarding these cases. What % of burn pain patients may respond favorably and therefore benefit from hypnosis.”
 - **These remarks were expanded.**
- “Controlled trials The information presented in this section is repeated in Table 1. Consider deleting Table 1. There is no need to include P, F and t values. Please delete them throughout and consider providing actual values for the various measurements (e.g. urine output in 3rd paragraph under “Controlled trials”). This would provide the reader with clinically relevant information.”

- **The intention behind Table 1 is to provide a brief, easy to access summary of the content available within the paragraphs of the paper. We believe that a table like this is warranted due to the large quantity of information contained in the main text of the document, and that it makes our review article user friendly for readers who would like to come back to our paper for a quick reference or the refresh memories about the contents. The purpose of the p , F , and t values is to summarize the information and to show that findings are, indeed, statistically significant. In many of the cited works, actual values were not provided. However, for the example above (from the 3rd paragraph), percentages are now added to the manuscript. The p , F , and t values have now been deleted from the tables to avoid repetition.**
- “1st paragraph: “Patients in the hypnosis group received significantly less pain medication ($F = 55.58$, $p < .01$ for patients with 31-60% TBSA; $F = 40.91$, $p < .01$ for patients with $< 30\%$ TBSA). Patients under 18 used significantly less medication than the adults ($p < .05$) which the authors attribute to less psychological resistance.” Consider rephrasing to something like: “Patients in the hypnosis group received significantly less pain medication than those in the control group. In the hypnosis group, patients under 18 used significantly less medication than the adults, which the authors attributed to less psychological resistance.””
 - **‘than those in the control group’ was added to the sentence stated here. The values are listed here in order to clarify the significance of the findings.**
- “2nd paragraph, 2nd sentence: “... who had bilaterally identical or equivalent burns ...”. It is hard to believe that burns were identical, please delete this term.
 - **This was reworded to ‘bilaterally symmetrical or comparable burns.’**
- “4th paragraph: “Mean differences of redness and temperature differences were not statistically significant, though they were cons”
 - **The reviewer’s comments seem to be cut off here in mid-sentence without enough information to assess its meaning.**

Reviewer # 506098

“Dear Authors, this is a very interesting review on the use of hypnosis for burn-related pain. The manuscript is clear, comprehensive, and convincing. This paper may be certainly of interest to readers involved in the treatment of burn pain.”

Reviewer # 529915

“Dear Authors The quality of the MS presentation is very good. I shall suggest one modification.

- “You are discussing the role of complementary therapies and hypnosis is one of those. After your introduction if you make a separate heading of "complementary therapies" and give an outline of such therapies and then start "integration of complementary therapies" it will make the MS more impressive and organized.”
 - **“Integrating” was removed from the heading because the focus of this section. There is limited research on integration. The focus of most of the research thus far has been on treatment effectiveness, though the authors of one case study noted that hypnosis was easily implemented in a hectic hospital.**

Again, we appreciate your comments. Thank you for taking the time to help us improve the manuscript.