

Dear editor and Reviewers,

Thanks a lot for having reviewed our manuscript. Now we have revised the manuscript according to the editors' and reviewers' comments. Most of the revisions are in the manuscript. Some explanations regarding the revisions of our manuscript are as follows.

Reviewer #1:

Scientific Quality: Grade D (Fair)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Major revision

Specific Comments to Authors: This is a mini-review on the subject of depression, which often accompanies PTSD. This often takes a chronic course and is partially resistant to therapy. Psychotherapy appears to be more effective than drug treatment. The course characteristics and effectiveness of prazosin indicate a special pathogenesis of this form of depression. The topic is current and of considerable clinical relevance. It was also prepared in an appealing way, and important works on this were cited. The main problems with the manuscript emerge as follows: First, the language still needs significant improvement. A translator should be chosen who is familiar with the language of medicine and science. Second, the bibliography does not conform to standards in any way. Often the details of the journal, the year of publication, the PMID or the DOI number are missing. Third, the rough structure with the headings and subheadings must be adapted to the journal style. Four, the train of thought is often a bit unclear, the sentences are too long and the thoughts get mixed up. The messages of the authors must be formulated more clearly and in much shorter sentences. Five, of all things, the last quote is wrong (it must be 43 instead of 32). Six, Kurt Schneider's classification enjoyed wide acceptance until 1994 (introduction of DSM-IV). Seven, I took the liberty of editing the manuscript in terms of language and content. I am making this new text version available to you for a possible revision of the manuscript.

1. First, the language still needs significant improvement. A translator should be chosen who is familiar with the language of medicine and science.

Thanks for pointing this out. The language has been edited by an expert in Medjaden Inc and a professor who had worked in US University for more than 20 years.

2. Second, the bibliography does not conform to standards in any way. Often the details of the journal, the year of publication, the PMID or the DOI number are missing

We have revised the bibliography based on Endnote X8 according to the WJP,

3. Third, the rough structure with the headings and subheadings must be adapted to the journal style.

We have done

4. Four, the train of thought is often a bit unclear, the sentences are too long and the thoughts get mixed up. The messages of the authors must be formulated more clearly

and in much shorter sentences.

The English expert from Medjaden Inc. has edited the language.

5. Five, of all things, the last quote is wrong (it must be 43 instead of 32).

We have changed it

Six, Kurt Schneider's classification enjoyed wide acceptance until 1994 (introduction of DSM-IV)

We added.

7. Seven, I took the liberty of editing the manuscript in terms of language and content.

I did not find the manuscript you edited, and thanks for your kind help.

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: The manuscript represents a narrative review.

1. The authors should bring the structure of the manuscript to that of a scientific work, with abstract, keywords and conclusions. Some summarized conclusions are mandatory.
2. The authors should also bring burnout syndrome into the discussion (Dimitriu MCT, Pantea-Stoian A, Smaranda AC, Nica AA, Carap AC, Constantin VD, Davitoiu AM, Cirstoveanu C, Bacalbasa N, Bratu OG, Jacota-Alexe F, Badiu CD, Smarandache CG, Socea B. Burnout syndrome in Romanian medical residents in time of the COVID-19 pandemic. Med Hypotheses. 2020 Nov;144:109972. doi: 10.1016/j.mehy.2020.109972. Epub 2020 Jun 7. PMID: 32531540; PMCID: PMC7276114; Cotel A, Golu F, Pantea Stoian A, Dimitriu M, Socea B, Cirstoveanu C, Davitoiu AM, Jacota Alexe F, Oprea B. Predictors of Burnout in Healthcare Workers during the COVID-19 Pandemic. Healthcare. 2021; 9(3):304. <https://doi.org/10.3390/healthcare9030304>).

Thank you for your helpful comments. We have revised the manuscript according to your comments and suggestions.

1. Details on the intermediate outcome of the first 2 cases can be added in a line.

We have added you mentioned in revised manuscript.

2. In discussion section, discuss the mechanistic basis for the action of sevoflurane

That is a very good point, and we discussed the burnout syndrome.

Reviewer #3:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors: correct grammar: For evaluation and intervention of these veterans' psychological crisis, posttraumatic stress disorder (PTSD) was first

induced in DSM-III in 1980 (4)." For the evaluation and intervention of these veterans' psychological crisis, posttraumatic stress disorder (PTSD) was first introduced in DSM-III in 1980 (4)." correct grammar: "The diagnosis of Complex PTSD in ICD-11 (8) requires not only meeting the diagnostic criteria of PTSD but also needs evidence of disorders in self-organization (DSO)," It should be "The diagnosis of Complex PTSD in ICD-11 (8) requires not only meeting the diagnostic criteria of PTSD but also evidence of disorders in self-organization (DSO)," grammatical mistake : "Although genetic heritability is one of the risk factors for the development of PTSD or MDD in the population with traumas, a genetic factor may be less important as trauma exposure increases, that is, high levels of trauma are likely to lead to PTSD and MDD (11)." It should be "Although genetic heritability is one of the risk factors for the development of PTSD or MDD in the population with traumas, a genetic factor may be less important as trauma exposure increases, that is, high levels of trauma are likely to lead to PTSD and MDD (11)." grammatical mistake : "And accordingly, multiple traumatic events could have cumulative effects on the mental health of the victims (14)." It should be: "Therefore, multiple traumatic events can have cumulative effects on the mental health of the victims (14)." section 2 : there are a few minor corrections that could improve clarity: "Generally speaking, the impact of trauma on an individual's mental state is mainly related to the intensity, duration, and occurrence age of traumatic events." It could be rephrased as "The impact of trauma on an individual's mental state is mainly determined by the intensity, duration, and age at which the traumatic event occurred." "And accordingly, multiple traumatic events could have cumulative effects on the mental health of the victims (14)." It should be "Therefore, multiple traumatic events can have cumulative effects on the mental health of the victims (14)." Section 3: However, there are a few minor corrections that could improve clarity: "suffering from interpersonal trauma (individualized trauma) such as abuse, neglect, or sexual violence often brings negative consequences, which are easily internalized and chronic, gradually becoming Piaget proposed "trauma mode" (17)" It should be rephrased to "suffering from interpersonal trauma (individualized trauma) such as abuse, neglect, or sexual violence often brings negative consequences which are easily internalized, become chronic and gradually develop into what Piaget referred to as "trauma mode" (17)." "Because PTSD and trauma-related depression have an overlapped relationship in time, PTSD and depression not only often exist as comorbidity, as was shown in a meta-analysis (k = 57 studies; N = 6,670 participants) that 52% of individuals comorbid PTSD with MDD (18)," it should be rephrased to "Because PTSD and trauma-related depression often overlap in time, it is not uncommon for PTSD and depression to co-occur; a meta-analysis (k = 57 studies; N = 6,670 participants) found that 52% of individuals had comorbid PTSD and MDD (18)." "Although the depressive symptoms existing in PTSD can clearly predict the occurrence and severity of depression, some scholars like Freedman and Shalev (19) and Bleich (20) believed that there was no chronological evolution from PTSD to MDD." it should be rephrased to "Although the depressive symptoms present in PTSD can predict the occurrence and severity of depression, some scholars such as Freedman and Shalev (19) and Bleich (20) argue that there is no chronological progression from PTSD to MDD."

Answer: Thank reviewer's helpful comments. We have revised the manuscript carefully according to the reviewer's comments and suggestions. We thank reviewer again for the great help in improving the quality of our manuscript.

Additionally, the following recommendations can be made to revise the paper:

2. The title of the paper should include a mini review of the current literature on psychological trauma, trauma-related depression, and PTSD. The aim of the paper should be clearly stated in the introduction. This will help the reader understand the purpose and significance of the study.

Answers: We have revised the title and the introduction

3. The introduction should also explain why this study is needed and how it contributes to the current literature on the topic.

Answers: We have revised

4. The authors should discuss any updates or new information that is being added to the literature through this study.

Answers: We have revised and added more discussion

5. The authors should raise and outline important questions relevant to the topic in the introduction or literature review section.

Answers: We have raised and outline the important questions in the introduction and literature review section

6. The authors should mention the strengths and weaknesses of the study, as well as the limitations of the methodology used.

Answers: we have mentioned the strengths and weaknesses of the study in the conclusion.

7. A separate discussion section should be included in the paper. This section should provide a detailed analysis of the findings and their implications for future research.

Answers: we included the discussion in each section, and this time we added a section of conclusion.

8. The authors should also mention the limitations of the study in the discussion section. This will help the readers understand the potential biases and limitations of the research.

Answers: we have mentioned the limitation in the section of the conclusion.

We appreciate for Editors/Reviewers' warm work earnestly, and hope that the correction will meet with approval. We look forward to hearing from you regarding our submission, and we would be glad to respond to any further questions and comments that you may have.

Once again, thank you very much for your comments and suggestions.

With kindest regards,

Yours Sincerely

Shikai Wang and Huanxin Chen