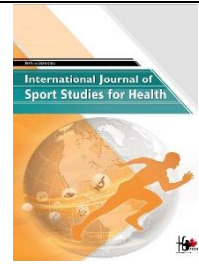


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Hypnosis and Mindfulness for Chronic Pain Management Through the Lens of the Free Energy Principle

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|---|---|
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1. Round 1

1.1 Reviewer 1

Reviewer:

The sentence "Chronic pain is a significant public health issue, affecting approximately 19% of adults in the US..." would benefit from a more recent or broader epidemiological comparison, including global or regional statistics, to contextualize the relevance beyond Veterans and the US.

For instance, in "thereby further minimizing the free energy associated with pain (Faymonville, 2000)," the citation is not listed in the references section. Ensure all in-text citations correspond to a listed source and verify reference accuracy.

The statement "Unlike hypnosis, mindfulness engages brain regions such as the orbitofrontal cortex..." would benefit from additional explanation on how these regions contribute uniquely to the process, beyond listing anatomical terms.

Rewriting sentences such as "Mindfulness strengthens connectivity between the somatosensory cortex and higher-order brain regions..." in active voice may improve reader engagement.

The phrase "leveraging the potential for increased free energy..." is contradictory to the earlier premise that these therapies reduce free energy. Rephrase for logical consistency.

Author revised the manuscript and uploaded the updated document.

1.2 Reviewer 2

Reviewer:

While the transition to the free energy principle is conceptually valid, the link between the abstract neurological theory and chronic pain is too abrupt. Consider adding a bridging sentence to clarify why this framework is particularly suited to hypnosis and mindfulness comparisons.

The term “free energy” as used in the neuroscientific context may be unclear to some readers. Adding a brief clarification distinguishing it from thermodynamic or metaphysical interpretations would improve conceptual clarity.

Consider breaking this into more readable sub-sections such as “Sensory Pathways,” “Affective Modulation,” and “Executive Control,” rather than running them under a single bold header.

The subsection beginning “Veterans Study...” does not provide detailed information on sample size, intervention duration, or specific effect sizes. Adding these would enhance scientific rigor.

The statement “Hypnosis has been shown to produce moderate to significant analgesic effects...” should specify which outcomes (e.g., pain intensity, quality of life) were measured and what the effect sizes were in the cited meta-analysis (4, 11).

The paragraph on combined hypnosis/CBT interventions (e.g., Bicego et al.) introduces promising findings but lacks critical discussion on why combination therapies may outperform standalone treatments. Consider discussing synergy mechanisms.

Author revised the manuscript and uploaded the updated document.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.