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# The Effectiveness of Paradoxical Timetable Therapy on Rumination and Referential Thinking in Women with OCD

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### 1. Round 1

#### 1.1. Reviewer 1

Reviewer: The study contributes to the body of research on OCD treatment, particularly in exploring the effectiveness of paradoxical timetable therapy in reducing specific cognitive symptoms associated with OCD.

Critical Analysis

Strengths: The study's targeted approach to therapy and its focus on cognitive aspects of OCD are commendable.

Weaknesses: The study's small sample size and limited geographic scope may affect the generalizability of the findings. Ethical Considerations: The study appeared to adhere to ethical standards, with voluntary participation and informed consent.

Suggestions

Expanding the Study: Future research should consider larger samples and include a broader geographic area.

Diverse Methodologies: Integrating qualitative methods could offer deeper insights into the patients' experiences and perceptions of the therapy.

Authors revised the manuscript and uploaded the document.





#### 1.2. Reviewer 2

Reviewer: The study offers promising results for the effectiveness of paradoxical timetable therapy in reducing rumination and referral thinking in women with OCD, contributing valuable insights into OCD treatment strategies.

#### Strengths

The focus on a specific therapeutic intervention (Paradoxical Timetable Therapy) for a well-defined clinical population. Use of established psychological measures for rumination and referral thinking.

Weaknesses

The sample size is relatively small, and the study is geographically confined to Tehran, which might limit generalizability. The absence of long-term follow-up to assess the durability of the treatment effects.

Recommendations

Future studies could benefit from a larger, more diverse sample to enhance generalizability. Inclusion of a long-term follow-up phase to evaluate the persistence of treatment effects.

Authors revised the manuscript and uploaded the document.

#### 2. Revised

Editor's decision after revisions: Accepted. Editor in Chief's decision: Accepted.

