

The Mediating Role of Cognitive Processes in the Relationship Between Peer Victimization and Dysregulated Behaviors in Individuals With Bipolar Disorder

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1. Round 1

1.1. Reviewer 1

Reviewer:

The statement "The typical age of onset is between 15 and 25 years, with depression being the most common initial presentation (Nierenberg et al., 2023)" in the first paragraph could benefit from a more recent citation or additional sources to reinforce the prevalence and initial presentation trends.

The transition to discussing peer victimization feels abrupt. Consider adding a bridging sentence that logically connects dysregulated behaviors in bipolar disorder to the potential impact of peer victimization as a significant environmental factor.

The statement "the impact of such experiences may be mediated and/or moderated by several environmental and psychological factors" could be strengthened by briefly mentioning which specific factors are most relevant based on existing literature, setting the stage for the study's focus on cognitive processes.

The Model Fit Indices in Table 3 show that all indices meet the criteria except for the Chi-square test ($\chi^2 = 66.37, p = 0.00732$), which is significant. Although Chi-square is sensitive to sample size, the authors should discuss the implications of a significant Chi-square and possibly report additional fit indices or modifications to improve model fit.

Authors revised and uploaded the document.

1.2. Reviewer 2

Reviewer:

The sentence "Individuals with bipolar disorder are also at increased risk for behavioral dysregulation, physical health issues, obesity, cardiovascular problems, premature mortality, and alcohol use disorders (Fornaro et al., 2022)" could be expanded to include more specific statistics or prevalence rates to quantify these risks and provide a stronger foundation for the study's importance.

The Alcohol Use Disorders Identification Test (AUDIT) in the Measures section reports a Cronbach's alpha of 0.62 in the current study, which is below the generally accepted threshold of 0.70 for internal consistency. This low reliability should be addressed, possibly by discussing its implications or considering alternative measures.

In Table 1, skewness and kurtosis values are reported, with some variables like "Binge eating" showing a skewness of 1.91 and kurtosis of 4.66. These values exceed the acceptable ranges mentioned later. Clarify whether these variables were transformed or how they were handled in the analysis to address potential non-normality.

The Discussion extensively integrates findings with literature on various psychopathologies, including schizophrenia. Ensure that all references and interpretations are specific to bipolar disorder to maintain the study's focus and relevance.

The Discussion states that "cognitive processes mediate the relationship between peer victimization and dysregulated behaviors," but it would be beneficial to elaborate on the theoretical framework supporting this mediation and discuss alternative models or pathways.

Authors revised and uploaded the document.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.