

Comparison of the Effectiveness of Unified Transdiagnostic Therapy and Reality Therapy on Social Information Processing and Emotion Regulation in Students with Disruptive Mood Dysregulation Disorder

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E d i t o r	R e v i e w e r s
Salahadin Lotfi ¹  PhD in Cognitive Psychology & Neuroscience, UWM & Rogers Behavioral Health Verified, Lecturer at University of Wisconsin slotfi@uwm.edu	Reviewer 1: Zahra Yousefi ¹  Assistant Professor, Department of Psychology, Khorasgan Branch, Islamic Azad University, Isfahan, Iran. Email: yousefi1393@khuisf.ac.ir Reviewer 2: Kamdin. Parsakia ¹  Department of Psychology and Counseling, KMAN Research Institute, Richmond Hill, Ontario, Canada. Email: kamdinarsakia@kmanresce.ca

1. Round 1

1.1. Reviewer 1

Reviewer:

The introduction could be enhanced by more explicitly stating the research gap that this study aims to fill. Specifically, it would be beneficial to clarify how this study's findings on unified transdiagnostic therapy and reality therapy could contribute uniquely to the existing literature on DMDD.

The sampling method description lacks details on how the participants were ensured to be representative of the broader DMDD population. Including statistical justification for the sample size, such as a power analysis, would strengthen the credibility of the study results.

It's unclear why the control group did not receive any form of intervention. For stronger experimental validity, consider having a control group that receives a standard care treatment, which would help in more accurately isolating the effects of the tested therapies.

While the paper describes the use of various scales and questionnaires, it does not sufficiently detail how these tools were validated within the context of this specific study. Adding information on the reliability and validity of these tools in measuring changes pre- and post-intervention in this particular demographic would enhance the robustness of the findings.

The statistical methods section could be improved by providing more detailed explanations of the statistical tests used, including any corrections for multiple comparisons which might be necessary given the multiple outcomes measured.

The discussion would benefit from a deeper analysis of the implications of the findings within the broader context of psychological treatment for DMDD. Also, discussing potential limitations regarding the generalizability of the results to other populations or settings would provide a more balanced view.

Authors uploaded the revised manuscript.

1.2. Reviewer 2

Reviewer:

Provide more detailed demographic information about the participants, such as socio-economic background, which could influence therapy outcomes. This would help in assessing the external validity of the study.

More detailed descriptions of the therapy sessions could be included to ensure replicability. Detailed session content, therapist qualifications, and participant engagement metrics would be valuable.

Mention the inter-rater reliability of the clinical assessments used in diagnostics and evaluation. This strengthens the trust in the measurement consistency.

Elaborate on the non-significant differences between the two therapeutic approaches in the results section. Discussing why these might have occurred could provide insights into therapy effectiveness or aspects of the disorders.

Strengthen the section on ethical considerations by detailing any steps taken to mitigate risks to participants, especially given the vulnerable population of children with DMDD.

Authors uploaded the revised manuscript.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.