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Comparison of the Effectiveness of Cognitive-Behavioral Therapy and Acceptance and Commitment Therapy on Quality of Life in Asthma Patients

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1. Round 1

1.1. Reviewer 1

Reviewer:

In the introduction, you state that "Asthma is a chronic disease that affects 5% of the global population" (paragraph 2). Consider providing a citation for this statistic to strengthen the credibility of the data and give context on the source's reliability.

In the description of the Cognitive-Behavioral Therapy sessions (Session 1), consider specifying what "an overview of the CBT approach" entails. Does it involve explaining theoretical foundations or discussing practical examples?

The mention of "progressive muscle relaxation" and "diaphragmatic breathing" (Session 2) would be clearer if you briefly described the steps or how these techniques are tailored to asthma patients.

It is mentioned that "Nejat et al. (2006) standardized this questionnaire" (paragraph 4 of Measures). Clarify whether any adaptations were made for your study and discuss how cultural factors might affect its application.

You state that "the primary assumptions, including the normality of score distribution, were satisfied" (Data Analysis section). Consider briefly explaining how these assumptions were tested and confirmed to enhance methodological rigor.

The use of the LSD post-hoc test (Results section) is mentioned, but explain why this particular test was chosen over others, such as Tukey's or Bonferroni, to account for multiple comparisons.

In the description of demographic characteristics (Results section), it may be useful to discuss any implications of the age and education distribution on the generalizability of the findings.

Authors uploaded the revised manuscript.

1.2. Reviewer 2

Reviewer:

The phrase "asthma has drawn the attention of researchers as a psychosomatic disorder" (paragraph 2) is intriguing but could benefit from a more detailed explanation or an example illustrating how psychosomatic components manifest in asthma patients.

When discussing the "shift from a purely biological and medical perspective to a holistic approach" (paragraph 3), it would be valuable to specify key studies or developments that have contributed to this paradigm shift, to provide readers with a clearer historical context.

You mention that the "control group did not receive any specific treatment" (Methods section). Explain why this approach was chosen and discuss any ethical considerations that were taken into account to justify the lack of intervention.

The criteria for selecting participants (paragraph 4 of Methods) are comprehensive but could be enhanced by explaining how the exclusion of those with psychological disorders was verified or assessed.

The first ACT session references "creative hopelessness" (Session 2), which is a critical concept. A concise definition or example would aid readers unfamiliar with ACT terminology.

The World Health Organization Quality of Life Questionnaire's reliability is noted, but you could add a brief comparison to other similar instruments to justify your choice and discuss any limitations inherent to this measure.

The reporting of "Eta Squared" values is clear, but consider providing a brief explanation of what these values indicate in terms of the magnitude of the treatment effects, especially for readers less familiar with effect size metrics.

The discussion mentions that "the quality of life in asthma patients is significantly influenced by anxiety and depression" (Discussion section). Link these findings to relevant psychological theories to better frame the discussion in a theoretical context.

You discuss that "there was no significant difference between the two therapeutic approaches" (Discussion section). It would be valuable to hypothesize why both treatments produced similar outcomes and suggest mechanisms that may be at play.

Authors uploaded the revised manuscript.

2. Revised

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

