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Phenomenology of Misophonia in the Iranian Population: A Grounded Theory Study

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1. Round 1

1.1. Reviewer 1

Reviewer:

In the paragraph beginning “Participants in this study consisted of students from the Islamic Azad University, Zanjan Branch, and the University of Zanjan,” there is a discrepancy between the stated sampling frame and the demographic characteristics reported in Table 1. Several participants are described as holding completed degrees, a high school diploma, less than a high school diploma, or being a clinical specialist, which suggests that not all participants were current university students. The sampling frame therefore requires correction. The authors should describe precisely where and how each category of participant was recruited and clarify whether recruitment began among university students and subsequently expanded through theoretical sampling.

The inclusion criterion described as “a score of 7 or higher on the third subscale of the Misophonia Questionnaire” needs more precise psychometric justification. The manuscript states that this score indicates “clinically significant symptoms,” yet it should be demonstrated that this threshold has been validated specifically for the version of the instrument used in the Iranian population. The authors should clarify whether the third component is formally a subscale, a single-item severity rating, or another scoring component of the Misophonia Questionnaire, because the description of a 1–15 range appears different from

the Likert scoring described for the first two subscales. The exact scoring procedure and source supporting the ≥ 7 threshold should be reported unambiguously.

The trustworthiness section states that “Credibility was established through member checking of the findings by three participants.” The manuscript should clarify exactly what was member checked: verbatim transcripts, preliminary codes, category descriptions, the paradigm model, or the final grounded theory. Member checking a complete theoretical interpretation is methodologically different from checking transcript accuracy. The authors should also report whether participants suggested any corrections, disagreed with interpretations, or contributed refinements. Reporting only successful confirmation risks presenting member checking as a procedural checklist rather than an analytic process capable of challenging the researchers’ interpretations.

Table 1 should be revised to improve both scientific accuracy and internal consistency. The column “Marital Status” currently contains entries such as “Married – unaffected” and “Married – specialist,” which conflate marital status with participant role or clinical status. These variables should be separated into distinct columns, such as marital status, participant type, and misophonia status. In addition, the table reports score ranges of “7–9” and “10–12” rather than exact scores. Because eligibility depended on a defined threshold, the rationale for categorizing scores into ranges should be provided; preferably, exact screening scores should be reported unless confidentiality considerations justify grouping them.

In the Results section, the paragraph beginning “The central core of the misophonia experience identified in this study was a multilayered and involuntary reaction referred to as an ‘internal explosion’” is theoretically important but currently combines several analytically distinct processes. The authors should provide stronger evidence that sensory–physiological responses, cognitive fixation, and meaning–identity interpretations are components of one integrated core process rather than three related but separate categories. Additional quotations from different participants should be provided for each layer, and variation in the phenomenon should be reported, including cases in which one layer was weak or absent. Grounded theory should explain heterogeneity, not only commonality.

The causal category “Conditioning in the Context of Chronic Stress” should be framed more cautiously. The manuscript currently states that the identified factors “appeared to contribute to the development and consolidation of misophonia,” but retrospective qualitative narratives cannot establish etiological causation. In particular, military service, irregular shifts, emotional stress, and war exposure are heterogeneous experiences that may operate through different mechanisms such as hyperarousal, sleep disruption, learned association, or attentional vigilance. The authors should either replace causal language with participants’ perceived antecedents or provide a more explicit theoretical mechanism explaining why these experiences were grouped together as one causal condition.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

In the Research Instruments section, the sentence “The instrument is a 17-item self-report measure comprising three subscales” should be checked carefully against the original structure of the Misophonia Questionnaire. The manuscript should distinguish between multi-item symptom and emotion/behavior scales and the global severity rating rather than referring to all components indiscriminately as equivalent subscales. In addition, because the questionnaire was used primarily as an eligibility screening tool rather than as a principal outcome measure, the authors should state this function explicitly and report the psychometric evidence for the Iranian version, including the exact Cronbach’s alpha coefficients rather than merely stating that they were “greater than .70.”

In the Semi-Structured Interview subsection, the sentence “Interview questions were developed according to the study objectives, the relevant research literature ... and the opinions of three clinical psychology specialists” suggests that the interview framework was substantially informed by existing theory before data collection. This may be appropriate, but in grounded theory it raises the possibility of forcing data into predetermined categories. The authors should explain how they

balanced sensitizing concepts from prior literature with openness to emergent categories. It would strengthen methodological transparency to provide examples of initial interview questions, subsequent theoretically driven questions, and questions that were added after emerging concepts such as bullying trauma or compulsive sound checking were identified.

The claim in the Data Collection and Analysis section that “this iterative process continued until theoretical saturation was reached” requires considerably more evidence. The manuscript should indicate after which interview the major categories became saturated, whether additional interviews were conducted specifically to test category properties and relationships, and how the researchers operationally determined that no conceptually important new information was emerging. Merely stating that saturation occurred is insufficient for a grounded theory study. A brief saturation account or coding progression, for example showing the number of initial codes, focused concepts, subcategories, and final categories across successive interviews, would substantially enhance analytic credibility.

In the paragraph stating that “repetitive questions were removed from subsequent interviews” while new questions were added to examine “the role of adverse early relationships and experiences of childhood bullying,” the manuscript should demonstrate more clearly that this modification resulted from theoretical sampling rather than confirmation seeking. Childhood bullying subsequently becomes a prominent causal concept and one of the study’s purportedly novel findings, yet the text indicates that direct questions about it were introduced after it emerged in earlier interviews. The authors should report how many participants spontaneously raised bullying before targeted probing began, how many subsequently endorsed it after prompting, and whether negative or contradictory cases were actively sought.

The coding description requires greater methodological precision. In the sentence “Following category development, one category was selected as the focal category, or central phenomenon, for theory development,” the process appears more researcher-selected than theoretically emergent. The authors should describe how the core category “internal explosion in response to violated expectations” satisfied established grounded theory criteria, including centrality, explanatory reach, frequency across cases, ability to account for variation, and integration with other categories. It would be useful to show how lower-level codes and categories were progressively abstracted into this core category and to indicate whether alternative candidate core categories were considered.

Response: Revised and uploaded the manuscript.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.