

# The Effect of Healthy Lifestyle Education Combined with Mindfulness-Based Stress Reduction on Health Anxiety and Health Dimensions in Pregnant Women at Risk of Preeclampsia

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## 1. Round 1

### 1.1. Reviewer 1

Reviewer:

The introduction provides comprehensive background but could benefit from explicitly stating the research gap earlier. Clarify within the first paragraph what is missing in current literature (e.g., the lack of integrated MBSR and lifestyle interventions for preeclampsia).

The background on MBSR is accurate, but it would help to contextualize why combining MBSR with lifestyle education is theoretically justified. Add 2–3 sentences summarizing the hypothesized synergistic mechanism.

The transition from theory to research aim is clear, but the paragraph redundantly restates ideas already mentioned. Condense the repetition and end with a single, sharply worded research objective and hypotheses (e.g., “We hypothesized that MBSR + lifestyle education would significantly reduce health anxiety and improve multidimensional health scores compared to control.”).

There is a major inconsistency between the introduction and methods. The introduction describes a quasi-experimental study with 30 pregnant women, while this section discusses 400 women seeking divorce. It appears text from another manuscript was inserted erroneously. Revise to accurately describe the participants, sample size, and design used in this study.

Replace “fundamental” and “correlational” with “quasi-experimental pretest–posttest design with control group,” as this reflects the actual research framework.

The text should report the actual mean  $\pm$  SD for age (e.g., 31.4  $\pm$  3.2 years) rather than stating only “ranged from 25 to 36.” Numerical transparency is needed for reproducibility.

This section is well detailed, but consider reporting Mauchly’s  $W$ ,  $\chi^2$ , and degrees of freedom values explicitly to enhance transparency in meeting sphericity assumptions.

While this sentence effectively situates results in neuroscience, it would be valuable to note that no neurobiological data were collected in this study. Clarify that such conclusions are inferential, not empirical.

Authors revised the manuscript and uploaded the document.

### 1.2. Reviewer 2

Reviewer:

This section presents strong biological explanations but lacks integration with the psychological framework of the study. Consider linking the biological mechanisms of preeclampsia with the rationale for targeting stress and anxiety reduction.

The paragraph is long and densely cited. Break it into two shorter paragraphs—one focusing on biological mechanisms and another on psychological mechanisms—to improve readability and thematic clarity.

The figures lack axis labels (e.g., “Time (Pre, Post, Follow-Up)” on the x-axis, “Mean Health Anxiety Score” on the y-axis). Add proper axis labeling, legends, and indicate significance levels with asterisks where appropriate.

This is strong but would benefit from including brief citations linking mindfulness to reduced blood pressure or cortisol (e.g., meta-analyses on MBSR in pregnancy). This strengthens the physiological plausibility argument.

Add a quantitative link between improvements in vitality and anxiety (e.g., correlation coefficients or effect sizes) if available. This would better illustrate inter-variable relationships.

Authors revised the manuscript and uploaded the document.

## 2. Revised

Editor’s decision: Accepted.

Editor in Chief’s decision: Accepted.