The Mediating Role of Cognitive Biases and Difficulty in Emotion Regulation in the Relationship between Personality and Character with Negative Symptoms in Schizophrenia

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1. Round 1

1.1 Reviewer 1

Date: 20 November 2024

Reviewer:

The introductory paragraph effectively outlines the core aspects of schizophrenia, including positive, cognitive, and negative symptoms. However, the definition could benefit from a more nuanced explanation of cognitive dysfunction. For instance, specifying which executive functions (e.g., planning, inhibitory control) are impaired would provide greater clarity and depth to the reader's understanding.

The statement that "negative symptoms continue to represent an unmet medical need" is well-placed. To strengthen this point, consider including specific statistics or recent studies that quantify the prevalence and impact of negative symptoms on patient outcomes. This would underscore the urgency and significance of addressing this gap in treatment options.

The definition of emotion regulation difficulties is clear and well-cited. However, the connection between emotion regulation and negative symptoms could be strengthened by citing specific studies that have empirically demonstrated this relationship. This would provide a more solid foundation for the proposed mediating role.

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The statement of the study's purpose is clear and relevant. To enhance this section, explicitly outline the novel contributions of the study compared to existing literature. For example, specify whether this is the first study to examine these mediating roles in a particular population or using a specific methodological approach.

The choice of a cross-sectional, descriptive correlational design using SEM is appropriate for exploring complex relationships. However, the rationale for selecting SEM over other analytical methods could be elaborated. Explaining how SEM specifically addresses the research questions and mediating roles would justify the methodological choice more robustly.

The character inventory's structure is clearly presented. However, addressing potential overlaps between character traits and other personality dimensions (e.g., temperament) within the context of schizophrenia would clarify how these constructs uniquely contribute to the study's findings.

The cognitive biases assessment tool is well-described. To enhance this section, provide examples of items or the types of cognitive biases assessed. This would help readers understand the specific cognitive processes being measured and their relevance to schizophrenia.

The positive associations of self-directedness and cooperation with better emotion regulation and fewer cognitive biases are well-explained. To deepen the analysis, discuss potential mechanisms through which these character traits influence emotion regulation and cognitive processing. For instance, how does self-directedness enhance goal-directed behavior in managing emotions?

Authors revised the manuscript and uploaded the updated document.

1.2 Reviewer 2

Date: 23 November 2024

Reviewer:

The discussion on personality traits and their role in schizophrenia is comprehensive. However, the transition between neurotransmitter abnormalities and personality traits feels abrupt. Adding a bridging sentence that explains how biological factors influence personality development in schizophrenia could enhance the logical flow of the argument.

The distinction between character and temperament is crucial. The definition provided is clear, but referencing specific studies that have operationalized these constructs within schizophrenia research would provide empirical support. Additionally, elaborating on how character dimensions uniquely contribute to schizotypy would add depth to the discussion.

The paragraph on cognitive biases effectively links them to personality and negative symptoms. To improve clarity, consider defining each cognitive bias (e.g., jumping to conclusions, self-referential processing) briefly within the text. This ensures that readers unfamiliar with these terms can fully grasp their relevance to schizophrenia.

Convenience sampling was used to select participants, which may limit the generalizability of the findings. Acknowledging the potential biases introduced by this sampling method and discussing how they might impact the results would provide a more balanced view of the study's limitations.

The inclusion and exclusion criteria are well-defined. However, specifying the rationale behind certain criteria, such as the educational background requirement, would enhance the reader's understanding. Additionally, discussing how these criteria align with the study's objectives would strengthen the methodological rigor.

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The use of the PANSS for measuring negative symptoms is appropriate. However, the justification for selecting only the negative symptoms subscale could be expanded. Clarifying why positive symptoms and general psychopathology were excluded from the analysis would provide insight into the study's focused scope.

The description of the personality scale is thorough. To improve, include information on the scale's validity in the specific population studied (individuals with schizophrenia). Discussing any adaptations made for this population would ensure the scale's appropriateness and reliability.

Table 1 presents the correlations effectively. To enhance interpretation, consider highlighting which correlations are strongest and discussing their potential implications. Additionally, addressing any multicollinearity issues that may arise from high intercorrelations among predictors would strengthen the analysis.

Table 2 clearly outlines the direct and indirect effects. However, providing a brief interpretation of key findings directly in the table or as accompanying text would aid readers in understanding the practical significance of the statistical results. For example, explaining the magnitude of the β coefficients in relation to clinical outcomes would be beneficial.

Authors revised the manuscript and uploaded the updated document.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.

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