




The Effectiveness of Schema Therapy on Obsessive-Compulsive Disorder in Individuals with Borderline Personality Disorder

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E d i t o r	R e v i e w e r s
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1. Round 1

1.1 Reviewer 1

Date: 16 February 2025

Reviewer:

The paragraph defining Borderline Personality Disorder (BPD) states, "BPD is characterized by sudden changes in identity, interpersonal relationships, and affect, as well as impulsive behavior..." While this definition is consistent with DSM-5 criteria, citing a primary source such as the American Psychiatric Association (2013) would strengthen the scientific rigor of the introduction.

The methods state, "The research instrument was the Maudsley Obsessive-Compulsive Inventory (MOCL)." A brief discussion of its psychometric properties, including reliability and validity in Iranian samples, would improve transparency.

The sentence, "Schema therapy sessions were conducted based on the schema therapy protocol developed by Young et al. (2003; translated by Hamidpour, 2007)," lacks details on session frequency, duration, and content. Providing a structured summary of the intervention protocol would enhance replicability.

The sentence, "Data analysis was performed using SPSS-24 software and multivariate analysis of covariance (MANCOVA) while ensuring statistical assumptions were met," should be expanded to justify why MANCOVA was chosen over other methods such as ANCOVA or mixed-effects modeling.

The discussion states, "The findings of this study are consistent with those of Hopwood and Thomas (2014), Bakhshipour and Mohammad Alilu (2022), and Jacob and Arntz (2013)." A deeper discussion of how this study's results compare in magnitude and methodology to these studies would enhance critical analysis.

Authors revised the manuscript and uploaded the updated document.

1.2 Reviewer 2

Date: 17 February 2025

Reviewer:

The sentence, "Most individuals with BPD have comorbid psychiatric disorders, such as mood disorders (83%), anxiety disorders (85%), or substance use disorders (78%)" should reference original epidemiological studies to verify the prevalence rates and ensure accuracy.

The introduction states, "Schema therapy (ST) was developed by Young (1990, 1999) for patients who do not respond adequately to cognitive-behavioral therapy (CBT), particularly those with chronic personality disorders." While correct, a more detailed explanation of why ST is particularly suited for BPD and OCD comorbidities would enhance conceptual clarity.

Table 2 presents an effect size of 0.54 for the main intervention effect. While this is statistically significant, discussing its clinical significance relative to other OCD treatments would improve the interpretation of findings.

Table 1 states, "Obsessive-compulsive disorder decreased in the experimental group after the intervention, whereas in the control group, scores remained relatively stable." However, confidence intervals for means should be reported to better illustrate variability.

Authors revised the manuscript and uploaded the updated document.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.