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The Effectiveness of Mindfulness-Based Cognitive Therapy on Psychological Symptoms and Anxiety Sensitivity in Women with Panic Disorder

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1. Round 1

1.1. Reviewer 1

Reviewer:

In the opening sentence, "Anxiety is an integral part of human life, present in all individuals, and is considered an adaptive response when experienced in moderation," consider elaborating on how moderate anxiety functions adaptively. Citing empirical studies that discuss anxiety's role in enhancing performance or alertness would strengthen this claim.

The manuscript notes that "These catastrophic misinterpretations reinforce anxiety sensitivity...". It would be beneficial to delve deeper into how these misinterpretations develop and persist, perhaps referencing cognitive models that explain this process.

While the manuscript introduces mindfulness-based cognitive therapy (MBCT), it would be helpful to provide a more comprehensive overview of its components. Discussing the integration of mindfulness practices with cognitive therapy techniques and how this combination addresses specific symptoms of panic disorder would enhance understanding.

The research question, "Does mindfulness-based cognitive therapy affect psychological symptoms and anxiety sensitivity in women with panic disorder?" is clear. However, specifying what is meant by "psychological symptoms" (e.g., depression, general anxiety, stress) would provide greater clarity.

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The study focuses on women with panic disorder. It would be important to justify this choice by discussing whether there are gender differences in the prevalence or manifestation of panic disorder, or in responses to MBCT, supported by relevant literature.

The statement, "Therefore, mindfulness-based cognitive therapy has an impact on the psychological symptoms of women with panic disorder," should be tempered to reflect the study's design. Consider rephrasing to indicate an association rather than a definitive causal relationship.

In the conclusion, discuss the practical implications of the findings for clinical practice, such as the potential for MBCT to be integrated into treatment plans for women with panic disorder, and any considerations for its implementation.

Authors revised the manuscript and uploaded the document.

1.2. Reviewer 2

Reviewer:

The statement, "Panic disorder is a type of anxiety disorder characterized by an intense fear of unexpected and uncontrollable anxiety attacks," would benefit from a clearer distinction between panic disorder and other anxiety disorders. Including specific diagnostic criteria or unique features, such as the sudden onset of panic attacks without an obvious trigger, would provide clarity.

When stating, "This disorder is unique among anxiety disorders, as its primary symptoms have a physical nature," consider providing examples of these physical symptoms and discussing how they differ from somatic symptoms in other disorders. This will help readers understand the distinct presentation of panic disorder.

In the sentence, "The symptoms of panic disorder are categorized into different systems: autonomic nervous system...," it would be helpful to explain why this categorization is clinically relevant. Discussing how this classification aids in diagnosis or treatment planning could provide valuable context.

The paragraph discussing depression mentions its impact on self-esteem and emotional expression. To reinforce this, consider citing studies that quantify these effects or explore the mechanisms by which depression leads to such impairments.

The definition of anxiety sensitivity could be more precise. Instead of stating, "Anxiety sensitivity refers to the fear of anxiety and its associated symptoms...," consider defining it as the fear of anxiety-related sensations based on beliefs that these sensations have harmful consequences, as supported by Taylor (1999).

The manuscript states that results are consistent with prior findings. Elaborate on how these findings align or differ from existing studies, discussing possible reasons for any discrepancies.

The discussion attributes improvements to mindfulness exercises but could benefit from exploring underlying mechanisms, such as increased emotional regulation, reduced rumination, or enhanced interoceptive awareness, supported by relevant studies.

The manuscript would be strengthened by a dedicated section discussing limitations, such as the small sample size, lack of long-term follow-up, and reliance on self-report measures, and suggesting directions for future research.

Authors revised the manuscript and uploaded the document.

2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.