



PEER-REVIEW REPORT

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Title: Editorial: Enhancing Orthodontic Osteodilated Arch Treatment through Comprehensive Nursing Interventions and Cognitive Behavioral Therapy

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Reviewer's code: 08239348

Position: Peer Reviewer

Academic degree: PhD, Academic Fellow, Academic Research, Doctor, Doctor, Research Assistant

Professional title: Doctor

Reviewer's Country/Territory: Türkiye

Author's Country/Territory: South Korea

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Reviewer chosen by: Shang Wu

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty



Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation
Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Firstly, I would like to express how fortunate I feel to have had the opportunity to read this valuable manuscript. I believe this editorial manuscript, prepared following a highly novel and meaningful study, is of great importance. The text is generally well-prepared and coherent. However, there are minor issues such as punctuation errors, capitalization mistakes, and missing spaces. Lastly, the references should be checked by the guideline of the journal. While the text is quite fluid, I have a few suggestions for improvement. I have provided these suggestions for clarity, and I believe it would be beneficial for the author to review them. One particular section that I found challenging to understand concerns the satisfaction of Class 2 orthodontic patients with their treatment. I am unclear about the relevance of this aspect to the study on OOA treatment. The literature contains numerous studies indicating that clear aligners enhance patient comfort. In this context, discussing clear aligners in relation to patient satisfaction seems unnecessary



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7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: office@baishideng.com
https://www.wjgnet.com

fort his text. However, if the author wishes to include a discussion on clear aligners, it would be more appropriate to support this with a clinical study showing that treatments with clear aligners are less stressful, more comfortable, and less painful etc.compared to fixed appliances, rather than through a case report. Abstract Revised: A randomized clinical trial by Yang et al., involving 81 OOA patients, demonstrated significant reductions in oral mucositis incidence, increased mastery of arch expansion methods, and improved psychological well-being in the observation group receiving CBT-based CNI. Revised: Innovations in remote CBT delivery, such as virtual reality, have also shown potential in reducing pain, anxiety, and depression, emphasizing CBT's adaptability in orthodontic settings. 1. Introduction Revised: Orthodontic osteodilated arch (OOA) treatment represents a pivotal approach in dental orthodontics to address dental crowding and misalignment. Revised: Such adverse effects can reduce treatment compliance and its overall success, emphasizing the need for innovative strategies to enhance patient experiences and outcomes [1]. Revised: Cognitive Behavioral Therapy, known for its effectiveness in managing pain and psychological conditions, offers a promising avenue for improving patient comfort and adherence during orthodontic treatments when incorporated into Comprehensive Nursing Interventions (CNI). Revised: Meanwhile, Another aspect of orthodontic care that has received attention is the decision-making process. Revised: A deeper understanding of these cognitive processes and biases can further enhance the quality of orthodontic care by promoting more efficient and evidence-based decision-making [2]. Revised: Its efficacy has been extensively validated across various patient populations, demonstrating significant benefits in managing chronic pain, anxiety, and depression, which are common concerns in orthodontic care. Revised: A systematic review underscores the robustness of traditional CBT in significantly reducing symptoms of depression and anxiety in individuals suffering from chronic pain and psychological distress. Revised:



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Additionally, an arts-based hybrid CBT intervention [3]. Revised: Showed remarkable results in diminishing pain intensity and depressive symptoms, enhancing emotional distress tolerance, and improving global health-related quality of life in patients with chronic pain. Revised: Innovations in remote CBT delivery, such as utilizing virtual reality, have also been explored, showcasing reduced pain, anxiety, and depression in patients with chronic cervical and lumbar spondylitic pain. 3. Comprehensive Nursing Intervention Model Revised: This methodological blueprint aims to address the multifaceted aspects of patient care, covering both physiological and psychological aspects to foster an environment conducive to overall well-being. Revised: Within orthodontic treatment, such comprehensive and multifaceted strategies are critical, as they can significantly impact patient compliance and outcomes by enhancing psychological support and fostering behavioral modifications. 4. Methodology and Findings Revised: One group received routine nursing care, while the observation group received a CNI based on CBT principles. Revised: Significant improvements were also observed in the psychological well-being of patients in the observation group, with a substantial reduction in self-rating anxiety scale (SAS) scores post-intervention. Revised: This suggests that CBT effectively alleviates treatment-related anxiety, contributing to enhanced patient comfort and compliance, and thereby improving overall treatment outcomes. Revised: The observation group also exhibited high levels of patient compliance (90.24%) and satisfaction (95.12%), significantly higher than those in the control group [7]. Revised: These findings underscore the indispensable role of integrating psychological support frameworks, such as CBT-based CNI, into orthodontic care. Revised: Such integration not only elevates patient adherence and satisfaction but also significantly enhances the treatment landscape by addressing both technical and emotional aspects of orthodontic interventions. 5. Discussion Revised: The study by Yang et al. (2024) underscores the pivotal role of CBT-based CNI in orthodontic



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treatment, marking a significant advancement in enhancing patient outcomes through a model that addresses both psychological and physiological aspects of care. Revised: The successful integration of CBT within nursing interventions represents a crucial shift towards a holistic approach in patient care, emphasizing the symbiotic relationship between mind and body [8]. Revised: By alleviating physical symptoms while managing psychological stress, this approach enhances patient comfort and fosters a more empowering and positive treatment experience [9]. Revised: The implications of integrating psychiatric nurses—who excel in patient-centered care—into orthodontic treatment teams are profound, highlighting the potential for telemental health models to revolutionize care delivery, particularly in patient-centric approaches [8]. Revised: Furthermore, the tangible benefits of empathic care, as evidenced in patients with cervical cancer, highlight significant advancements in understanding patient needs and improving clinical outcomes [10]. Revised: The integration of these advancements with orthodontic care models suggests a promising trajectory toward more effective treatment methodologies.