**TITLE: Aneja Pregnancy and Schizophrenia**

Internal review comments

This is an interesting and relevant submission.

However, we also have a few concerns:

(i) The title of the article mentions ''schizophrenia", but the article deals with mental illness (as a much broader category), and barring the case vignette which talks of a woman with epilepsy and schizophrenia, it does not deal specifically with schizophrenia, or engage with schizophrenia as a particular mental health situation, exclusive of other mental health diagnostic categories or otherwise. It seems that you use the term schizophrenia more as an example, and that should be avoided. What is provided as an example cannot be the lead word in the title. In the abstract too you write: "Pregnancy for some women brings joy and excitement, but may be very distressing in those who suffer from severe mental illnesses **like** schizophrenia." This is not justification enough to use the term schizophrenia in the title of the article. You may switch to 'mental illness' or something broader.

(ii) The very last sentence ("Further, role of preventive ethics (not addressed in detail here) comes into play when a woman in her reproductive years is enrolled for clinical trials (42, 43)") should be removed. Neither is preventive ethics discussed, nor clinical trials until this very last sentence. Please avoid this.    
  
(iii) Finally, while checking your references, we came across this article (your ref 1 Desai and Chandra), which is an old IJME article; we realised that there is a primary thematic overlap between the earlier article and yours. We strictly avoid publishing articles which are basically duplicating arguments/observations, but in your case, given the promise your article shows, we are requesting you for a rewriting/revision with a change in focus.

The focus of both articles is broadly same -- viz. the ethical challenges faced by psychiatrists in dealing with pregnancy in women diagnosed with mental illness. The older article is 10 years old; yours is fresh. Did not any changes take place in the past decade in this area which you might want to make the focus of your article? Are there not articles published/debates which took place in these interim years which could shape your present article in a different way, say something fundamentally new/different than the earlier one? While the larger, structural challenges would of course remain the same for a long time to come, given the biases, inequities, resource-constraints, gaps in awareness, gender insensitivity we are steeped in as a society, certainly smaller changes (even if not necessarily for the better) would surely have taken place in 10 years? Would you not want to focus on those? And if absolutely nothing indeed has changed at all since 2009, then *that* in itself is a major point to focus on! Why not flag that centrally? Why not openly engage with the older article and show how despite changes in the Mental Health Act, basic ground level issues have not changed (for example).

These are suggestions from us and you are free to revise along some other lines. However, unless this article says something essentially different from the one published 10 years ago, it would not be possible for us to process it for external review.

We would be happy to consider a revised version of the paper. We invite you to revise and re-submit it for review.

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