Reviewer’s report

Title: Status on preventing HBV transmission from mother to infant during Pregnancy in China: A retrospective study

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Reviewer: Lu-Yu Hwang

Reviewer's report:

1. Many errors occurred in English usage. An example is that such phrasing as “artificial feeding,” would be better expressed by terms “formula or bottle feeding”; another example is that the authors use the phrase “carrying HBV,” when it would be better to use “HBsAg carrier or chronic HBV carrier.” Yet another example is that “Double positive group” is not good to use, and could be replaced effectively by the better phrasing “HBsAg + HBeAg+ group”; and use “HBsAg+ HBeAg- group” instead of “Sing-positive group.”

2. The definition of intrauterine infection of newborn is not clear. “Serum HBsAg positive within 24 hours after birth (not born) by ELISA test” does not reflect the establishment of newborn HBV infection. The presence of HBsAg might reflect the exposure from maternal HBV infected blood during the birth, mostly due to the mother-infant micro-transfusion at birth. New born infection should have the presence of viral DNA, especially high viral load, or high titer of HBsAg . The unclear definition might explain the high rate of intrauterine infection (19%) among infants born to HBsAg + HBeAg+ mothers in the manuscript.

3. The organization of this manuscript needs improvement. The aims were not clear, and it is hard to follow the flow of thought in the text. The title is too broad and does not reflect the results and discussion of the manuscript. The authors need to change the title to reflect the aims and results of the manuscript.

All the presentation in this manuscript consists of comparing the two groups – HBsAg+/HBeAg+ and HBsAg+/HBeAg- mothers characteristics/intervention and their infants outcome in Wuhan.

4. It is not necessary to present table 1 and 2; simply describe the results in the text.

5. The numbers do not add-up for table 4. The authors need to revise it to make it clear to the reader.

6. The authors do not make proper analysis that would lead to the conclusion that C-sections and formula feedings do not affect infant outcome. The univariate and multivariate analysis needs to be presented to adjust the confounding in order to evaluate the infants outcome from immunoprophylaxis intervention.

Level of interest: An article of limited interest
Quality of written English: Not suitable for publication unless extensively edited

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:
'I declare that I have no competing interests'