Reviewer's report

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

Version: 2 Date: 1 July 2009

Reviewer: Sheila O'Brien

Reviewer's report:

Comments to Authors:

This paper describes the treatment received by a small group of HBV positive pregnant women in one region of China to prevent transmission to their infants. It provides an interesting snap shot of the preventative care received and infant outcomes.

The authors are attempting to read a little too much into their results in that they attempt to make recommendations for treatment. A randomised clinical trial would be required for this type of interpretation. I suggest that they revise their discussion to focus more on the description of treatment.

Specific comments as follows:

1. How much of the data was based on questionnaire responses? Did the women tell you what their treatment was or did you review medical records? Were the stated reasons for caesarean what then women reported? The exact data from the questionnaire should be described in more detail. If these data are from the questionnaire, it should be mentioned in the discussion as a potential limitation. In other words, she may believe that it was for HBV prevention, but there may have been other reasons.

2. Do you have any data on the rate of caesarean and the rate of bottle feeding in women without HBV (a comparison group)?

3. What percentage of all pregnant women over the study period were the 2,026 women enrolled in the study? This is very important to include as it provides an indication of participation bias. More detail on non-participation should be included especially if a large proportion of pregnant women were not enrolled in the study.

4. The conclusion addresses health education needs in HBV positive women, but this has not been mentioned in the discussion and should be described in more detail there. Also, there should be some mention of physician education needs.

5. The statement “the current study shows that maternal-infantile transmission is preventable by means of …” is a little too strong because it is not a randomised controlled trial. Better to say something like “In the current study maternal-infantile transmission was low with combined immunization…” This conveys the same idea without implying the level of proof.
6. Likewise, the statement about intrauterine infection rate in the double positive group being higher than the single positive group needs to be balanced by mention of the very small sample size (only 31 in the double positive) and small numbers in the numerator (1 vs 4).

7. The statement “From our study, HBV infection should not be used as an indication for caesarean section” is too strong for the data. It would be appropriate to discuss the high proportion of caesareans in these women (orienting the discussion more towards a description of treatment) but the study has not evaluated transmission reduction in caesarean vs no caesarean.

8. The conclusions should stick to what the study has shown – most HBV positive pregnant women are receiving some form of preventative treatment (and describe) and caesarean and bottle feeding are very common, often primarily to prevent transmission. Relatively few intrauterine infections were identified in this sample, but many infants did not appear to seroconvert after vaccination.