Author's response to reviews

Title: Preterm birth and reduced birthweight in first and second teenage pregnancies: a register-based cohort study

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Author's response to reviews: see over
Dear Dr Marshall,

Thank you for considering our manuscript for publication in BMC Pregnancy and Child Birth. We would also like to thank the reviewers for taking the time to look at our manuscript and for their comments. We have addressed all the comments and changed the text in the manuscript accordingly. We used “Track Changes” and “Insert comment” facilities to highlight the changes and indicate what they relate to. We also responded to each comment (below) and indicated where the changes were made in the manuscript in relation to each comment.

We have made all the editorial changes requested by the Associate Editor i.e. the ethical approval, competing interest and authors’ contributions statements. We also renamed the Study design section in the abstract as Methods and checked the manuscript for journal style.

We look forward to hearing from you

Yours sincerely

Ali Khashan, PhD
On behalf of all co-authors

Response to reviewers’ comments

Reviewer 1

Comment 1: The discussion of this article might add a point about data quality of "maternal smoking during pregnancy"-this is very often underreported, not only in self reported data sets; given the impact of maternal smoking for preterm birth, one of the major points in this article, the authors might want to include this to interpret their findings.

Response 1: We have discussed this point and cited 2 papers about the quality of maternal smoking data (please see response 1 on page 13).

Reviewer 2

Comment 2: The research question is clearly posed and well defined by the authors. In the opening sentence the authors state that the UK has the highest teenage pregnancy rate in Western Europe; Statistics (%) for the UK comparable to Western Europe would enhance this statement and further place teenage pregnancy rates in context for the reader (Discretionary Revision).

Response 2: This is a very interesting suggestion and actually it opened our eyes to the fact that this commonly used statement is rarely backed up with numbers probably
because of the different definitions of teenage pregnancy based on number of births or number of conceptions and the definition of teenage pregnancy as under 20 or under 18. We have even called the Office of National Statistics and told us that this statement is rarely backed up because of the above mentioned reasons. However, we found a report from 2001 published by UNICEF and it included the statistics suggested by the reviewer (please see response 2 on page 4).

**Comment 3:** The methods used are appropriate; however the authors might state why the chosen method is appropriate to the current study (Discretionary Revision).

**Response 3:** We have added a sentence at the beginning of the statistical analysis section about the methods used (please see response 3 on page 6).

**Comment 4:** The authors need to clearly state if ethical approval was received or necessary for the current study (Minor Essential Revision).

**Response 4:** The study data were anonymous and no individuals could be identified therefore ethical approval was not needed. We have added a statement at the end of the Methods section (please see response 4 on page 8).

**Comment 5:** Data - Page 7 of the manuscript; the authors state that in Primiparous women the mean birthweight is 3231g for 17-18yrs old - it would appear this should be 18-19yrs old (Minor Essential Revision).

**Response 5:** This is now corrected (please see response 5 on page 8).

**Comment 6:** The discussion and conclusions adequately support the data, however the authors could enhance their conclusion by alluding to its importance for the clinician, clinical practice and the care of pregnant teenagers, i.e. recommendations for practice relevant to their findings (Minor Essential Revision). The authors appropriately describe the limitations to their study. The writing is clear, well-written and informative, displaying appropriately previous conflicting findings on this topic. The title and abstract accurately convey what has been found.

**Response 6:** We have added a couple of sentences about clinical implications of the findings and recommendations for practice. We also modified the conclusions in the abstract (please see response 6 on page 2 and 13-14).