Author's response to reviews

Title: Folic Acid Supplementation, Dietary Folate Intake during Pregnancy and Risk for Spontaneous Preterm Delivery: A Prospective Observational Cohort Study

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To The Editorial Team  
*BMC Pregnancy & Childbirth*

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Dear Editors,

We have pleasure in submitting the enclosed paper entitled: “Folic Acid Supplementation, Dietary Folate Intake during Pregnancy and Risk for Spontaneous Preterm Delivery: A Prospective Observational Cohort Study” for exclusive publication in *BMC Pregnancy and Childbirth* as suggested by Lin Lee, Senior Editor *BMC Medicine*.

Folic acid is recommended to pregnant women worldwide to prevent fetal neural tube defects. Studies regarding other pregnancy outcomes such as spontaneous preterm delivery remain controversial. Spontaneous preterm delivery is still a major problem in modern obstetrics strongly associated with neonatal mortality as well as short-term and long-term morbidity. Some recent observational studies suggest a protective effect of folic acid supplementation on the risk of preterm delivery; in some cases related to an expanded folic acid supplementation scheme as compared to supplementation schemes aiming at prevention of neural tube defects. However, studies in this field face major challenges in study design and remain contradictory.

The Norwegian Mother and Child Cohort Study (MoBa) including more than 106,000 pregnancies can meet many of these challenges. With detailed prospective assessment of folic acid supplementation from six months before conception throughout pregnancy, data on dietary folate intake as well as comprehensive information on lifestyle habits, health and socioeconomic status, MoBa provides a unique chance to study the association between folate intake and spontaneous preterm delivery.
Initiation of folic acid supplementation more than 8 weeks before conception was associated with increased risk for spontaneous preterm delivery. We did not find any significant association between the amount of folate intake from both diet and supplements and spontaneous preterm delivery. MoBa enabled us to rule out confounding by e.g. multivitamin supplementation, a history of adverse pregnancy outcome in a previous pregnancy or a longer time of unsuccessful intercourse indicating subfertility. Our results require careful investigation before folic acid supplementation guidelines are expanded as suggested by some earlier studies.

All authors have fulfilled the requirements for authorship outlined in the instructions for authors. None of the authors has competing interest to declare.

As peer reviewers we would like to suggest:

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Yours sincerely,

Verena Sengpiel, on behalf of all authors.

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