Author's response to reviews

Title: High-risk Human Papillomavirus Infection is associated with Premature Rupture of Membranes

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Author's response to reviews: see over
Dear Section Editors:

Please find our revised manuscript entitled: High-risk human papillomavirus infection is associated with premature rupture of membranes. All authors verify that this revised manuscript is original and is not currently under consideration for publication in other journals.

On next pages, we have described a point-by-point response to reviewer’s comments. Please check this manuscript carefully.

Best Regards

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REVIEWER 1

I appreciate your review. Your comments have been a great help to our study.

Reviewer (Luis Gomez)’s comment 1

The authors have made an effort in addressing all comments and revisions. They have acknowledged their limitations and expanded in providing additional information.

I would recommend the authors to report that their findings are seen in cases of PROM at term and not in PPROM.

Authors’ response

To reflect the opinion of the reviewer, we inserted a comment at Conclusion of Abstract and Discussion, such as “HR-HPV infection was also associated with a higher risk of PROM at term”.

REVIEWER 2

I appreciate your review. Your comments have been a great help to our study.

< MINOR ESSENTIAL REVISIONS >

Reviewer (Jeroen Vanderhoeven)’s comment 1

1. The authors have improved their description of the cross-sectional study design. However, confusion over study design remain. The current wording implies that KUMC delivered 311 women between 2010 and 2011. Does this study truly represent every woman who delivered at KUMC during this time period (cross-sectional design)? Or a subset that underwent HR-HPV testing only? If a subset, it is important to clarify as conclusions about prevalence cannot be made and selection bias must be acknowledged as a potential limitation.

Authors’ response

Our explanation about study design was enough confusing to a full understanding.

During 1 year, from February 2010 to January 2011, women who delivered at KUMC were 548. Among them, we included in the study women who came to KUMC for follow-up at 6 weeks postpartum. They were taken a pelvic examination, cervical cytology, and Hybrid Capture II test. So, we think that the possibility of selection bias is low. So, we inserted a comment in 1st paragraph of Methods, as “and came to KUMC for follow-up at 6 weeks postpartum”.