Author's response to reviews

Title: Incidence, determinants and perinatal outcomes of near miss maternal morbidity in Ile-Ife Nigeria: a prospective case control study.

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Version: 5 Date: 18 February 2013

Author's response to reviews: see over
I, Adeoye Ikeola, on behalf of the other authors (Adedeji Onayade & Adesegun Fatusi) wish to submit a new version of our manuscript having effected the corrections requested by the reviewers.

Title of Publication: Incidence, determinants and perinatal outcomes of near miss maternal morbidity in south western Nigeria: a prospective case control study.

Point by point description of the changes made and response to the reviewer’s concern:

1. Page 2, 3rd paragraph “which” has been changed to “with”
2. Page 3, last sentences – “Not just women admitted to the hospital 42 days post partum BUT women who met the operational definition and sought for care during their antenatal, intrapartum, post-partum periods (42 days after delivery).
3. Unmatched controls were used so as to be able to explore as many variables as possible.
4. The data on parity and gravidity have been included in Table 1.
5. Maternal education is indicated in Table 1, though no significantly difference between cases and controls.
6. Husband’s education was captured for all respondents and there was no missing data. For the respondents that were single mothers, the level of education of their male partners (i.e. the men responsible for the pregnancy) was obtained.
7. The multiple logistic regression analysis was re-run for perinatal outcomes using the most normal outcome as reference category (1.00). Therefore, the values in the result section for perinatal outcomes have changed with stillbirths, low-birth weight, and post-mature pregnancy now having significant association with near miss event. Apgar score was omitted from the model. The abstract and discussion are also adjusted to reflect these.(pg 1 & 9 paragraph 4)
8. Discussion has been readjusted to reflect a low income setting- Pg 8 last paragraph and Pg 9 first paragraph – One more reference was added (Killewo et al)
9. The statement regarding the advantage of incidence over prevalence has been removed
   “Incident cases are better for making inference about association between risk factors and developing the disease whereas prevalent cases may be more related to survival than development of the disease.” - DELETED
10. One more person was acknowledged – Waterstone in the UK.

Thank you very much.

Yours faithfully,

Dr Ikeola Adeoye