Author's response to reviews

Title: False positive morphologic diagnoses at the anomaly scan; marginal or real problem? A population-based cohort study.

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Author's response to reviews: see over
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To: The Editor in Chief of BMC pregnancy and Childbirth  
Clermont-Ferrand, January 7, 2014

Dear Sir,

We thank you for your comments.

Modifications to the article are in red in the text.

Overall I am happy with the revisions - there are a few minor typos and one sentence (minor essential revision three in the discussion on p10) that I don't understand 'No termination of pregnancy was performed for any of the malformations in the false-positive group, most of them isolated' - meaning needs clarified but I don't think this needs to go to further review. Also the authors responded well to points made re misdiagnosis and multiple malformation and I think a sentence or two around variations in interpretation of some data ie variations between reviewers views on false positives and the potential stress and cost for society would be helpful to all readers in the discussion.

Answer to reviewer:

The authors and the translator have revised the article in accordance with these suggestions.

The sentence “No termination of pregnancy was performed for any of the malformations in the false-positive group, most of them isolated” has been shortened for clarity: No termination of pregnancy was performed for any of the malformations in the false-positive group.”

We have added the following sentence to the discussion, on p 9: “The objective of this paper was to describe the global rate of false positives, that is, all diagnoses of malformations that turned out not to be present. It is important to note that false positive diagnoses in the misclassification group may wrongly evoke suspected syndromes. Thus while they may not influence the medical outcome of the pregnancy, they may nonetheless induce specific unnecessary complementary examinations, be a source of stress, and have costs for society. “