Author's response to reviews

Title: Talcum Powder or Aqueous Gel to Aid External Cephalic Version: A Randomised Controlled Trial

Authors:

Narayanan Vallikkannu (nvalli@um.edu.my)
Wan N Nadzratulaiman (nmyko79@hotmail.com)
Siti Z Omar (szawiah@um.edu.my)
Khaing Si Lay (silay@um.edu.my)
Peng C Tan (pctan@um.edu.my)

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Author's response to reviews: see over
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The Editor
BMC Pregnancy and Childbirth

Dear Editor

Talcum Powder or Aqueous Gel to Aid External Cephalic Version: A Randomised Controlled Trial. Manuscript ID: 1416029015107488

Thank you for permitting us to revise our manuscript another time. The editors and reviewers also have our gratitude for the very high quality of attention and insight they have spent to help improve the manuscript.

Our point by point response to comments in reply to our initial manuscript revisions is as follows

1. Please include CONSORT checklist as an additional file. 
   *Consort checklist is included in the resubmission.*

2. Tables as additional files: We notice that you have included tables as additional files. If you want the tables to be visible within the final published manuscript please include them in the manuscript in a tables section following the references. Alternatively, please cite the files as Additional file 1 etc., and include an additional files section in the manuscript.
   *We have incorporated the Tables into the manuscript.*

Reviewer 1
Reviewer: REMON KERIAKOS

Reviewer's report:
The authors have made the resonable changes requested from them
Thank you. No change to manuscript.

Reviewer 2
Reviewer: Raed Salim

Reviewer’s report:
Major Compulsory Revisions
Despite the response of the authors I still believe that the results between the groups could be affected by different operators (either better or worse). The authors in their response stated that 37 operators performed the procedure without providing information regarding any difference between their experience (years of experience, number of procedures performed in the past ….etc.). This information need to be added to the methods section. Additionally this issue remains a major limitation and should be at least "talked about" when discussing the limitations of the study.

The operators were a mixed of registrars with more limited experience of external cephalic versions and more experienced specialists. ECV is a standard procedure in our set up, offered to all eligible women with breech presentation around term and performed by duty providers on the delivery suite, so exposure to the procedure is widespread but thinly spread. We accept it is theoretically possible that more experienced operators were somehow allocated to perform ECV with a particular aid and this in turn might influence ECV success rate as 37 operators were involved. We did not think this occurred.

We did not record the exact ECV experience level of the operator (most are less experienced registrars). We did record the job grade of the operators, 6/48 (powder) vs. 6/47 (gel) P = 1.0 involved specialists. We have added relevant information to results and to the discussion to address this concern.

Reviewer 3
Reviewer: Natasha Nassar
Reviewer’s report:
The authors should be commended for their thorough response and have addressed all of the issues raised by the reviewers. My only suggestion is to remove the term posteriori from the analysis section in the methods.

*Thank you. The term posteriori has been removed from methods.*

We resubmit our manuscript for consideration of publication in BMC Pregnancy and Childbirth.

Yours sincerely

Peng Chiong Tan (Corresponding Author on behalf of all authors)