Author's response to reviews

Title: Behaviour change in perinatal care practices among rural women exposed to a women's group intervention in Nepal [ISRCTN31137309]

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Response to reviewer comments

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We thank both reviewers for the time they have taken to read and comment on our paper. They raise some interesting questions and have given helpful suggestions. Our response to specific points is outlined below.

Reviewer 1

Major compulsory revisions:

1. Thank you for pointing out our omission to do this. We have added to the text at the end of the introduction, the first paragraph of the discussion, the third (inserted) paragraph of the discussion and in the final conclusion at the end of the discussion.

2. Information was available for all women pre-trial and they then formed a closed cohort. We have clarified this at the start of the 3rd paragraph of the introduction.

3. We have added a paragraph to the discussion concerning the baseline imbalances.

4. We hope that the comparisons we are alluding to are now clarified.

5. With the changes made to clarify the confusion mentioned in point 4, this should also be clarified. The text for that sentence has additionally been modified to aid clarity.

6. We have added a paragraph to the discussion.

7. The BETTER:GOOD ratios provide the least useful clinical data. We omitted detailed information on these to avoid information overload and to concentrate on the more important and interesting outcomes. We have now added the information to table 2, added a paragraph to the “effect of being in an intervention VDC” section, added a section headed “Were women from specific subgroups who followed good practice during the trial more likely to be doing so as a result of a positive change?” and included the table of these results (table 5).

8. We have now discussed this point in the 2nd paragraph of the section “The independent effect of attending a women’s group”

9. This information could be added to table 2 which would make that table more complicated. Most of the percentages were very similar. We have added the largest differences between attenders and non-attenders (for antenatal care attendance) into the text and commented on these. The percentages of attenders falling into the BETTER, GOOD, BAD and worse categories are 22.8, 33.4, 37.6 and 6.2 for boiling the blade; 18.5, 60.1, 5.5 and 15.9 for appropriate dressing and 29.7, 46.2, 15.6 and 8.5 for not discarding colostrums. We do not think that giving these numbers will assist the reader much at the expense of complicating the table. However, we have no objections to doing so if the reviewer feels that it will be useful for the readership.

10. We have added tables 4 and 5 with this information.
11. We have added a paragraph to the discussion.

Minor essential revisions:

We have made all the amendments and clarifications requested.

Reviewer 2

Major compulsory revisions:

We have added a paragraph to the discussion about the baseline imbalances and their interpretation with respect to the main trial results.

Discretionary revisions:

Only 8% of the women had a skilled birth attendant at one or more of their births. Hence there was not enough variability in this practice to allow a thorough investigation of the effects of intervention with respect to this outcome. We have added text to the introduction and the 2nd paragraph of the discussion to clarify this point.

We have now given all OR and CI to 2dp.