Reviewer's report

Title: Severe Respiratory Distress in Term Infants Born Electively at High Altitude

Version: Date: 9 September 2005

Reviewer: Daniele Trevisanuto

Reviewer's report:

General

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MAJOR COMPULSORY REVISIONS (that the author must respond to before a decision on publication can be reached)

MAJOR COMPULSORY REVISIONS

1) Bakr and Abbas evaluated the contribution of elective delivery (ED) to severe RDS in term neonates born at high altitude. Previous studies assessed the influence of timing of ED on neonatal morbidity risk, but this is the first report evaluating this aspect in term infants born at high altitude. With this regard, the question posed by the Authors is new and well defined. However, the study design doesn't allow answering to this question. In fact, as reported by the authors (Page 6; Paragraph 3; Line 6), the most important limitation of this study was the lack of a comparison with a similar centre at sea level. To overcome this problem the Authors could add a Table in which their results are compared with those of previous studies evaluating this aspect in term infants born at sea level.

2) METHODS
   a) The methods are appropriate and well described, however the statistical analysis needs to be defined.

3) RESULTS
   a) The deliveries were classified as spontaneous, indicated, elective (Methods section) by the Authors. Among the 8634 infants delivered at 37-41 weeks' gestation, how many neonates were born by spontaneous, indicated, or elective deliveries?
   b) The data are presented as odds ratios, however it is necessary to define the 95% confidence intervals (Result section; Paragraph 3; Line 1).
   c) Table II may be omitted.

4) DISCUSSION
   a) The primary objective of this study was "to determine the incidence of severe RDS requiring mechanical ventilation at term among those delivered electively at high altitude". In the discussion section (Paragraph 2; line 1), the Authors stated 'we also tried to assess the contribution of ED to severe RDS'. As this is the primary aim, it has to be highlighted and discussed more extensively. In addition, in this study, the incidence of RDS was similar between infants born electively and those born by spontaneous deliveries. These results are different from those reported in other studies (Zanardo et al, 2003; Madar et al, 1999) and need to be discussed in this section.
   b) Page 6; Paragraph 2. "Deaths occurred in 15% in our series,..." This part is redundant and can be shortened.
   c) A comparison (adding a Table, see Point 1) with the published data coming from centres at sea level could be presented and discussed.

5) CONCLUSIONS
   As the primary objective of this study was "to determine the incidence of severe RDS requiring mechanical ventilation at term among those delivered electively at high altitude", it is not possible to
conclude that “the effect of high altitude could not be determined and further well-planned multicenter studies are needed” (Page 7; Last sentence). If the Authors compare their data with previous studies (see Point 1), I think it is better to conclude that “In comparison with previous studies made at sea level, our data suggest that the altitude does not seem to influence the incidence of severe RDS in term infants born electively. Further well-planned multicenter studies are needed”.

6) The title and the abstract are adequate.
7) The writing is acceptable.

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

MINOR ESSENTIAL REVISIONS
ABSTRACT
1. Results. It is necessary to specify the 95% Confidence Intervals of the odds ratios. Conclusions. See Point 5); Major Compulsory Revisions.

INTRODUCTION
Page 2; Paragraph 1; Last sentence. The sentence “the concept of maturity is even more different..” needs a reference.

METHODS
a) (Page 3; Line 1) The Authors stated “The diagnosis of RDS was made on admission”. I think that is not possible to have a specific diagnosis of RDS at admission, but at discharge.

RESULTS
a) Page 3; paragraph 3; Line 2. “The average birth weight was 2770+425, …”. These data are reported in Table I and can be deleted.

b) Page 4. Table I. Only 1 neonate with RDS was born at 39-<41 weeks. I don’t understand why the maternal age (30.7+4.4 years) and birth weight (3140+270g) are expressed as mean+SD.

DISCUSSION
a) Page 5; Paragraph 2; Line 1. The sentence “We also tried to assess the contribution…” has to be changed with “The primary objective of this study was to assess the contribution….”.

b) Page 6; Paragraph 3; Line 5. The sentence “However, we did not have lower incidence of term RDS in our series compared to other studies done at sea level.” needs the references of the cited studies.

REFERENCES
References are adequate. However, a part of them (REF. 2, 3, 6, 7, 11, 12, 19, 21, 22) includes the month of publication.

The pages of the manuscript have to be numbered.

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Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article whose findings are important to those with closely related research
interests

**Quality of written English:** Needs some language corrections before being published

**Statistical review:** No

**Declaration of competing interests:**

I declare that I have no competing interests