Author's response to reviews

Title: Borderline gestational diabetes mellitus and pregnancy outcomes

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Author's response to reviews: see over
06 June 2008

Dear Editor of BMC Pregnancy and Childbirth,

RE: MS: 1925629563735532
Borderline gestational diabetes mellitus and pregnancy outcomes
Hong Ju, Alice R Rumbold, Kristyn J Willson and Caroline A Crowther

Thank you for your letter of April 16 providing the reviewers report on our manuscript and giving us the opportunity to submit a revision. We have amended the manuscript in response to the editorial and reviewers’ queries with detailed responses below.

Thank you for considering our revised paper for publication in by BMC Pregnancy and Childbirth.

Wish best wishes
Yours sincerely,
Professor Caroline Crowther

**Reviewer 1 Carol J Homko**

**Minor Essential Revisions**

1. The authors need to define a positive oral glucose challenge test as well as normal OGTT. How did they classify women with one abnormal value on their OGTT?

A positive oral glucose challenge test was defined as a blood glucose ≥7.8mmol/L 1 hour after 50g glucose load. A normal OGTT was defined as a fasting blood glucose <5.5mmol/L and 2 hour value <7.8mmol/L. We have included this in the paper.

Women with one abnormal value for their OGTT were diagnosed as having gestational diabetes and not therefore eligible for this study.

**Discretionary Revisions**

1. I would like the authors to have included a second comparison group – women with diagnosed and treated GDM. It would have added an additional perspective to help interpret their results and would increase interest in their findings.

We do not have these data to include.

2. I am unclear as to the value of the composite outcomes. They included outcomes that are so diverse that they have little clinical meaning.

The composite outcomes were chosen to include clinical measures of severe morbidity for the woman or her infant.

**Reviewer 2 Peter Damm**

1. This RCT is referred to the ACTS-trial – please spell out ACTS for the general reader not familiar with the study.
ACTS stands for Australian Collaborative Trial of Supplements with antioxidants Vitamin C and Vitamin E to pregnant women for the prevention of pre-eclampsia. This has been added into the manuscript the first time it appears in the abstract and in the main text.

**Major Compulsory Revisions**

1. Women in the BGDM group were older and more obese – both risk factors for poor obstetrical outcome. Therefore I wonder why multivariate analyses with correction for these factors were not performed. Such analyses could be valuable in the interpretation of the data – i.e. if the increase morbidity is associated with borderline glucose intolerance or obesity or both. Such considerations could also be discussed in the discussion.

We were interested in evaluating the sociodemographics of women who developed borderline GDM and those who did not. As the reviewer indicates increasing maternal age and BMI are associated with GDM. We have now added in the adjusted analyses for these factors in the paper.

**Minor Essential Revisions**

1. P 7, 1.4: preterm delivery is defined as <27 weeks – I expect this is a spelling error and should be 37?

Yes, this is an error and has been changed to <37 weeks.

**Discretionary Revisions**

1. It seems like parity was not taken into account in the analyses – is this because information on this variable was not available?

All women in this study were primiparous so parity is not presented in the tables.