Author's response to reviews

Title: An evaluation of classification systems for stillbirth

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Dear BioMed Central Editorial Team

Thank you for the helpful comments from the reviewers. We have given careful consideration to all comments and submit the revised manuscript for your further consideration. A summary of the revisions is included below.

In addition, I have referred to the accompanying manuscript by J.F. Frøen et al (Causes of Death and Associated Conditions (CODAC)- a utilitarian approach to the classification of perinatal deaths) in two places in the discussion however I am unsure of the citation I should use. Please let me know and I will revise accordingly.

Kind regards
Vicki Flenady

The revisions according to reviewer are as follows:

Stephen Robson. No suggested changes.
Russell Kirby.

Discretionary:
The manuscript has been carefully copy edited
References have been amended to ensure consistency
All suggested language improvements have been made.

Minor essential:
Further detail on the stratification applied when drawing the sample for the agreement component has been included.
The word statistically has been removed as suggested
Statistical significance within the developing country subgroup analyses has been included

Major compulsory:
The information about stillbirth characteristics has been moved as suggested
Figures 1 and 2 have been combined
All figures now show standard deviation
Shading on Figures 3 and 4 has been changed
All tables and Figures are to be included in the body of the manuscript where possible
Additional files 5-9 have been combined into one file

Jan Jaap Erwich
We appreciate the comments in relation to the focus in our study on the performance of the systems according to the non-validated rating tool (InfoKeep) and the large number of subgroup analyses undertaken using this tool. While the study team feel the tool performed well in measuring the outcome of interest, we have attempted to address this valid concern by reducing the strength of our conclusions based on this measure alone.

We have attempted to elucidate the reasoning behind the subgroup analyses in the methods. We have not made significant changes in terms of the analyses using InfoKeep as these were defined a priori according to the important areas to assess performance of classification systems for stillbirth. However, we do draw attention to the limitations of this measure in the discussion.
We have elaborated on the issue of unexplained throughout the manuscript.

We have further highlighted the benefits of the Tulip system which are justified based on the results (better agreement, low % unexplained and only marginally lower scores using both rating scales)

Further explanation about the inclusion criteria for classification systems is provided to clarify why we did not include systems focussing on suboptimal care and those using an automated computer system

We appreciate the comments with regard to inherent bias when assessing the performance of Tulip in classifying FGR and have addressed this in the discussion

We have given further thought as to the possible reasons why Tulip performed best in terms of agreement but marginally worse in terms of information retention.

To clarify, InfoKeep was scored when study teams deemed information to be somewhat important or important– this is described in the methods.

The sentence of the virtues of CODAC which are not substantiated in the text (i.e. user-friendly interface) has been removed.