Reviewer’s report

Title: Acceptability of intrapartum HIV counselling and testing in Cameroon

Version: 2 Date: 3 October 2008

Reviewer: Anita Shankar

Reviewer’s report:

I appreciate that the authors have attempted to address each of the reviewers comments and the manuscript is much improved.

While I don't believe that any major compulsory revisions are required, I would like to suggest a number of moderate essential revisions to the manuscript. Many of these suggestions pertain to the Introduction and Methods, which I feel are quite weak in their current state.

Introduction: In the reporting of data from other studies, it is helpful if the authors include more specifics about these studies – such as percentages, the location and year (or other associated information) so that the reader is able to make a better judgment about the evidence presented. For example, what is does a ‘reasonable proportion’ refer to – 50%, 30%, 20%, please clarify. Another example is ‘A recent study reported a high risk of false-positive...’ Where was this study done, when, what was the false positive rate? If the authors would like to focus on the HIV/AIDS problem in Africa (or parts of Africa), they may want to distinguish this in the beginning as the socio-cultural context is different in Africa compared with Asia, the South Pacific, South America, etc.

Also in the introduction – please clarify- 20% of pregnant women don't get antenatal care during their pregnancy – of those that do, how many get tested (or is there no data on this?)

The Introduction should better set the stage for how this study falls within the existing literature on testing during labor. It may be useful to provide a brief review of other studies that have examined this question, pointing out that little data has come out of Cameroon.

Methods

It would be useful to include a few more details about the location of these hospitals, why and how they were chosen, what you would expect regarding the population using these facilities, etc.

How many women showed up in stage 2 labor?

Was additional training done for the counselors or other activities to prepare for the study?

Do the authors have any data or information on why women would not accept to be tested?
Discussion

What is the current state of care for individuals with HIV, what drugs are available? In the hospital, how many mother-infant pairs have access to these medicines?

How will HIV testing during labor reduce the rates of PMTCT in this country - what do the authors expect will be the reduction? Compared to other interventions, what is the justification that instituting the opt out approach will be a beneficial policy for the country.

This paper is nearly there and I think would benefit from additional revisions

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

**Quality of written English:** Acceptable

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

**Declaration of competing interests:**

I declare that I have no competing interests