Author's response to reviews

Title: Birth after preeclamptic pregnancies: association with allergic sensitization and allergic rhinoconjunctivitis in late childhood. A historically matched cohort study.

Authors:

Kristine K Byberg (kristine.kjer.byberg@sus.no)
Bjorn Ogland (bioeg@ous-hf.no)
Geir E Eide (geir.egil.eide@helse-bergen.no)
Knut Omar (knut.oymar@sus.no)

Version: 3
Date: 6 March 2014

Author's response to reviews: see over
Reviewer number 1: Peter Gerard Gibson

Has no comment

Reviewer number 2: Franca Rusconi

The reviewer suggests further emphasizing the possibility of collider bias, and suggests a paragraph and reference. We agree on this and have revised the manuscript accordingly.

Reviewer number 3: Bernt Alm

1. Since there were girls with an age of 10.5 years or even less (which I do not describe as 'close to 13’), I still suggest a change of terminology.

   We have changed the terminology as suggested. The word “adolescence” has been replaced by “late childhood”; and the word “adolescents” has been replaced by “children”.

2. P5. This is still very confusing. In ref. (17) is stated that the investigators... invited all girls and boys to a follow-up study at the target age of 10.8 years in girls and 11.8 years in boys. The target ages were selected so that puberty stage data at an age presumed to represent the start of puberty development in the children could also be collected.” This is a little better, but it is hard to understand how girls invited to participate at 10.8 years, can enter the study at 10.5?

   The children were invited to participate at the target age, but due to practical reasons a minor spread of age was inevitable (suggested date for investigation not suitable for the participants). However, the mean age was similar to the target age for both genders and with a small SD.

3. P12. Still not explained. I find no calculation or suggestion of a trend. In the original manuscript, p.6, it says that “Before analyses, preeclampsia was further categorized into mild/moderate (combined) and severe.” With such a dichotomization, it is not possible to speak of a trend.

   We appreciate this comment which is correct, and regret that the categorization was not well described.
   Regarding page 6, it has been emphasized that the variable preeclampsia was a 3-category variable: Before analyses, the variable preeclampsia was further categorised into none, mild/moderate (combined) and severe. This statement is now moved to the statistics section. Also, in the statistics section, we have added:
Analyzing the ordinal variable preeclampsia as were it a continuous variable with scores 0, 1 and 2 for the three levels, ORs showing a trend have been calculated by multiple logistic regression analysis. The results are given in the manuscript.

4. **P20. This is an awkward sentence, and does not explain anything. See above, P5.**

As a response to this, we have included more information about the target age, using the sentence given in reference 17.

5. **P23. I can understand this explanation and it is possible to keep the table. However, the changes in the table text do not add anything to what is already said in the table. It can safely be removed.**

We appreciate this comment, and have removed the additional table text.