Author's response to reviews

Title: Incidence and risk factors of preterm birth in a rural Bangladeshi cohort

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Author's response to reviews: see over
To

Editor

BMC Pediatrics

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We are pleased to submit a revised version of the manuscript submitted earlier entitled “Incidence and risk factors of preterm birth in a rural Bangladeshi cohort”. All the comments we received from the reviewers were taken into account and we made necessary changes in this revised version.

Our responses and changes made are shown point-by-point in the following table:

<table>
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<tr>
<th>Reviewer’s Comment</th>
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| The minor essential revision has to do with the antenatal complications reported by mothers who delivered preterm. The authors should state these complications in the text as well as in the relevant table and statistically analyze each | Antenatal complications are mentioned in the text on page 7 under “Assessment of exposure variables” | Added text on page 7 under “Assessment of exposure variables” as: (history of fever, severe abdominal pain, swelling of hand, leg or face, vaginal bleeding, convulsion, severe headache, blurring of vision). On bottom of Table 3: all these itemized complications are mentioned. An additional web-table is added to present statistical analysis for each of these antenatal complications as risk factors for preterm birth. Also added the following text on page 12: “Itemized
separately as a risk factor for preterm birth. risk analysis for each of the antenatal complications is presented as web-table (available online).”

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<td>The parent study was an evaluation of an intervention through CHWs trained for 12 weeks and thus the data for these analyses are drawn from the intervention as well as the control arm. It would be important to understand from the authors what were the interventions that could have potentially impact prematurity and how does it affect the overall analyses and its limits the interpretation of the results. Did the authors analyze by arm and observe any difference between them vis-a-vis the risk factors that they have reported.</td>
<td>In the parent trial (Chlorhexidine study) communities were randomized into ‘intervention’ and ‘control’ arms, but the differences between these arms only arose AFTER babies were born (i.e. one of three cord care regimens, two of which included application(s) of chlorhexidine to the cord. In terms of the pre-pregnancy and pre-delivery periods, there were no differences in the activities of the CHWs. Therefore, there was no such intervention from CHW which could have had any impact on differentials of preterm birth rate among study areas.</td>
<td>No change in the text has been made in this regard</td>
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<td>Since majority of preterm births were late (55.1%) and one of the mainstays of this paper is the burden of preterm births (22.3%) it would be important to record both within the abstract its limitations vis-a-vis the method of determining LMP. There is enough evidence and reasons to suggest that LMP based reports are prone to errors and this error needs to be reported as well. This will significantly impact the reported burden of prematurity in the population.</td>
<td>We accepted the reviewer’s suggestion to mention overall late preterm rate (55.1%). In the Discussion section (on page 17 – the last paragraph) we discussed elaborately on the limitation of our study results by relying on LMP to determine gestational age. And we also mentioned “Compared to ultrasound, use of LMP may over or underestimate preterm delivery depending on characteristics of the sample, timing of ultrasound, and LMP recall period.”</td>
<td>We added the following text in the abstract: “Overall, the majority of preterm births (55.1%) were late preterm.”</td>
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<td>Figure 1 does not contain any diagram but I suspect that is a typographical error.</td>
<td>Yes, the diagram was missing erroneously. We have fixed it.</td>
<td>Diagram is added in Figure 1</td>
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<td>In Figure 1: “Pregnancy terminations” is inappropriately used.</td>
<td>We replaced “Pregnancy terminations” with “deliveries”</td>
<td>Figure 1 has been revised: e.g. “Pregnancy terminations” in Figure 1 is replaced with “deliveries”.</td>
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<td>On Page 8: Data entry was done using an automated..... Not sure if the word “automated” is correctly used.</td>
<td>We accepted the reviewer’s comment and made changes in the text.</td>
<td>On page 8: following text was added to replace the previous sentence: “Data entry system was custom‐designed with built in range and consistency checks.”</td>
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All the authors have approved these response and the changes made in the revised manuscript.

We will be willing to work further with the editors to make the edits on the manuscript, as necessary.

Thank you for your consideration of this manuscript. We will look forward to hearing from you soon.

Sincerely,

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