Author’s response to reviews

Title: Diet and Lifestyle Interventions in Postpartum Women in China: Study Design and Rationale of a Multicenter Randomized Controlled Trial

Authors:

- Wei Bao (baowei_0613@163.com)
- Aiguo Ma (maiguo@public.qd.sd.cn)
- Limei Mao (mlm912@163.com)
- Jianqiang Lai (jq_lai@126.com)
- Mei Xiao (hbfyxm@yahoo.com.cn)
- Guoqiang Sun (sun821ch@126.com)
- Yingying Ouyang (longgangfangdong@163.com)
- Shuang Wu (carroll_wd1314@sina.com)
- Wei Yang (outwithstanding@163.com)
- Nanping Wang (np_wang@163.com)
- Yanting Zhao (yanting9876@sina.com)
- Juan Fu (190390046@qq.com)
- Liegang Liu (lgliu@mails.tjmu.edu.cn)

Version: 3 Date: 15 February 2010

Author’s response to reviews: see over
Dear Editors,

On behalf of my colleagues, I wish to submit the accompanying revisions of our manuscript entitled “Diet and Lifestyle Interventions in Postpartum Women in China: Study Design and Rationale of a Multicenter Randomized Controlled Trial (Manuscript ID 3434844393398293)” for publication in *BMC Public Health* as a Study Protocol.

Please find the attached item-by-item responses for the reviewer’s report below.

**Reviewer's report:**

This is a well-written protocol using appropriate methodology.

Discretionary revisions:

**Comment 1.** The sample size is calculated to be adequate for only one of the health problems being investigated: Constipation. It would be useful to specify what the primary outcomes are, and ensure that the sample size is adequate for all primary outcomes.

**Response 1.** Thanks very much for your suggestion. We have modified the manuscript (“Sample size” Section) in accordance with your comment. In fact, we have calculated the sample size and statistical power for all the major indicators in our study design. We take constipation as an example only to show the calculation procedure. Outcomes that will be measured have been described in the “Outcome measurements” section and Table 4 of the original manuscript.

**Comment 2.** I would strongly recommend including a measure of postnatal depression (eg. the Edinburgh postnatal depression inventory). On the one hand, more flexibility in food and activity may reduce depression. On the other hand, departure from cultural norms may increase depression.

**Response 2.** It is really a fantastic suggestion. Thanks very much. Please find the corresponding modification in the manuscript (“Outcome measurements” section) and
Table 4. We have already managed to obtain both the English original version and a validated Chinese version of the Edinburgh postnatal depression scale (EPDS). Therefore we will apply this scale in practice of the current RCT. Moreover, we are considering initiating a new RCT, which will be specific to the diet and psychological intervention on prenatal/postnatal depression.

Thanks for your consideration.

Yours sincerely,
Professor Dr Liegang Liu
Department of Nutrition and Food Hygiene,
School of Public Health, Tongji Medical College,
Huazhong University of Science and Technology,
13 Hangkong Road, Wuhan 430030, PR China.
Tel.: +86 27 83650522; Fax: +86 27 83650522
E-mail address: lgliu@mails.tjmu.edu.cn