Author's response to reviews

**Title:** Prevalence and barriers to HIV testing among mothers at a tertiary care hospital in Phnom Penh, Cambodia

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**Author's response to reviews:** see over
To
The Editor,

BioMed Central Public Health

Subject: Resubmission of article title; “Prevalence and barriers to HIV testing among mothers at a tertiary care hospital in Phnom Penh, Cambodia”

Dear. Sir and Madam

Enclosed here is the reply to the queries raised by reviewer for the paper submitted to BioMed Central Public Health. If there be any further query, we will be pleased to answer. The mentioned corrections have been done in the main text also.

Kindly note that comments from reviewer is followed by response.
To reviewer 1

- Need to replace the abstract.
  We replaced the abstract.

- Writing needs to be improved. It will help a great deal if the manuscript is professionally copyedited for English usage.
  Our manuscript was professionally copyedited for English usage.

- In the abstract (if the authors replace it as it was in the initial submission), the authors recommend "efficient utilization of available human resources." A careful reading of the manuscript (cf. pp. 9-10) suggests that what the authors mean is that HIV testing should be made available in all health facilities in rural areas. This must be clearly stated in the abstract or else the paper loses much of its value.
  We stated it clearly following your comment. (Kindly see P11 line 15-7)

- On line 15 of the abstract page (in the initial version of the manuscript) the authors refer to "partner’s permission." Apparently they mean "a perceived need to obtain their partner’s permission to be tested."
  We revised it following your comment. (Kindly see abstract lines 15-6, P5 lines 3-4, P7 lines 1-2, P7 lines 13-5, P7 lines 18-9, P8 lines 14, P12 lines 12-3, Table 3, and Table 4)

- In the first line of the conclusion, they write about improving “access” to HIV testing. I believe they are referring to "acceptance" or "uptake" of HIV testing rather than access.
  We revised it following your comment (Kindly see abstract lines 20 and 23).

- On page 8 (lines 9-11), they say “there might be many mothers who did not well understand the HIV prevention and treatment including the advantages and disadvantages of HIV testing and eventually received HIV testing.” By this, I believe they mean that “there may be many mothers who receive HIV testing despite not understanding the advantages and disadvantages of HIV testing very well.”
We revised it as follow “This suggests that many mothers receive HIV testing despite a lack of understanding about the advantages and disadvantages of HIV testing.” (Kindly see P9 lines 20-1).

· On page 9 (lines 2-5), they say "Introducing the PITC strategy may have a great impact on the uptake of HIV testing, however issues regarding information provided in pre-test counseling and maternal right to know the additional information related to HIV testing must be considered.” By this, I believe they mean "Introducing PITC may increase HIV testing, but mothers must understand basic information about HIV, including their right not to be tested.” We revised it following your comment (Kindly see P10 lines 16-8).

· A fundamental premise of the paper is that under "PITC" (provider-initiated HIV testing and counseling), all women having babies are offered HIV testing, but many opt out. Whether they get tested or not is the outcome on which the paper is reporting. Apparently the reason all women do not get tested is that they decline the testing. This is not stated in the paper and was unclear to the reviewers and to myself, but after seeing two versions of the manuscript I can now infer it. The authors need to state this clearly. It is not clear that acceptance (by women) of HIV testing is the outcome variable being examined in the paper. We stated it clearly as your comments (Kindly see P4 lines 3-4, P8 lines 2-3, P12 line 11).
To reviewer 2

Overall comments

・ There is still a need to review English language grammar in the overall document.

Our manuscript was professionally copyedited for English usage.

・ Even though the authors have made changes to this version of the manuscript, there are still major compulsory issues that need to be looked at.

We revised the manuscript followed by two reviewers.

・ It has been difficult to follow the corrections made. Pleased consider for next time to include the correction in the explanation and/or cite the page/paragraph/line.

We added the explanation and the citing page (Kindly see P 7 lines 10-1).

Method:

・ Questionnaire items: such as “experience of ANC” is still not clear (page 4)

We explained it (Kindly see P 5 lines 4-6).

・ The authors mention that to avoid response bias, reasons for not tested were not collected, this is not clear.

We added the explanation (Kindly see P 5 lines 20-1).

Results:
Among mothers who got tested for HIV, “perfect score” was observed. Perfect score of what? (page 6). How was this calculated, what is the definition of this variable. This has not been clarified. We defined it in method (P5 lines 7-10) and added the explanation and citing page in result (Kindly see P7 lines 9-12).

Discussion:

- Page 8: Even though the issue of provided initiated testing and counseling (PITC) and being aware or not of the possibility of individual counseling as well is important (as suggested in the previous review), it is not well discussed here. It is written but with no link to the results of the study. This needs to be clarified. We clarified it (Kindly see P10 lines 9-15).

- Page 8: It is still not clear for this reviewer why authors mention the risk of not obtaining knowledge on HIV concepts with PITC. We stated it as well (Kindly see P10 lines 9-15).

- Page 10: The paper by Perez et al. is in Zimbabwe not Zambia!
We corrected it (Kindly see P12 line 5).

References:

- The format of references still needs to be reviewed.

It was professionally revised.

If you still have any query kindly don’t hesitate to ask us.

Kind regards

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