Author's response to reviews

Title: Knowledge, perceptions and myths regarding infertility among selected adult population in Pakistan: A cross-sectional study

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Author's response to reviews: see over
Reviewer's report

Title: Knowledge, perceptions and myths regarding infertility among adults visiting tertiary care hospitals in Pakistan

Version: 2 Date: 10 July 2011

Reviewer: Mary McNaughton-Cassill

Reviewer's report:

- Major Compulsory Revisions

1) Introduction:

The introduction for this study has been revised significantly, making it clearer and easier for the reader to follow.

2) Methods:

a) This section is still somewhat awkward, and difficult to follow. It might be better to call infertility a condition or a disorder rather than a disease. It may just be a function of my computer but a number of the words are running together.

   The methods section has been rewritten incorporating the comments suggested by the reviewer. The term that was used to ask people if they considered infertility a medical condition better translates into the word "disease" and therefore it was used as it is in the paper. We have changed it to the word "disorder" where it was appropriate.

b) This section still needs to developed. How were people approached? Where were they interviewed. How was the power calculation made?

   More details have been added and the formula that was used to make the power calculation has been included.

c) The term test tube baby will still raise flags in Western readers. Is the English term actually used even with Urdu speakers?

   As was explained in the replies to the earlier reviews, “Test tube baby” is the phrase that has been used in the media and local health channels referring to assisted reproductive technologies such as IVF. It is also the term used by gynecologists when counseling the infertile patients and there is no exact translation of this term in Urdu. We have reconfirmed this f a native Urdu language expert. Based on these reasons, we decided to use test tube baby as the term for IVF and related technologies.

   The wording could also be revised. For example:

d) The questionnaire was divided into various subsections, the first assessed knowledge of infertility and the next evaluated people’s attitude toward infertility. The final section inquired about their perceptions of how infertility
affects marital outcomes and explored prevailing myths about infertility in the context of Pakistani culture and society.

This has been changed and highlighted.

3) Results:

a) Since most of the questions were presented in a yes/no rather than a continuous format, their statistical analysis is limited. However, it would still be useful to compare things like knowledge and attitudes about infertility, on the basis of gender, and education level, especially since such factors are discussed in the introduction.

We did perform statistical associations in our study using variables like the education level and gender. The significant and interesting associations mentioned in the manuscript have been highlighted in red.

b) In the results section it would be preferable to refer to education level as opposed to simply “education.”

Changed

c) The discussion of whether infertility should be labeled a disease should at least be introduced in the introduction.

It has been added in the introduction and highlighted.

4) Discussion:

a) The discussion still needs significant revision. There are still a number of awkward phrases and sentences in this section. The first sentence states that knowledge about infertility was “inadequate” but it is not clear how this is defined. The word limited might be better. In later paragraphs it would read better to say “being blamed” for infertility rather than “to be” blamed, or to talk about “common” causes of infertility, not “big” causes, and to use the word “disturbing” rather than “disappointing” in regard to results.

The words have been changed to the suggestions given.

b) The content of the discussion needs to be reorganized so that it addresses the points raised in the introduction in a clearer, less disjointed manner. Some of the most interesting issues raised in this study include people’s focus on alternative treatments for infertility, and the role religion in influencing people’s attitudes towards infertility, which are still given only cursory mention.

The discussion has been thoroughly revised. The content of the discussion has be reorganized so that it reflects knowledge, attitude and perception in a flow. It now follows the pattern similar to the introduction and the results section. The entire manuscript, especially the discussion was later edited by a professional editor for its English. The interesting aspects of the study for e.g. focus on alternative treatments and the influence of religious views have been elaborated further.

In addition, although television may be the most accessible media available to
spread information, the discussion does not address who might craft messages to be broadcast, how they would be paid for or who they might target. While these are not issues addressed by the studies survey they could be raised in terms of the need for future studies.

We are recommending the use of television because it would be an effective way to get the message across because it is readily available in every household including people belonging to low socio economic strata. We recommend that it can be broadcasted through the numerous health shows that are aired on television.

Likewise, if religious leaders might contribute to the discussion it might be useful to propose assessing their understanding and beliefs about infertility as well.

We also strongly agree that assessing the knowledge of religious leaders is important. It may also identify the source of misinformation and reasons for low acceptability of infertility treatment options in the society.

c) In addition, the limitations section is not well developed. Although a convenience sample and interviewer bias are real problems, they occur in many studies, and the use of a structured interview helps to minimize their influence. It would have been nice if more was ascertained about the respondents own IVF history, and the content of their alternative beliefs which could be proposed for future studies.

We agree that the respondents own IVF history was a limiting factor in our study and it has been duly addressed. The other suggested limitation has been added to the section as well.

d) The section on recommendations makes a number of statements about the belief systems of less educated individuals that should be substantiated by evidence from the literature, and the section on making “correct Islamic views” available to the public is too vague. What are those views and how consistent are they with IVF technology and practices.

Details about what correct Islamic views has been added to the recommendations.

5) Conclusions:

In short, although the authors have made significant revisions to this paper, it is still not ready for publication. To some degree this may be due to language issues, so perhaps they might seek assistance with English editing. However, there are also a number of concerns they need to address in terms of the analysis, presentation, and discussion of the data.

The article has been extensively edited incorporating all the changes suggested by the reviewers. An editor was consulted to improve the organization and language of the entire manuscript. I hope our study is now suitable for publication.
**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Not suitable for publication unless extensively edited

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

'I declare that I have no competing interests'
Reviewer's report

Title: Knowledge, perceptions and myths regarding infertility among adults visiting tertiary care hospitals in Pakistan

Version: 2 Date: 23 June 2011

Reviewer: Ruth Dixon-Mueller

Reviewer's report:

The revisions have substantially improved the paper, given the limitations of the study and the questionnaire. Nevertheless, it remains rather awkwardly written and presented, and some footnotes are still incomplete (e.g., journals articles are cited without page numbers). The paper needs to be edited professionally if it is to be submitted to a professional journal.

The entire manuscript has been revised to improve its organization and language. An external editor was consulted for this purpose. The bibliography and referencing has been completed using endnote.

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

Quality of written English: Not suitable for publication unless extensively edited

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests