Reviewer's report

Title: The influence of in-pregnancy smoking cessation programs on partner quitting and women's social support mobilization. A randomized controlled trial.

Version: 2 Date: 4 April 2005

Reviewer: Laurence Moore

Reviewer's report:

General

This paper uses a completed trial of smoking cessation in pregnancy to address the impact of the intervention on social support and partners smoking. The intervention was not specifically targeted at these outcomes, and the outcomes were not primary or secondary outcomes in the original trial protocol. With greater recognition in the discussion of these weaknesses, and some greater emphasis on the recommendation that future antenatal smoking interventions and trials should more explicitly focus on social support and partners, the paper would still be a useful addition to the literature.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

The discussion should give some prominence to the following:
1. The fact that no difference was found between the two groups in social support or partners smoking is not surprising since the interventions were not primarily targeted on these outcomes. Whilst the paper provides a rationale as to how these outcomes are relevant to smoking cessation in pregnancy, and an argument for their explicit inclusion in antenatal smoking cessation interventions, it is not clear that the interventions were ever realistically thought to be targeting these outcomes.
2. Linked to the above, it needs to be explicitly stated that even if the interventions were having an impact on social support / partners smoking, the trial probably had little statistical power to detect such effects. It appears from data presented, and could be expected, that partners smoking in particular is most likely to be an important factor among the minority of pregnant women who make a successful quit attempt.

The above two points are both linked to the main weakness of the paper, which is that it appears to be a post-hoc analysis of trial data collected from a trial with other outcomes as the focus of the intervention, and therefore of the trial protocol. This fact needs to be more explicitly recognised in the paper. The paper could also be strengthened by making a little bit more of the recommendations for future interventions and trial protocols to take more explicit account of social support and partners smoking.

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

P7 first line
Some interpretation of a median Fagerstrom score of 3 would help. What was the range of cores?

P9 penultimate line
‘These are social liberation includes’ – makes no sense!

P11 Outcome measures first line
‘The first was women’ – makes no sense ‘was that women’?

P12 first para
Some examples of items in the 3 subscales would be welcome.

P14 Discussion first para line 7
Which advice -> advice which

Discretionary Revisions (which the author can choose to ignore)

Abstract
An additional conclusion could be that interventions and trials of antenatal smoking cessation should in future give greater attention to social support, partners smoking, and the demographics and context of pregnant smokers.

P6 final para of introduction
‘Combining the two arms’ should more clearly indicate which two arms were combined (presumably B and C) and give some idea of why this occurred, and when (before trial, during trial, or at analysis stage)...
In addition to odds-ratios, some indication of the relatively low incidence of smoking cessation in all arms of trial.

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

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

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:
I declare that I have no competing interests