Author's response to reviews

Title: Why do adult women in Vietnam take iron tablets?

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Version: 5 Date: 15 May 2006

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<td>Objective: To analyze the factors in compliance with taking iron tablets where daily doses of iron (60mg) and folic acid (400µg) were distributed in a rural commune. Design: Cross sectional survey. Setting: Nghe An province, Vietnam, January, 2003. Study population: Adult women aged less than 35 years who delivered babies between August 1\textsuperscript{st} 2001 and December 1\textsuperscript{st} 2002 (n=205), of which 159 took part in the study. Method: A series of workshop with community leaders, focus group discussions with community members and a questionnaire survey. Results: Improvement of anemia was not given a high priority as one of the commune’s needs, but the participants made efforts to continue taking iron tablets. Two major factors motivated the participants to continue taking iron tablets: their experience of fewer spells of dizziness (50%), and their concern for the health of their newborn baby (54%). When</td>
<td>Background: Conducting iron supplementation programs has been a major strategy to reduce iron deficiency anemia in pregnancy. However, only a few countries have reported improvement in anemia rate at a national level. The strategies of the dynamic nature of nutrition problems means need regular review to maintain and improve their effectiveness. The objective of this study was to analyze the factors in compliance with taking iron tablets where daily doses of iron (60mg) and folic acid (400µg) were distributed in rural Vietnamese communes. Methods: We conducted a cross sectional survey in Nghe An province, Vietnam in January, 2003. Study population was adult women aged less than 35 years who delivered babies between August 1\textsuperscript{st} 2001 and December 1\textsuperscript{st} 2002 (n=205), of which 159 took part in the study. Data for the study were collected from a series of workshop with community leaders, focus group discussions</td>
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examining the reasons for taking iron tablets for at least 5-9 months, longer period of taking iron tablets, the most important factor was ‘a frequent supply of iron tablets’ (OR=11.93, 95% CI: 4.33-32.85).

Conclusion: The study found that multiple poor environmental risk factors discouraged women from taking iron tablets continuously. The availability (frequent supply) of iron tablets was the most effective way to help adult women to continue taking iron tablets.

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| Medical Center in Nge Ane Province for their assistance in the field survey. | Medical Center in Nge Ane Province and National Institute of Nutrition for their assistance in the field survey. |