Author's response to reviews

Title: The assessment of Osteoporosis risk factors in Iranian women compared with Indian women

Authors:

Afsaneh Keramat (keramat1@yahoo.com)
Bhushan Patwardhan (bhushan@unipune.ernet.in)
Arvind Chopra (archopra@pn2.vsnl.net.in)
Bagher Larijani (emrc@sina.tums.ac.ir)
Ambrish Mithal (ambrishmithal@hotmail.com)
Hossein Adibi (emrc@sina.tums.ac.ir)
Devlina Chakravarty (ambrishmithal@hotmail.com)

Version: 5 Date: 7 December 2007

Author's response to reviews: see over
Respected Madam

Thank you very much for extending the deadline, please accept my deep apologize for delay in revising the manuscript.
I have corrected the manuscript, added the tables and details and answered the questions of respected reviewer as follow:

(I think that the manuscript seems very huge now if you or respected reviewer recognizes that some tables are unnecessary in main text, I can move them to additional files).

1- Descriptive characteristics of cases and controls in both countries are still lacking for HRT, calcium supplementation, exercise and food habits. All the variables used in the further analysis should appear in a table and should be compared using t tests and #2 before calculating the odds ratio.

I have added the tables in results part of the manuscript

2- Age is a major risk of osteoporosis and should appear in the results and the discussion.
I have explained about age in result page 5, table2, discussions page7 and also in methodology

3- Weight or bone mass index should also be evaluated as a possible risk factor in both countries.
I have added this in formations in results page 6 and table 12, 13 and also discussion page 9

4- History of osteoporotic fractures should appear in the discussion.
I have explained it in page10 in discussion

5- Methodology: the device used to BMD measurement for both countries should be indicated in the manuscript.
This part is explained in methodology page 4 paragraph 2.

6- To better understand why the authors have adjusted for age, the matching of the controls with cases in 10 years groups should be noted in the manuscript.
I have explained this part in methodology page 4, paragraph3, table1,
I had written in last cover letter that: The controls were matched with cases in 10 years groups (less than 45, 45 to55, 56 to 65 and more than 65) I need to correct the matching groups to(less than 49, 50 to59, 60to 69 and more than 69)
7- Tables 2, 3, 4 and 5: OR should appear after adjustment for age for both countries and for age and other confounding variables including prevalent fractures for both countries.

I have corrected this information in tables 5, 7, 9, 11.

8- The frequency of smoking should appear in both countries.
This part is explained in results page 6 and discussions page 9.

9- It seems surprising that no woman wore veil in Iran and only two in India. Is it really representative of the countries habits?

Iranian women used to wear veil (a black cloth that cover the face completely) more than 100 years ago but now a days there are very rare cases who wear veil and in my study as I mentioned before there was not any woman who were veil actually in whole of my life I have seen once or twice women who were veil in Iran
If mean of respected reviewer from veil is Hejab (that is covering head and neck and body except face and hands); as the rolls in Iran all of the women have to cover head and body (Hejab) in streets and public places. Thus there is nothing to compare because every body has hejab.
In India 12 to 14 percent of Indian are Muslim, there are many branches among Indian Muslims and only in one of this branches women wear veil. I think in a study with 300-400 sample size finding one or two women with veil is acceptable.

10- p6: “estrogen deprivation” and not “estrogen is one of the most important factors.”
I have corrected this part.

11- the role of estrogen deprivation is well known and the mechanisms by which it affects bone mass should not be discussed here.
I have excluded this part.