Author's response to reviews

Title: What aspects of periods are most bothersome for women reporting heavy menstrual bleeding?
Community survey and qualitative study

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Author's response to reviews: see over
Thank you for the opportunity to further revise this paper. We have met the reviewers concerns as follows:

**Response to Mark Shapley’s report**

We are glad that Dr Shapley feels our paper is improved as a result of our response to his suggestions. We agree that the fact that such a large proportion of the women interviewed have in the past consulted makes our report relevant to clinicians, as these are women who from time to time appear in the consulting room. We also agree there are resonances between our report and that of O’Flynn and Britten. However, in the latter study all interviewees were women consulting, then, for heavy bleeding, and whose responses at interview might arguably have been tempered with hope that any therapeutic actions taken at that consultation would shortly lead to a resolution of their problem. In contrast, our sample comprised women who if they had consulted had done so predominantly in the past, but who were still reporting heavy periods and in many cases a marked or severe problem with periods. We believe this sample is distinctively different and offers rich opportunity for elucidating women’s judgements that their periods are problematic, and understanding the role heavy bleeding plays in such judgements.

Our interviewees were selected on the basis of reporting heavy menstrual bleeding (and to some extent on stating periods as problematic) so the consultation rate in the past 6 months of 37.5%, higher than the Scambler paper - a random sample with 28% reporting consultation in the past 6 months - cited as background (4), is to be expected. However the Scambler paper is now quite old so we have altered the wording of the citation to reflect this, and have corrected the typo.

**Response to Sioban Harlow’s report**

In response to Dr Harlow’s reiterated point 4 we had (in response to the 7th point) added information to the methods section regarding the wording of this questionnaire item. We have now added further clarification to the methods section, as follows: “In accordance with usual practice in surveys ascertaining subjective heaviness of periods, no guidance was provided to define, for example, ‘heavy’ periods.”

In response to her additional question on that issue, we do believe that women’s subjective reports of heaviness have validity, as they have in the past been found to be associated with measured menstrual blood loss (reference 13, cited in paper) and in this study were associated with reporting periods a marked or severe problem. That is, for the subgroups reporting light/moderate loss, heavy loss, and very heavy loss, 9%, 37% and 82% respectively reported ‘problem’ periods.

In response to Dr Harlow’s point 5, As to whether perception of problem differs across heaviness responses, this is indeed the case, as clarified in our previous paragraph. However Dr Harlow also enquires about the part pain plays in perception of problem. We have therefore added to the discussion section the following summary of our previously published research, addressing the combined effect of pain and heaviness on perception of problem:

“The present findings are also consistent with our previously reported finding of a cumulative association of heaviness and pain on reporting periods as a problem. That is, among 2123 women not reporting severe pain, but reporting heavy or very heavy...
periods, 21% and 72% respectively reported their periods a severe or marked problem (1). Whereas, among 363 women reporting severe pain, and also reporting heavy or very heavy periods, corresponding percentages reporting periods a problem were 80% and 95% respectively (1).”

To provide a context for this we have also added a sentence to the background recounting the prevalence of period pain in our survey, overall and among those with heavy periods:

“We found that overall 15% of our entire survey sample reported severe or very severe pain, whereas among the subgroup reporting heavy or very heavy periods this proportion was doubled (31%) (1).”

We would like to thank both reviewers for their very useful feedback. We hope that you will judge that we have addressed their points satisfactorily.