Author's response to reviews

Title: Antenatal Screening and Its Possible Meaning from Unborn Baby's Perspective

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PDF covering letter
The Second ‘Point-by-Point Response’ to Review by Darryl Macer on the paper entitled ‘ANTENATAL SCREENING AND ITS POSSIBLE MEANING FROM UNBORN BABY’S PERSPECTIVE’

1) However there is no reference to China, India, Japan for example, so I think the paper refers more to the European debate.

Response: The reviewer could be right, it refers more to the European debate.

10) The sentence retaining "hurt the feelings of the disabled" is unacceptable. Firstly many clients of AND are parents of disabled persons, or disabled themselves. It is for that reason they do prenatal diagnosis. The literature does included numerous surveys of the views of disabled persons, for example see two papers I have published:
http://www.biol.tsukuba.ac.jp/~macer/EJ64/EJ64G.html
Japanese muscular dystrophy families are more accepting of fetal diagnosis than patients
- Hisanobu Kaiya, M.D. & Darryl Macer, Ph.D.
http://www.biol.tsukuba.ac.jp/~macer/EJ91/ej91h.html
Attitudes of MD patients and their families to DNA banks in Japan
- Hisanobu Kaiya, M.D. & Darryl Macer, Ph.D.

Response: I accept the reviewer’s comment and take out the statement “it does in fact hurt the feelings of the disabled who are the most vulnerable members of the society.”

11) I cannot accept to recommend publication if this point is not included as otherwise it is a misrepresentation of the purposes of AND. This is clear if you look at textbooks on AND. The paper should be scientifically sound in all respects, not only in the science which is acceptable to the views of the author. Not to include this belittles the important points made in the rest of the paper.

Response: I agreed with the reviewer and add the statement “The primary purpose of AND is to relieve parents of anxiety over inheriting a genetic disease, or giving birth to a child with congenital abnormalities (e.g. for older women), and this is the major outcome” as was suggested by the reviewer, to the first paragraph of page 12 under the title of ‘Consequences of Antenatal Diagnosis’.

14) I would still prefer putting the dates a little earlier to indicate the range of times, so that readers of the paper may not wait until a late time to seek counseling.

Response: I changed the date of Amniosentesis to “12th-14th week”, in Table 1.

15) I would suggest including counseling and say that the costs are very difficult to calculate and vary between country.
Response: I accept the reviewer’s suggestion and added “3) Costs in connection with counseling services.” to the first section of Table 2.

Final suggestion, in the case that a paper is in print and on-line, should reference lists be to html files on the web or just published documents?

As indicated above I consider points 10 and 11 are necessary to be corrected to the satisfaction of the Editor for me to support publication. If they are corrected I do not need to see the paper again.

Summary of the Changes Made in the Paper:

1) The statement “it does in fact hurt the feelings of the disabled who are the most vulnerable members of the society.” was taken out in the second paragraph (after reference 14)of page 6, under the title of ‘Aims and Benefits’.

2) The statement “The primary purpose of AND is to relieve parents of anxiety over inheriting a genetic disease, or giving birth to a child with congenital abnormalities (e.g. for older women), and this is the major outcome” was added to the first paragraph of page 12 under the title of ‘Consequences of Antenatal Diagnosis’.

3) The date of Amniosentesis changed to “12th-14th week”. in Table 1.

4) “3) Costs in connection with counseling services.” was added to the first section of Table 2.

I made the alterations the reviewer suggested. I thank Prof. Macer for his time, and hope the paper is acceptable for publication after these changes.

Kindest regards,

Dr. Sahin Aksoy