Author's response to reviews

Title: Uptake of HIV counselling and testing among pregnant women at different levels of health facilities - experiences from a community-based study in Northern Vietnam.

Authors:

Hanh Nguyen (n_thuyhanh@yahoo.com)
Tine Gammeltoft (tine.gammeltoft@anthro.ku.dk)
Vibeke Rasch (vira@sund.ku.dk)

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Author's response to reviews: see over
Responses to reviewer’s comments

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First of all, we would like to thank the Editor and our Reviewers for their constructive criticisms. Below, please find our responses to the reviewers' comments. Please note that the page numbers given refer to page numbers in the revised and resubmitted version of the paper. We have addressed most of the author’s comments. We consulted a statistician from Copenhagen University and we ourselves found some mistake of presenting data in the tables. We therefore revised table 2, 3, 4 and the revised text in the abstract, methods and result sections those relation to the change of the tables. We have used track changes to show all the changes in text and in the table.

The following are response to the reviewer and the changes of the manuscript:

Comment 1:
Paragraph 1 last sentence: For clarity, I would replace “early” with another adjective, such as “optimal” or “timing of” in the sentence discussing “examining the <early> uptake of HIV testing and counseling provision at different levels…” I suggest this because the definition of “early” is subjectively defined as part of the analysis, and it seems the intent of this analysis is to more generally investigate the timing of testing and discuss it in the context of expanding services.

Response: On p.3, Paragraph 1 last sentence, we have replaced the term “timing” instead of “early” as comment of the Reviewer.

Comment 2:
p.6 Typo in the spelling of “first”
Response: On p.6, the second paragraph, the last sentence, we have corrected this typo.

Comment 3:
Data Analysis section/Tables
I reread the revised sections and compared it to the Tables as listed there is room for further improving the flow between the description of data analysis, describing the tables, and presenting the tables, especially if the authors opt not to include the salient quantitative findings in the text.
For further clarity, the authors could list out or enumerate the analytic plan according to the tables. So, for example, “The primary outcome variable was ... in this study. First, we describe the sociodemographic characteristics of the study sample (table 1). Second, we used descriptive statistics and stratified the characteristics of HIV testing utilizers by type of health facility at which HIV testing was undertaken (table 2). Third, we assessed ... (table 3), etc.”

It appears from the tables that there are two outcome variables of interest, i.e. site for HIV testing uptake (as described in Table 2, but not mentioned in the text), and time of 1st HIV test, as presented in Table 3. What is the main focus, or do the two warrant equal attention?

Response: On p.5, on the Data analysis of the Method section, we have presented plan for data presentation and described the data in tables. We have added one sentence at the end of this section: “All associations are presented as Odds Ratio (OR) with 95% confident intervals (CI)”.

Comments 4:
The outcome of counseling provision is less of a main outcome, as opposed to another characteristic of primary versus higher level HIV testing facility is it better to remove Table 4 and include these data in the Table 2 format?
Response: We do not agree with this comment of the reviewer. Counseling provision is an important outcome of the results and this should be present together with the uptake of HIV testing. So we still keep table 4, and have revised it by separating pre-test and post-test counseling.

Comment 5:
When the text doesn’t describe the key quantitative points, the tables must be completely clear as to what they are describing and, in a sense, stand alone from the text. So for example, when I look at Table 2, I still do not know what the OR’s are describing, whether through a description in the title, or in a footnote, as I suggested including in the original review.

Regarding the crude odds ratios calculations in Table 2, I would recommend an expert statistician to review this method. To me and to a statistician I work with, it appears that this analysis is a subcategory analysis, rather than an analysis of the entire strata of education or age, etc. When the strata include both the subcategories (more than 2) as well as the health facility type, as well as the outcome of HIV testing uptake, logistic regression analysis should be used, even in a “crude odds ratio”. The adjusted odds ratio can incorporate additional sociodemographic categories, as already used in the table. If a subcategory limited, 2x2 analysis is used, this should be stated in the analytic plan. I think an expert statistician could and should help clarify whether this warrants further description in this paper.
Response: We have revised this table statistically and add more valuables: Occupational and Residence.

Comment 6:
In Table 4, the authors should define “uptake of HIV testing” as opposed to the “counseling provision” they defined. On page 5, rather than “combining” the variables, it appears they are “intersecting” the variables to find the subjects who received both types of counseling. How is this different from testing uptake? Did that include the blood test regardless of counseling?

Response: We have revised this table as mentioned in comment 4

Comment 7:
It is a limitation of the study that the report of receiving HIV testing was based on Self report from the subjects. This should be mentioned in the text as it is a well recognized limitation of most studies of this type.

Response: On p.7, In Discussion section, paragraph 2, we have added one sentence to point out this limitation.

Other changes:

- On p9, In the Acknowledgements, we have added the last sentence: “Many thanks send to Associate Professor My von Euler-Chelpin, Center of Epidemiology and Screening, Institute of Public Health, Copenhagen University for her consults on statistic”
- We have revised the titles of table 2, 3 and 4.

Thanks for your attention and looking forward to hearing from you soon

Best regards,

Rasch, Tine Gammeltoft and Nguyen Thi Thuy Hanh