Author’s response to reviews

Title: Can mothers rely on the Brazilian health system for their deliveries? An assessment of use of the public system and out-of-pocket expenditure in the 2004 Pelotas Birth Cohort Study, Brazil

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Author's response to reviews: see over
Changes made to the document in the second revision

1. Abstract: Nearly 50% of births were 'by the SUS?' - should this read: financed by?

Correction made.

2. Page 3, line 4: Of, of (repeated)

Correction made.

3. Page 4: 'Generally, access to health services through the SUS is high, with less than 5% lack of access' - how is lack of access defined here?

Text was revised to improve clarity.

4. Page 10 second to last line, need to add: 'financed by' the SUS

Correction made.

5. Page 11: 'The importance of the role played by the SUS is highlighted by the fact that the direct cost of a delivery, when paid directly to the hospital, was similar across the economic scale (although direct payment was practically unobserved among the 40% poorest), different from what was reported in a low income country setting [13], where a delivery among the rich costs, on average, ten times more than among the poor.'

5.a. It is not clear how this sentence highlights the importance of SUS, or what is meant by 'importance' in this sentence. The meaning of this sentence needs to be clarified.

5.b. Despite what is reported in reference 13, there are numerous studies from low income countries that have shown that the poor pay as much as the rich for deliveries, as there is no system in place to identify and protect the poor from such payments.

5.c. Is the Canada reference relevant? In your study you report little difference in amount paid for e-section or vaginal delivery.

The paragraph was removed altogether.

6. Table 4 some women reported as private financing yet 5% have a health plan with hospital cover? This is counter-intuitive. Would be helpful to explain.

Text explaining the situation was added to results (p.9).

7. Table 4: Need to add labels to explain what the numbers are.

Correction made.
- Discretionary Revisions

1. The authors make no mention of payments for the baby in discussion, yet this features as an important part of the results. Are there any implications from these findings, how should they be interpreted?

We added a short comment to the discussion.

2. How should the reader interpret the finding that over 20% women with health plans covering hospitalisation are still financed by the SUS? It would be helpful for authors to shed some light on this.

Text explaining the situation was added to the discussion (p.11).

Also, we carefully revised the text in terms of language. If deemed necessary, we may still send the manuscript for a professional reviser.

Formatting checklist was thoroughly followed and minor changes made to the document accordingly.