Author's response to reviews

Title: Malnutrition in pregnancy after bariatric surgery: three clinical cases of fetal neural defects

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Version: 2 Date: 1 April 2014

Author's response to reviews: see over
To the editor and reviewers of the manuscript “Malnutrition in pregnancy after bariatric surgery: three clinical cases of fetal neural defects”.

We are resubmitting this manuscript, revised in the light of the reviewers’ comments (all changes have been highlighted in yellow). We hope that our paper is now suitable for publication in Nutrition Journal.

Sincerely yours

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Reviewer’s report

Reviewer 1

Title: Malnutrition in pregnancy after bariatric surgery: three clinical cases of fetal neural defects
Version: 1 Date: 4 January 2014
Reviewer: Asnat Raziel

Reviewer’s report:
Accept without revision

Quality of written English: Acceptable

Declaration of competing interests:
I declare that I have no competing interests

R: Thank you for your opinion

Reviewer 2

Title: Malnutrition in pregnancy after bariatric surgery: three clinical cases of fetal neural defects
Version: 1 Date: 31 January 2014
Reviewer: giovanna turconi

Reviewer’s report:

COMMENTS TO THE AUTHORS
This case report deals with “Malnutrition in pregnancy after bariatric surgery: three clinical cases of fetal neural defects”. It is very interesting and contributes to medical knowledge highlighting the need for nutrition education and lifestyle change after bariatric surgery in childbearing age women who should be encouraged to follow a well-balanced diet and advised to take the recommended nutritional supplements. Nevertheless, it presents many inaccuracies that should be amended. These are listed below.
MAJOR COMPULSORY REVISION

1. Table 2 and 3
The authors report 3 cases of fetal neural malformation. But as far as case 3 is concerned, both in table 2 and table 3, no information are available regarding pregnant nutritional findings and fetal and neonatal outcome of the three babies. The authors should give an explanation in the text about the missing data.

R: We added in the table 3 that the hypovitaminosis condition was referred by the patient. Clinical records not available, because at the time used for a trial going on (page 11, table 3, case 3).

2. Table 2
In this table there are a lot of values that are illogical. Please, check the data carefully!!
R: Yes we did. We realized we had made typing mistakes revising the document that we have escaped (page 11, table 2)

• Vitamin A: nv 0.25-0.86: case 2 shows 10.25mcg/ml. How can it be possible? A value largely higher than the upper normal value!!
R: It has been corrected (page 11, table 2)

• 1-25 diidrossivitD: nv 48-110: case 1 and 2 show values above 400 pmol/L. How can it be possible since the mothers do not take any supplement? In addition, 25-idrossivitD that is the precursor of diidrossivitD is only 40.30 and 76.28 pmol/L. 1-25 dididrossivitD values are illogical!!
R: Thank you for your observation. It has been corrected (page 1, table 2)

• Moreover, I am very surprised that case 1 shows Hb level equal to 8.7 g/dl. I wonder that her general medicine physician did not follow her during pregnancy. Is there an explanation?
R: The patient had been proposed for blood transfusions but she refused for religion reasons, therefore afterwards underwent erythropoietin therapy.

3. Conclusions
Paragraph 12: the authors report that the clinical evidence of nyctalopia in case 3 could be strongly related to hypovitaminosis A. But they have no data on the nutritional status of the mother, since her data were not available. In the sentence, they should only suppose the presence of hypovitaminosis A.
R: we changed the sentence, the Hypovitaminosis condition was referred by the same patient (section discussion, page 6, lines 26-30). who was not in possession of the documents because at the time; these documents have been required by the trial court since she had sued the hospital.

MINOR COMPULSORY REVISION

4. Abstract-Results
First line: add “babies” after case 1 and 2
R: done (section abstract, page 2, lines 9)

5. Cases presentation
First line: the authors report that case 2 became pregnant at 2 years after
bariatric surgery. In table 2, instead, after 5 years. Check the data carefully!
R: corrected (section case presentations, page 3-4, line 1 and table 1)

Paragraph 4: change "showed" with "showen"
R: shown. The quality of written english was revised by native speaker (all changes have been highlighted in yellow)

6. Table 1 change the title with: Clinical and anthropometric data of the three mothers
R: Done (table 1, page 10)

7. Table 2 add nv to folates, iron, ferritin
R: done (table 2, page 11)

Quality of written English: Acceptable

Declaration of competing interests: 'I declare that I have no competing interests'

Reviewer 3
Title: Malnutrition in pregnancy after bariatric surgery: three clinical cases of fetal neural defects
Version: 1 Date: 1 March 2014
Reviewer: Melinda A Maggard

Reviewer’s report:
The authors have put together an important manuscript on poor fetal outcomes in pregnancies following bariatric surgery. While these types of adverse events from nutritional deficiencies are quite rare, they should be documented and available in the literature. Unfortunately, the manuscript currently suffers from poor grammar and awkward sentences. I found myself rereading sentences over again to try to understand the point.
1. The abstract’s first two sentences are examples of typos and grammar problems. Anatomic changes are not "induced" by surgery. "outcomes of nutrients deficiencies" is not correct. These errors run throughout the entire manuscript. This makes the manuscript very difficult to read, as one is distracted by the mistakes. It likely is a English translation issue.
R: the quality of written english was revised by native speaker (all changes have been highlighted in yellow)

2. The results section is much too short. This section should make up the bulk of the content of the manuscript.
R: Thank you for your suggestion. In the results section (section case presentations page 3-4) and table 3 we added some informations

3. And the presentation of each case report would be better if each is discussed individually rather than alternating back and forth between them.
R: As suggested, we revised the text and we discussed individually each case report (section cases presentation page 3-4)

Quality of written English: Not suitable for publication unless extensively edited
Declaration of competing interests: I declare that I have no competing interests