Author's response to reviews

Title: The intergenerational effects of war on the health of children

Authors:

  Delan Devakumar (d.devakumar@ucl.ac.uk)
  Marion Birch (marion.birch2@btinternet.com)
  David Osrin (d.osrin@ucl.ac.uk)
  Egbert Sondorp (egbert.sondorp@lshtm.ac.uk)
  Jonathan CK Wells (jonathan.wells@ucl.ac.uk)

Version: 2  Date: 14 February 2014

Author's response to reviews: see over
Author's response to reviews

Title: The intergenerational effects of war on the health of children

Authors:

Devakumar D (d.devakumar@ucl.ac.uk)

Birch M (marion.birch2@btinternet.com)

Osrin D (d.osrin@ucl.ac.uk)

Sondorp E (egbert.sondorp@lshtm.ac.uk)

Wells JCK (jonathan.wells@ucl.ac.uk)
Reviewer: Tony Waterston

Thank you for your comments, which we have attempted to address as described below.

Boxes

The boxes are now in order. A reference to Box 1 has been included, and Box 3 amended.

Examples of intergenerational effects of current health problems

The infectious disease section has a number of examples of how war can increase illness and how this can affect offspring. In addition to this, we have included examples in the nutrition and infectious diseases and health system sections regarding the potential effects of maternal illness.

The additional sentences included are:

“As common users of healthcare services, pregnant women are especially vulnerable to healthcare service disruptions, leading to exacerbation of illness. An example of this would be disruption to the supply of drugs and other medical equipment, as described in northern Sri Lanka during the recent civil war. Obstetric complications such as pre-eclampsia were common, potentially contributing to higher rate of low birthweight.”

“In non-conflict settings it is common for chronic disease in adults to affect their offspring, both biologically and economically via loss of earnings. An example of this would be the propensity to obesity and the development of gestational diabetes leading to preterm birth and macrosomia.”

Breastfeeding and bottle feeding

The following text has been included about the effect of war on breast- and bottle-feeding from conflicts in Croatia, Guinea Bissau and Bosnia.

“There is some evidence that breastfeeding rates can decline in wartime and the adverse effects of this can be greater. In the war in Croatia in the early 1990s, breastfeeding duration was shorter in affected areas. In Guinea Bissau in the late 1990s, infants who were weaned earlier during war periods had higher mortality rates than breastfed infants, compared with the pre-war years in which this difference was not present. In addition to not having breast milk,
we would postulate that disruption to formula milk supplies and unclean water would compound the adverse effects. It was shown that children who were never breastfed were more likely to be malnourished.”

Reviewer: Imti Choonara

Thank you for your comments. We have created two tables. One has taken information from the infectious diseases section, allowing us to shorten it. The other summarises the overall findings to enable the reader to see the main points.