Reviewer's report

Title: Women's sexual health and contraceptive needs after a severe obstetric complication ("near-miss"): a cohort study in Burkina Faso

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Reviewer: Stacie Geller

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The purpose of this manuscript is to assess whether there are differences in reproductive events in the year after the end of pregnancy in a cohort of women in Burkina Faso who either experienced severe pregnancy-related ("near-miss") morbidity or an uncomplicated childbirth. Documented outcomes include menses resumption, sexual activity resumption, dyspareunia, uptake of contraceptives, unmet needs for contraception, and women's reproductive intentions. Among women with near-miss complications, outcomes are examined separately for women with a live birth, natural abortion, induced abortion and perinatal death to determine whether those characteristics influence reproductive health in dissimilar ways.

This is an important area of inquiry because there is a lack of information about the consequences of "near-miss" obstetric complications on the reproductive health of women in resource-poor countries. Evidence from high-resource countries show serious consequences for women with severe obstetric complications but may not be generalizable to low-resource settings.

This manuscript presents an interesting observational study of the reproductive health outcomes of women in the first year post-partum or post-abortum in a resource-poor country. It provides evidence regarding the unmet need for contraception that may be used to improve family planning programs in similar settings, particularly with regard to differences between women with different pregnancy outcomes.

Major compulsory revisions:

1. Background, 5th paragraph: The second hypothesis does not clearly state which group of women is to be compared with the near-miss women with a perinatal death and/or an early pregnancy loss. It needs to be clear whether they are being compared to all women with live birth, women with uncomplicated delivery or near-miss women with live birth.

2. Methods, 1st paragraph under "Case definitions for near-miss complications and uncomplicated childbirth": The "near-miss" case definition should be spelled out more clearly, with references supporting the definition. In the discussion section, the authors note that the rigorous case definition is a strength of the study, however, the methods only state "signs of extreme clinical severity, such as signs of shock or organ failure." There are multiple definitions of "near-miss" in
the literature, such as:


Minor essential revisions:
1. Results, 1st paragraph: The second sentence is comprised of two incomplete sentence fragments.
2. Results, 1st paragraph under “Family planning”: The last sentence only references Figure 1, but should correctly reference all Figures 1-4, preferably after the reference to the respective groups. The use of the word “features” in the last sentence does not make sense. It would be more clear to say “The unmet need for contraception followed two general patterns: (i) in the near-miss group with induced abortion (Fig. 1) and the near-miss group with perinatal death or natural abortion (Fig. 2) there was a high increase at six months followed by a decrease at 12 months; (ii) in the near-miss group with live birth (Fig. 3) and in the uncomplicated delivery group (Fig. 4) the unmet needs for family planning increased from three to 12 months.”
3. The data in Table 3 should be more clearly labeled as odds ratios and 95% confidence intervals. Statistically significant comparisons should be marked somehow (e.g., bolded, asterisks).
4. The analysis groups for each of Figures 1 through 4 should be clearly labeled on the figure (e.g., “near-miss” women with induced abortion).

Discretionary revisions:
This manuscript would benefit from editing to make the language more precise. For example, the last sentence in the 2nd paragraph of the Results states that the frequency of 3rd degree FGM seemed to be higher in groups with higher mean age. It would be more accurate to say that it was higher, not seemed higher.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

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