Author's response to reviews

Title: Analysis of PMTCT service cascade in Ethiopia: 2006-2010

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Version: 2 Date: 17 February 2011

Author's response to reviews: see over
Dear Reviewer and editors,

We thank you all for the valuable comments and facilitation of the review of this paper. We have addressed all the comments in track changes and submitted the revised version. We have also separated the figures and uploaded in separate files.

Thanks,

The authors

We have addressed the comments provided as follows:

Reviewer's report: Many thanks for giving me the chance to review your article.
Overall, this is an interesting and important paper providing needed operational research findings of Ethiopia’s experience in implementing PMTCT services nationally. The paper uses program data to providing a deep insight into the PMTCT program in Ethiopia. I have suggested a few revisions/clarifications towards strengthening the reporting and interpretation of the findings. Thanks, we also have the same view

Major essential revisions
1. The second part of the objective – to predict the whereabouts of key PMTCT indicators at critical future points – is not address in the paper I think. The only “Future” point discussed is in page 7, where it is stated “Based on the trend-line equation, 100% coverage in counseling can be achieved in 2011 (Fig 4)”. We have to trust the authors as the percentage for 2011 is not marked in Fig 4. We have inserted predictions for 2015 for most indicators with trend-line equation in the revised version. For Fig 4 we indicated it in the graph.

2. The 2010 universal access report has been released. The figures provided in the second paragraph of the introduction need to be updated. This information is updated. The reference is also updated.

3. Fourth paragraph of introduction page 2 does not have sense to me. Deleted

4. The discussion seems too short to me: As we know the completeness and accuracy of secondary collected data can be challenging (see: Mate, Bennett and al, Challenges for Routine Health System Data Management in a Large Public Programme to Prevent Mother-to-Child HIV Transmission in South Africa, Plos Med, 2009). Need a little more discussion on the quality of the data the report relies on? The paper discuss the use of the opt-out strategy without mentioning what it refers to or when the strategy was implemented in (2006, during the study period, before?). We have expanded the discussion section and added data quality issues in the last paragraph.
Minor essential revisions
1. Why having two times “cascade” in the title? We have removed the first ‘cascade’
2. Page 3: This study was conducted in January 2011. I would rather say the analysis were performed in January 2011 (the study period being 2006-2010) ---or do not mention it at all. Corrected as ‘this analysis was performed.’
3. Results, Potential PMTCT service coverage, page 6: holds key information, but would be more useful if percentages are added in the first paragraph. Percentages included
4. The writing needs improvement both for clarity and to correct typing errors. We tried to make necessary corrections.

Non-exhaustive list is offered below:
• Second line, fifth paragraph page 2: In 2010[space] five ...
• Page 3, Methods, study area and period, second line of paragraph: double “in”
• Page 3: The HIV epidemic in the country is generalized but ....
• Results, antenatal coverage, page 6: replace haven’t by have not. Same paragraph, line 7: “equation [double space] displayed”
• HIV counseling at PMTCT sites: replace haven’t been first paragraph page 7 by have not been
• Numerous didn’t to be replaced by did not
• Please be consistent and chose between HIV+ or HIV-positive
• Words starting with capitals with no reason:
  o Table 1, page 4, description of indicator 3: Health facilities, Fiscal year
  o page 7: top of page (HIV Counseling at PMTCT sites), last paragraph (HIV Prevalence)
  o page 10, discussion, second paragraph: at Non-PMTCT sites

These and other similar editorial issues are addressed. If any remaining edits are there let’s know so that we can address them.