Author's response to reviews

Title: Mother's compliance following recommendations to breastfeed or withhold breast milk during rotavirus vaccination in North India: a randomized clinical trial

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Version: 3
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Author's response to reviews: see over
Referee 1
Reviewer's report

Title: Compliance and mothers' perception of withholding breastfeeding during rotavirus vaccination in North India: a randomized clinical trial
Version: 2 Date: 25 October 2013
Reviewer: Margie Danchin
Reviewer's report:

Major revisions:

The authors should expand on the limitations area in the discussion - this study assesses compliance with a recommendation to withhold BF but does not assess what mothers think about the practice, why it is done and what their understanding of this practice is. This limits the generalisability of the study. Most mothers would adhere because they are enrolled in a clinical trial and will do what a health care provider tells them to do.

Thank you. We agree with the reviewer that the generalisability of the study is limited since the participants were from one area of Delhi and does not represent India. Nevertheless, good quality data generated from smaller studies like this is important before considering larger trials in the population. We have added this point in the discussion section.

In this study, mothers understanding of the recommendations were not assessed. The main objective was to evaluate whether withholding breastfeeding would improve the immune response to live oral vaccines. Therefore, the investigators felt that it is important to assess whether the recommendation (withholding or encouraging breastfeeding) would be acceptable and feasible to mothers in this setting. If the primary objective is proven and the recommendations accepted to mothers it could potentially improve impact of the vaccine. We have now revised the title of the manuscript highlighting compliance rather than perception of the recommendation. We hope this modification is acceptable to the reviewer.

We acknowledge that the behavior of the participant may have been affected positively as a result of taking part in the study. Nevertheless, the unequivocal results suggest that the recommendations were found acceptable by the mothers.

This is a very simple study, reflected by the high adherence rates. Mothers need to be asked about the practice outside of a trial setting and in other settings, such as poorer and more rural settings.

We agree but the study was not designed to ascertain this information. However, it is important to report such findings as this approach of potentially improving the immunogenicity of rotavirus or other oral vaccines may be considered in the future.
The main aim of the study was to describe mothers’ perceptions but this is only crudely described in one Table.

The main aim of the study was to assess the impact of withholding breastfeeding compared to encouraging breastfeeding on the immune response of Rotarix® in infants. This manuscript describes the study methodology and mothers ability to adhere to the breastfeeding recommendation as well as their perception of the recommendation. This is mentioned in the manuscript under the background section in the last paragraph. See also our comments above.

More comments:
The paper is well written and describes the clinical trial clearly. However, the paper lacks generalisability and depth due to the limited nature of the questions and the fact that all mothers were enrolled in a trial and would feel compelled to comply with study protocol. This limits the usefulness of this data and is a major limitation.

We agree that the paper lacks generalizability and depth with regards to assessment of compliance and perception of the breastfeeding recommendations but that was not the primary objective of the study. The investigators wanted to find out whether mothers would accept and adhere to recommendations given by a trained study team nutritionist in a clinical study setting. This paper is a descriptive narrative of how compliance and perception was assessed. These methods could be used to improve and built upon by other researchers conducting similar studies. In our opinion, this paper is important as it gives an insight to researchers that recommendations given by study team members that are perceived by the mothers to be more qualified and educated are readily acceptable. Additionally, the mothers also perceive that vaccines to be beneficial to the health of the infants and therefore, more compliant to the recommendation. This may be relevant for other studies assessing different time limits for withholding breastfeeding and also relevant for other vaccines.

The study should be conducted more widely, outside a trial, across different SES groups and in different settings to have more meaning and to allow policy makers to interpret feasibility and acceptability of this practice.

Conducting such studies outside a trial may not be possible in terms of cost, time and other practical limitations but we do agree that similar studies can be conducted in different settings.

Minor revisions: none

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

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

Referee 2
Reviewer's report
Title: Compliance and mothers’ perception of withholding breastfeeding during rotavirus vaccination in North India: a randomized clinical trial
Version: Date: 4 April 2014
Reviewer: Audrey Prost
Reviewer's report:

We sincerely apologize to the authors for the delay in finding suitable reviewers for their article. The question posed by the authors is well defined and the study provides new, robust evidence on the acceptability of withholding breastmilk 30 minutes before and after rotavirus administration, which is an important finding if this practice is confirmed to enhance rotavirus efficacy.

Thank you

The methods are appropriate, but there is a lack of reporting of any sample size calculation. Though this does not affect the credibility of the findings are quite unequivocal, it would be good to know how the authors had selected the sample size of n=200 in each group and what the assumed differences between groups were.

We have now incorporated the sample size calculations

The data are well controlled and the manuscript adheres to the relevant standards for reporting and data deposition, though the trial profile figure could be improved.

We have made some minor changes to the trial profile and hope that it is clearer now.

The discussion is well balanced, but the conclusion reads much like an extension of the discussion, raising new issues to explore in further research, rather than a bona fide summative conclusion.

Thanks for pointing this out, we have revised the conclusion.

It would be useful to share the manuscript with a native English speaker to correct minor syntax errors. Some of them are identified below, in discretionary revisions.

Thank you. We have got the manuscript revised by a native English speaker.

Minor essential revisions:
1. Title:

Please consider modifying the title to more accurately reflect the study and its results. We suggest:
Mothers’ compliance following health worker recommendations to breastfeed or withhold breastmilk during rotavirus vaccination in North India: a randomized clinical trial

Thank you for the suggestion.

We have changed the title to “Mothers compliance following recommendations to breastfeed or withhold breast milk during rotavirus vaccination in North India: a randomized clinical trial”.

We would not like to add the word “Health Worker” in the title; this has been used in the manuscript to describe persons working within the government for vaccine delivery programs. In our study the recommendations were given by trained study team nutritionist.

2. Methods

Please report any sample size calculations conducted prior to this study, or, if the sample size was based on that of the original trial, please specify this.

The sample size calculation of the original study has been added in the manuscript.

3. Enrolment and intervention delivery

3.1 Please specify who gave the recommendations to mothers and whether these were the same cadre of staff in both groups.

The recommendations were given by a trained study team nutritionist and skilled in delivering the messages. The same category of staff delivered the recommendations in both groups.

3.2 Please give the exact content of each of the two recommendations, including the rationale given to mothers for withholding breastfeeding or breastfeeding immediately after vaccine administration. This is important for readers to understand which factors secured compliance. The discussion argues that mothers will follow any recommendations as long as they think they are doing the right thing for their infant. How was this explained in the intervention process?

This was a randomized clinical trial where mother-infant pairs were either allocated to either withhold or encouraged breastfeeding group. All information was provided in the local dialect. The verbatim information in the informed consent form regarding allocation to either group was “You are being asked permission for your baby to be screened for this study. This is to check if your baby is healthy enough to receive the rotavirus vaccine and the childhood vaccines. If your baby is assessed to be well enough to receive the vaccine, your baby can take part in this study. In case you agree to allow your baby to participate, your baby will be randomly (like tossing a coin) selected to either receive breastfeed or not be breastfed 30 minutes before and after receiving the Rotarix®”.

The rationale for asking mothers to withholding or encouraged breastfeeding was “Your baby’s participation in this study may help in generating information about the usefulness of giving or not giving breast milk before and after the Rotarix® vaccine”.

After consent, when the subject was found to be eligible, the clinical coordinator took out a Serially Numbered Opaque Sealed Envelope (SNOSE) that had the allocation written in a piece of paper inside it. The group allocation was either “Withhold” or “Encourage”. The recommendation in this context was that the mothers were informed as to which group they were allocated to and advised to breastfeed or withhold breastfeeding as explained during the consent process.

When the mothers were taken to designated separate area for observation the clinical coordinator said the following:
Withhold group: “You have been selected to be in the group where breastfeeding needs to be withheld. Do not breastfeed your child for half an hour before and after receiving the rotavirus vaccine”.

Encourage group: “You have been selected to be in the group where you are encouraged to breastfeed your child in the half an hour duration before and after receiving the rotavirus vaccine”.

4. Data collection
Please describe the observation process. Where were the observer located and could they be seen by the mothers? This might have influenced compliance and needs to be reported.

There were two separate designated areas for the two groups. Each area was supervised by trained study team nutritionist that observed the mothers. This information is in the manuscript under the enrolment and intervention delivery in the methods section. We acknowledge that the mothers may have complied with the recommendations because of the presence of the study team members. This information has been included in the manuscript under the discussion section.

5. Conclusion
Please consider making the conclusion a summary of the findings and moving some of the reflections that are currently in it to the discussion section.

Discretionary revisions
Thank you for the suggestion. The same has been done.

6. Abstract
Background: Insert a full stop after the second sentence.

Have inserted a full stop.

7. Methods
Enrolment:
"Infants were enrolled if parents gave consent for participation, was aged 6-7 weeks, weight for age was not <-3 Z scores (WHO 2006) and should be
"Infants were enrolled if parents gave consent for participation, were aged 6-7 weeks, weight for age was not <-3 Z scores (WHO 2006) and"
This has been corrected.

8. Trial profile
The labelling of this profile is slightly confusing. The intervention labels should read ‘Recommendation 1: withholding breastfeeding’ and ‘Recommendation 2: breastfeeding encouraged’.
The labelling in the trial profile is in line with the two groups in the study i.e. withhold breastfeeding and encouraged breastfeeding. As mentioned earlier this was randomized clinical trial where the mother-infant pairs were allocated to these two groups and the recommendation in this context was informing the mother in which group they were allotted to.

Yours Sincerely,
Dr Audrey Prost

Level of interest: An article of importance in its field
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 interest.