Author's response to reviews

Title: The effects of immunotherapy with intravenous immunoglobulins versus no intervention, placebo, or usual care in patients with recurrent miscarriages. A protocol for a systematic review with meta-analyses, trial sequential analyses, and individual patient data meta-analyses of randomised clinical trials,

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Author's response to reviews: see over
The effects of immunotherapy with intravenous immunoglobulins versus no intervention, placebo, or usual care in patients with recurrent miscarriages.

A systematic review with meta-analyses, trial sequential analyses, and individual patient data meta-analyses of randomised clinical trials.

Dear Editor,

Thank you for the positive comments on our protocol.

We are pleased that you find the protocol suitable for publication in Systematic Reviews.

We have made a point-by-point response to the suggestions from the handling editor (see below), and have made the relevant corrections and improvements. We take pleasure in enclosing the revised manuscript.

On the authors behalf

Sincerely yours,

Pia Egerup
Point-by-point response:

"Thank you for submitting your protocol to Systematic Reviews. My apologies for the excessive wait time, it took us a long time to find a qualified reviewer for this content. The Journal is willing to publish this protocol as is, but I do wonder whether you are planning to assess your primary outcomes numbers 2 and 3 (about adverse events in the women and the babies) as the individual components (death, life-threatening, requires hospitalization, results in persistent disability, etc.) or as a composite? Readers may wonder about this and some additional clarity on this may be justified."

PE: We are planning to assess serious adverse events (SAE) as a composite of all adverse event that results in death, is life-threatening, requires hospitalisation or prolongation of existing hospitalisation, or results in persistent or significant disability or incapacity. This is now changes in the protocol, please see the outcome section.