Author’s response to reviews

Title: SONOGRAPHIC ESTIMATION OF GESTATIONAL AGE FROM 20 TO 40 WEEKS BY FETAL KIDNEY LENGTHS’ MEASUREMENTS AMONG PREGNANT WOMEN IN PORTHARCOURT, NIGERIA

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Author’s response to reviews:

OUR RESPONSE TO REVIEWERS COMMENTS ARE AS FOLLOWS:

Reviewer 2 Comment:

References should be written in accordance to Journal’s style. Each Reference is written in a different way.

Also for reference 13, I think that the family name of the first author is Ansari not Selim

Response to Reviewer 2:

1. We have gone through all the references and have made the necessary corrections so that it can conform to the journal’s style. This can be seen in page 16 line 371-375 and page 18 lines 418-420. Also, wrong family names have been corrected as seen in page 18, lines 402 and 434. Thank you very much for bringing out time to read our work thoroughly.

Reviewer 3 Comments:

1. Ultrasonography is a useful tool not only for obstetric patients but for obstetric management.

Our response to comment no.1: Ultrasonography is useful to obstetric patients as it tends to create a bond between mothers and their unborn child while it is useful in obstetric management
as major decisions are made from ultrasound results. Although I couldn’t find the statement in
the manuscript, part of the answer to it can be found in page 3, line 76-80.

2. Accurate determination of gestational age has posed great challenge to patient
management as the accuracy of traditional biometric parameters decrease with advance in
gestational age. “Is difficult to understand. What does “traditional biometric parameters”
mean? Why does the accuracy of traditional biometric parameters drop with advance in
gestational age? And I think it maybe better adding an abbreviation of “GA” for “
gestational age” or “GA” should not be used in “Conclusion”

Our response to comment no. 2.

What the statement mean is that as the accuracy of such predictors drops, management decisions
which depends on it will not be correct leading to poor management of obstetric patients. This
can be found in page 3, lines 81-83

Traditional biometric parameters in this context means Gestational Sac (GS), Crown rump length
(CRL), Biparietal diameter (BPD), Head circumference (HC), Abdominal Circumference (AC)
and Femur length (FL). This can be found in page 5, line 107.

The reason for the drop in accuracy with advance in gestational age can be due to increased fetal
biological variations which are caused by maternal age, parity, pregnancy weight, geographic
location and specific population characteristics. Inter observer variations and measuring
techniques also contributes to it as seen in page 5, lines 101-105.

Your suggestion on gestational age and GA was followed as gestational age was replaced by
fetal gestational age (FGA) while fetal kidney length was replaced with FKL for uniformity
throughout the manuscript as seen in page 1-13 and lines 27, 29, 36, 39, 47, 74, 77, 89, 92, 97, 100
etc.

3. “This study is aimed to create …” maybe more suitable. And, I think why create baseline
reference values of fetal kidney lengths should be point out.

Our response to comment no. 3

Your suggestion was taken and correction was made in page 2, lines 30-31 while the reason for
creating baseline reference value of fetal kidney lengths is pointed out in page 2, and lines 31-32.

4. In “methods” the measuring method should be point out. It is ultrasound.

Our response to comment no. 4:

This is corrected as suggested by adding ultrasound which is the method of measurement in page
2, line 36.
5. What does "Both kidney lengths are highly reproducible with excellent correlation and agreement within and between sonographers." mean?

Our response to comment no. 5.

We were trying to report the high reproducibility and accuracy of repeated measurements within the same rater and between two raters.

6. The second sentence in "Result" is also difficult to understand. It maybe should be revised.

Our response to comment no. 6.

We admit that the second sentence in “Result “is a bit confusing, and we have rewritten it to make it less ambiguous. This can be seen in pages 8 & 9, lines 181-188.

7. The storytelling is not well organized in "Background" and "Discussion"

Our response to comment no.7.

We have rewritten the entire background and discussion for better logical flow of points. This can be seen in pages 4-6 and pages 10-12, lines 74-85, 100-105 and 217-219, 223-268.

8. There are too many errors of logic and language in the whole manuscript.

Our response to comment no.8.

We have also addressed the grammatical and logical errors hitherto in the article as seen from pages 2-13, lines 26-275. Nevertheless, thank you for pointing them out.

9. I think the idea is good, but the writing is terrible.

Our response to comment no.9

Thanks for the commendation, we are willing to improve.