Author's response to reviews

Title: Knowledge and future preference of Chinese women in a major public hospital in Hong Kong after undergoing non-invasive prenatal testing for positive aneuploidy screening: a questionnaire survey

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Author's response to reviews: see over
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Mr. Jason Pepito
Journal Editorial Office
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Dear Mr. Jason Pepito

Thank you very much for processing our manuscript and the valuable comments from the two reviewers. These will help improve the quality of our manuscript. We have revised our manuscript according to the comments and made numbers of language corrections. We hope that our revised manuscript is now acceptable for publication in your journal.

Best Regards,

KY
Dr. KY Leung
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**In response to the comments by Dr Annette Bernloehr, our reply is as follow:**

Essential revisions:

1. Line 28: The setting is mentioned in methods section rather than in the background.
2. Line 30 and 112: the wording of “preliminarily” was deleted. To clarify the study
design, it is a pilot study “As a pilot study,” is added in line 30 with a newly
designed questionnaire with limitation. “The lack of validity checking by experts,
assessment of applicability and reliability of the questionnaire are limitations of
this pilot study.” is added on line 280-282.

3. Table 2 (line 503): the initial questionnaire used “chorionic villus sampling” when
they were asked, but CVS was just a typo in previous version. We would present
the questions exactly as they were asked in the study.

4. Line 112-113: the sentence is rewritten as “As a pilot study, a questionnaire was
designed to assess the quality of counselling that we provided.”

**In response to the comments by Dr. Gwendolin Manegold-Brauer, our reply is as follow:**

Minor essential revisions:

1. The language and minor errors are corrected as listed:
   
i. Line 25-26: whether their knowledge and preferences differ depending on
   womens’ characteristics and sources of information.

   
   ii. Line 30: As a pilot study, ten knowledge questions were designed based on
   the rapid response statement …

   
   iii. Line 41-42: …the possibility of an uninformative test result, but were not
   aware of the complicated aspects of NIPT.
iv. Line 43: …education or those who underwent NIPT before 15 weeks…

v. Line 52-53: The Chinese women who underwent NIPT recognised the limitations, but did not understand the complicated aspects.


vii. Line 82: …preferences differ depending on their characteristics and sources of information.

viii. Line 118: “gestation” is corrected as “gestational week”

ix. Line 144: All babies screened to be low risk by NIPT were confirmed normal after birth on physical examination.

x. Line 179-180: There were no significant differences in the proportions of correct answers to questions 1 to 5 according to their characteristics…

xi. Line 188: …characteristics or different source of information (as above).

xii. Line 197: … NIPT in special groups …

xiii. Line 210: Although Nullipara and employed women are associated with the use of NIPT…

xiv. Line 212: …knew more about NIPT than Multipara and unemployed.

xv. Line 215: the sentence is rewritten as “Women were most concerned with the cost of a screening test [29] besides the risk of miscarriage [30].”
Furthermore, we also did not assess other aspects like determination of fetal sex, maternal DNA abnormalities [38] and paternity testing [39].”

…but knew little about the more complicated aspects of NIPT.

More information by healthcare professionals is required…

With increasing use of NIPT in clinical practice for wider indications, it is important to find ways to keep healthcare professionals updated so that they can provide adequate information to women before testing.”

…is an option which is worth further exploration.

…costs will likely go down in the future.

Table 1 is deleted and combined into the new Table 2. Heading of Table 2 is revised.