Reviewer’s report

**Title:** The association between temporal changes in the use of obstetrical intervention and small-for-gestational age live births

**Version:** 2  **Date:** 8 July 2015

**Reviewer:** Silvia Salvi

**Reviewer’s report:**

Report
This is a large and interesting study mainly devoted to clarifying the factors affecting the temporal declines in SGA rates in USA examining the influence of both the changes in the obstetrical interventions and known maternal risk factors such as maternal smoking.

The question is well posed by the authors and results correctly described. The discussion is well balanced and adequately supported by the data and all the limitations of the work are clearly stated.

**Major Compulsory Revisions**
- The rates of maternal smoking declined steadily throughout all the analyzed period. You analyzed other factors such as maternal age and nulliparity. What about the incidence of ART (Assisted Reproductive Technology)?

It is possible to assume that the incidence of this factor during the analyzed period has different trend from the maternal smoking and can affect the SGA rate in particular from 2002 to 2010.

1) A different pattern of SGA and obstetric intervention rates was observed between 2002-04 and 2008-10: while rates of obstetrical interventions increased slightly, rates of SGA increased slightly. In this period the incidence of preterm births decreased and increased at 39 weeks, corresponding to the small decline in preterm and early term birth. What do you think is the main reason for this change in the obstetric interventions (Trial, National Guidelines)? Please, discuss on it.

**Minor Essential Revisions**
No

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.
Declaration of competing interests:

I declare that I have no competing interests