Author’s response to reviews

Title: Emotional and cognitive experiences during the time of diagnosis and decision-making following a prenatal diagnosis: A qualitative study of males presented with congenital heart defect in the fetus carried by their pregnant partner

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Author’s response to reviews:
Dear Editor and Reviewers,

Thank you for giving us the opportunity to revise the manuscript entitled “Emotional and cognitive experiences during the time of diagnosis and decision-making following a prenatal diagnosis: A qualitative study of males presented with congenital heart defect in the fetus carried by their pregnant partner”, submitted to BMC Pregnancy & Childbirth. We found the comments very valuable in helping us to improve the manuscript. Please find our responses to these comments below.

Editor
Comment #1
Please complete and attach the COREQ checklist for the reporting of qualitative research as an additional file: http://cdn.elsevier.com/promis_misc/ISSM_COREQ_Checklist.pdf

Response
We have completed and attached the checklist.
Comment #2
In the ethics approval and consent to participate section of the declarations, please confirm that the consent obtained from the participants was informed.

Response
We confirm that informed consent was obtained from all participants. We have added information about this.

Reviewer 1
Comment #1
My major concern is related with the data analyses method - I would like the authors provided us with additional information about the method, and how they can guarantee the validity of their results.

Response
We agree that this is an important aspect and have added information about the analytic process.

Comment #2
I would suggest introducing some additional information about the parents' initial emotional reactions to diagnosis in this section, and also about the existing literature on gender similarities and difference on emotional reactions (e.g., Fonseca et al., 2011, Patterns of parental emotional reactions after a pre- or postnatal diagnosis of a congenital anomaly). Some additional information about the challenges of receiving a diagnosis of congenital anomaly (e.g., dealing with complex medical information, need to make a decision, sharing the news with the social network, loss of a healthy baby) will also enhance the introduction section.

Response
We agree that these are interesting aspects and have expanded the introduction.
Comment #3
The sample is well described. I do not know if it would be interesting to have information concerning the pregnancy (intended pregnancy? Prior pregnancy complications?) and obstetric history (of the couple). These variables may be relevant in understanding the father's responses.

Response
We agree that it is possible that the obstetric history may have impacted their experiences. Unfortunately, we did not collect any such information and are thus unable to provide these details.

Comment #4
By seeing the interview content, I do not think that this study intend to assess "the needs of care among this population". The focus of this study is to understand the father's experiences (emotional and cognitive experience) during the diagnosis and decision-making process. I would suggest to reformulate this accordingly.

Response
We agree and find your suggestion accurate. We have revised the aim accordingly.

Comment #5
Analyses: I think that this section should be presented with more detail. What does exactly mean the expression "the last author became increasingly involved in the analytic process through discussions of the main findings". There is some proportion of the analyses that was also coded by the last author, in order to assess agreement? What were the author's methods to guarantee the validity of the results?

Response
We have added additional details about the analysis and hope that this clarifies our method.
Comment #6
I think it would be informative to have some information about the frequency with which each category was presented in the father's discourses. Moreover, these are the major themes or do the authors have identified sub-themes? As I said previously, I would like to know a bit more about the analytic process.

Response
We acknowledge that quantitative investigations are interesting with regard to decisional processes. However, the sample is limited and the aim was explored with a qualitative method. We did not aim to draw statistical or generalizable conclusions. The identified themes are major themes that correspond to the aim. The identified themes are all presented in the results.

Comment #7
I would like to see highlighted the main and innovative contributions of this study. Specifically, the authors should answer to the question: what do this study adds to existing literature?

Response
We have added text in the discussion. We hope that this illustrates what we find to be the contribution to existing literature.

Comment #8
In the limitations, please consider if the data analysis method is free of limitations

Response
We have added more about this topic in the discussion.

Reviewer 2
Comment #1
It should read: .....diagnosis of a major congenital.....
Response
We have revised the manuscript accordingly.

Comment #2
24 were eligible but only 12 participated. Although that should not be a major problem in qualitative research I think it would be appropriate to mention why this is so in the limitation section and also shortly describe in the discussion those 12 fathers which were not interviewed. Were they in any way different from those who were interviewed, was the distribution of fetal cardiac diagnoses and gestational age at diagnosis similar? Was the proportion choosing termination of pregnancy similar?

Response
We agree that this is interesting. However, we did not collect any details regarding the characteristics of those who declined participation. Thus, it is not possible for us to draw any conclusions regarding their backgrounds. It is possible that they represented subgroups not found in the final sample. We acknowledge this potential limitation and have added text about this in the discussion.