Reviewer’s report

Title: Definitions, measurements and prevalence of Fear of Childbirth: A systematic review

Version: 1 Date: 28 Sep 2017

Reviewer: Wendy Hall

Reviewer's report:

You have made much progress in responding to the reviewers' comments about strengthening your publication. I commend you for that. I have a few more areas that I think need to be addressed. As I reread your paper it became clear to me that you are interested in a measure that can be used in clinical settings to permit rapid assessment of FOC. I would recommend adding that to your objectives. Right now there is a tension created in your paper between comments you make about valid and reliable measures for research and what you would regard as a short and straightforward way to assess FOC clinically. The two aims are not entirely in agreement. For example, you argue effectively that measures need to incorporate elements like fear of abandonment, fear of medical interventions, and fear of loss of autonomy and obstetrical violence. Your strong inclination toward a single question with a three- or undichotomized four-point scale is not congruent with your other recommendations. Thus you need to be clear that your major interest seems to be clinical assessment as opposed to research. It also raised questions for me when you indicate your interest is severe FOC how that would adequately captured with a much simpler measure. Your manuscript has improved a lot in terms of grammar but there are still a few places that need attention. For example, on p. 8 lines 1 to 12 and lines 34-39 the language needs to be refined. Also I could suggest added to line 7 from fear being self-defined to make it clearer. On p. 9 you have the comment about randomized controlled trials following your specification of quasi-experimental studies. They do not have control groups. You need to move the comment forward. Care needs to be taken not to overstate the lack of consensus on definitions and the broad labeling involved in FOC when you follow that with an aim to examine the prevalence of FOC. It calls your aim into question. On p. 15 I think you need to acknowledge that women ticking very negative in terms of their feelings about labour and birth may not in fact be indicating FOC. Women can have very negative feelings for a variety of reasons. Likewise asking women whether they felt they needed to attend a clinic for counseling for FOC may not in fact indicate FOC. They may be interested in counseling for other reasons. For the Delivery Fear Scale what was the cut-off level for severe fear based on? It is interesting that the postpartum rates of FOC were very similar to the antepartum rates. That would have been worth discussing in your paper given that women can experience PTSD from births that may not be related to their antenatal FOC. As I indicated at the beginning of my review your discussion section needs to be clearer about whether you are criticizing tools from the standpoint of their lack of facility for clinical assessments or you are criticizing them for their lack of rigor in general. I would separate that into two sections. The same is the case for your conclusions. In your recommendations section, it is not appropriate to indicate that newly-developed, untested scales should not be used. Should not be used for what? If you are arguing they should not be used for clinical assessments that is fine. However, any new tools need to undergo continuing testing for rigor in research and they should not be arbitrarily excluded.
Again in your recommendations you have created a tension between more extensive tools and clinical applications. Your tables and figures are well done.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
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No

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

Quality of written English
Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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