Reviewer’s report

Title: Management of bleeding from morbidly adherent placenta during elective repeat caesarean section: retrospective record-based study.

Version: 0 Date: 31 Dec 2018

Reviewer: Shinya Matsuzaki

Reviewer’s report:

The authors attempted to compare 3 uterus-preserving methods for the management of placenta accreta spectrum (PAS) disorders. This is an important topic, and this manuscript provides useful information for readers. The strength of this study is its large sample size. Here are a few suggestions to improve the quality and publication worthiness of the manuscript. Please take a look at my comments listed below.

Major comments

Although individual factors are relevant, a window of 34 0/7-35 6/7 weeks of gestation is suggested as the preferred gestational age for elective cesarean delivery in women with PAS. It is necessary to discuss why the authors planned elective cesarean delivery at 35-38 weeks of gestation.

The authors need to provide information regarding the type of uterine incision used in this study.

The primary and secondary outcomes in this study should be described.

It is recommended that the technique used in Group C be described in detail. It may be difficult for some readers to visualize this technique, and a detailed description would be necessary to gain a better understanding of the procedure.

The authors have clearly shown their results in Tables 2 and 3; thus, the results section can be shortened. Repetition of results presented in Tables 2 and 3 should be avoided as far as possible.

It is important to discuss why the authors did not perform uterine artery embolization or prophylactic internal iliac artery balloon occlusion.

The authors need to mention whether it is difficult to perform these procedures at the hospital where their study was performed. If it is so, it is necessary to provide details regarding the medical set-up/arrangements available at the hospital to help readers to understand the necessity of your procedure. For example, it is relatively easy to perform uterine artery embolization at the reviewer's hospital. Therefore, ligation of the uterine artery is avoided not to disturb performing uterine artery embolization.
The authors have stated, "The diagnosis of MAP was confirmed by histopathological study of the removed part of the placenta showing deep invasion of chorionic villi and presence of myometrial fibres." I accept that it is often difficult to diagnose PAS exclusively from the placenta. It is recommended that authors provide the representative images to clearly show these histopathological findings.

The authors should list the strengths and limitations of the study. It is recommended that a description of the bias in diagnosis of PAS be added to the manuscript. In cases of placental separation, clinicians may not always be able to conclusively diagnose whether a particular case could be classified as true placenta accreta.

Minor comments

It is recommended that the entire manuscript be edited by a native English speaker to correct grammatical errors/inconsistencies.

Page 15, line 13 to 18

The authors could delete these sentences because these are ambiguous and can cause confusion among readers.

Page 4, line 2

Authors need to revise ( Group C 2/43, to (Group C 2/43,.

Table 1

Authors need to define major and minor placenta previa.

Authors need to revise table(1), (2), (3) to table 1, 2, 3.

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.

No

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

**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.

I am able to assess the statistics

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

Needs some language corrections before being published

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