Reviewer's report

Title: Socioeconomic and migration status as predictors of emergency caesarean section: a birth cohort study

Version: 0 Date: 04 Sep 2019

Reviewer: hassan abduljabbar

Reviewer's report:

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BMC Pregnancy and Childbirth

Manuscript Number: PRCH-D-19-01002

Full Title: Economic disadvantage as a predictor of emergency caesarean delivery: a birth cohort study

Generally

The title reflects the study accurately.

It is important and interesting subject in clinical obstetrics

The study is (Not Original),


The message of the study has additional knowledge of medical literature.

Abstract:
Background Objective are clear

The aim of this study was to investigate whether and how migration background and two markers of socio-economic position affect the risk of an emergency caesarean delivery and whether they interact with each other.

The abstract reflects the research and very easy to understand.

It is a good summary it is well written

Materials and Methods

Retrospective study (2013-2016), (Bielefeld, Germany) women in the perinatal period collecting data health and socio-economic and migration background, routine perinatal data.

We performed multivariate analyses, studying associations between (migration background), (socio-economic status) & (emergency caesarean delivery frequency) adjusting for a range of clinically relevant factors.

Migration was measured through migration status

(1st generation migrant, 2nd/3rd generation woman, no migration background).

Socio-economic position was measured through educational attainment and net monthly household income.

Results:

Of the 881 participants, 21% (n=185) had an emergency caesarean delivery.

Analyses showed no association between having an emergency caesarean delivery and migration-related factors or education.

Women in the lowest (&800€/month) and second lowest (between 800 and 1750€/month) income categories were more likely (respectively: OR: 1.96 CI: 1.01-3.81 and OR: 2.36; CI: 1.27-4.40) to have an emergency caesarean delivery than women in the higher income groups.

The main characteristics of the 881 participants included in the analyses are presented in Table 1.

Table 1 Participants' main characteristics, Bielefeld, Germany, 2013-16

Table 2 Emergency caesarean delivery by migration and socio-economic status. Bielefeld, Germany, 2013-16
Table 3 Chance of an emergency caesarean delivery, by migration status and education, adjusted for clinically relevant variables, Bielefeld, Germany, 2013-16

Table 4 Chance of an emergency caesarean delivery, by migration status, education and income, adjusted for clinically relevant variables, Bielefeld, Germany, 2013-16

Discussion

The discussion interprets the study and its results

Many articles in the subject were discussed

Accepted

Some text taken from the web

Finally, one should not exclude the possibility of women from lower economic background

Long-Term Monitoring of Jupiter's Synchrotron Radiation ....

A strength of this study is that we collected detailed information on migration status: in many

Geographical mobility of UK trainee doctors, from family ....


The Islamic State's trap for Europe - The Washington Post.

Conclusion

Long expected and what are the benefit of the study

We found no differences in emergency caesarean delivery rates across groups of women with and without migration background and in relation to educational attainment.
However, introducing a second measure of socio-economic status, besides education, allowed us to show that household income was associated with the outcome, with low levels of income being linked to an increased risk of requiring an emergency caesarean delivery.

It suggests that in our sample, income -and income only- is a discriminating factor and creates some disadvantage in terms of health, contributing to explaining heterogeneity in obstetric care.

Awareness of these findings and measures to correct these inequalities would contribute to improving the quality of obstetric care, especially for those who are at an economic disadvantage.

☐ Ethics approval and consent to participate

☐ The study was approved by the ethical committee of the Medical Faculty of Muenster University and the Data Protection Board of Bielefeld University.

☐ Written consent was obtained from all study

☐ Consent for publication

☐ Not applicable. Individual data have been anonymised.

☐ Availability of data and materiel Data are available upon request due to ethical restrictions.

☐ Competing interests

☐ The authors declare no conflict of interest.

☐ Funding The study was funded by a grant from Germany's Bundesministerium fuer Bildung und Forschung (BMBF grant 01ER1202). e article. All have read and approved the final version.

The manuscript is written in simple (English language with few spelling and grammar mistakes.)

Statistical analysis is appropriate (using the right methods ))

Methods clear clinical; retrospective data analysis

The table illustrates the result very clearly

The length of the manuscript is appropriate.

Plagiarism .. There are few sentences in the manuscript taken from the web

No conflicts of interests
Ethically approved, registered

References; many references are old before 2009 not verified or not checked)

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?
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:

Acceptable

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