Reviewer's report

Title: "I beg you…breastfeed the baby, things changed": Infant feeding experiences among Ugandan mothers living with HIV in the context of evolving guidelines to prevent perinatal transmission

Version: 0 Date: 30 Jun 2017

Reviewer: Ingunn Marie S Engebretsen

Reviewer's report:

Breastfeeding and HIV has been a moving target ever since Philippe van den Perre described in 1992. The authors are right in problematizing breastfeeding again after the 4th shift in guidelines after the millennium-shift.

Typography, lots of 'full stops' before brackets. Funny looking at two set of line numbering, I use the numbers closest to the text.

Introduction: Be more precise and tell exactly which relevant late PMTCT studies that have pushed transmission down and to which degree, using B+ - to which level - and how this is in operational studies in sub-Saharan Africa being LICs. E.g Kesho - Bora and later studies.

For the second paragraph it's important to stress not only the benefit of bf, but also present the risk of non-bf among WLWH. The operational study being most relevant here is Kagaayi from Rakai (http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0003877 ). Not bf can be short-term, directly deadly. More children dying from other causes than HIV - and for infected children bf extremely important.

I think it is "old" now to stress the perspectives from HICs, an I don't think there is any need in the PMTCT community to bring back the 2001 perspectives. Rather go in depth on the 2010 - 2016 guidelines - rather problematize that the 'end-point' guideline (how long should they bf) is still a bit unclear. What's the change from 2010 - 16 and within which paradigm is this study done.

The references to the statements in line 82 should be relevant for the later period (2010 - >) and some examples could have been informative.
Methods:

It is a bit unclear if the study included women who were temporarily giving birth at both sides of the B+-implementation. It also looks funny saying 'at that time WHO's infant feeding guidelines formed the basis for Uganda's national guidelines for PMTCT and infant feeding - Uganda has all the time been considering and followed a lot of the WHO guidelines. It would have been clearer to say what they then had implemented an how that overlapped with the data collection.

How was the women stratified into HSCL-categories? The whole paragraph on selection of participants should go deeper and explain the sampling.

Did the 2 coders do separate coding for 20 interviews? Why that? It would have been more sound with double-assessment rather than a split of data. Funny use of kappa statistics.

If the study women are from Mbarara, are they then 'rural'?

Results: Generally the section is too long and the authors should make an effort shaping it better.

The data should be rich enough not to bring in other references in the result text. Please stick to the own data.

The data themes seems valid, but the data and narratives used to illustrate that doesn't seem to fit entirely under each sub-heading, 1188, 194 on 'risk my son.' The authors should go together and make sure the points come out more clearly - that could be done by 'shorter' texts. Instead from 1177-183 giving lots of information - I would be much more interested in what the data says. If really such a large analysis team has worked on this - what is the inductive results?

The discussion should be much more closely to the result-findings. A paragraph on strengths and limitations of the study is needed. Particularly, the challenge of changing recommendations is maybe not a 'fair' period on the health workers?

Is given the limitations of the study this study strong enough for giving recommendations? Maybe, instead of saying what others should do (here an imprecise size 'infant counselling') - talk more about this from the 'how' perspective? Research needed? How could such studies inform future implementation and training of health workers?
Did 7 people analyse the data?

I think the paper has been submitted a bit prematurely. It seems either not finished or not newly updated.

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

No

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

Unable to assess

**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?**
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Not relevant to this manuscript

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