Author’s response to reviews

Title: Assisted reproductive techniques with congenital hypogonadotropic hypogonadism patients: A systematic review and meta-analysis

Authors:

Yinjie Gao (1097156268@qq.com)
Bingqing Yu (113ybq@sina.com)
Jiangfeng Mao (maojiangfeng88@sina.com)
Xi Wang (wangxi8489@hotmail.com)
Min Nie (nm_pumch@aliyun.com)
Xueyan Wu (wsheyan@vip.sina.com)

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Author’s response to reviews:

Dear Prof. Michael O'Reilly and Prof. Helena Gleeson:

Thank you for your letter and for the reviewer’s comments concerning our manuscript entitled “Assisted reproductive techniques improved fertility of congenital hypogonadotropic hypogonadism patients: A systematic review and meta-analysis” (ID: BEND-D-18-00229R2). Those reminders are valuable and very helpful for revising and correcting our paper. We have studied carefully and have made correction which we hope meet with approval. The main corrections in the paper and responds are as follows:

1. “Can you ensure that all abbreviations are explained both in the abstract and the main article for example ET is explained in the abstract but not the main text?”

Response: We have rechecked this manuscript according to the reviewer’s suggestion and the following adjustments have been made: ① “ET” in line 114, page 6 was changed to “embryo transfer (ET)”; ② “BMI” in line 126, page 7 was changed to “body mass index(BMI)”; ③ “IVF/ICSI” in line 176, page 10 was changed to “in vitro fertilization(IVF)/ intracytoplasmic sperm injection(ICSI)”; ④ “PR” in line 182, page 10 changed to “pregnancy rate”; ⑤ “FSH, LH and T” in line 188, page 10 changed to “follicle stimulating hormone (FSH), leuteinizing hormone (LH) and testosterone (T)” All the changes were highlighted with green track.
2. “More description about the CHH group in respect to gender, age and BMI and also control group respect to number, gender, underlying cause of infertility etc in the main text.”

Response: We have supplemented a paragraph to describe the details of CHH groups and control groups titled “characteristics in the included studies” according to the reviewer’s suggestion. More descriptions were showed in this part on page 9 highlighted with green track.

3. “Please reorganize having a separate column for gender, number of patients, age, BMI, the various outcomes and the control group. It may be useful to divide the studies into male studies and female studies”.

Response: We divided the included studies into studies on male or female CHH patients and reorganized table 1. The gender, number of patients, age, BMI, and the various outcomes were displayed in different columns. More information was showed in table 1, page 18-21.

Once again, thank you very much for your comments and suggestions.

Best wishes,

Yinjie, Gao