Author’s response to reviews

Title: Women’s contraceptive discontinuation and switching behavior in urban Senegal, 2010-2015

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Version: 3 Date: 29 Jan 2018

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January 29, 2018

Dear Editor,

Please accept the revised manuscript, “Women’s contraceptive discontinuation and switching behavior in urban Senegal, 2010-2015” submitted for publication in BMC Women’s Health (BMWH-D-17-00385R1). We have addressed the final comments and are submitting a clean version of the manuscript along with a detailed response to editor and reviewer comments (see below).

We look forward to your positive response.

Sincerely,

Janine Barden-O’Fallon, Ilene Speizer, Lisa Calhoun, and Meghan Corroon
Response to editor comments

1. Please remove the funding information from the Acknowledgements and include it in the Funding section instead. If you have no further acknowledgements, please put “Not Applicable” in the Acknowledgements section.

The funding information was moved, and acknowledgements now read “Not applicable”.

2. In the Funding section, please also describe the role of the funding body in the design of the study and collection, analysis, and interpretation of data and in writing the manuscript.

The funding section was replaced with: “Financial support for this work is provided by the Bill & Melinda Gates Foundation. The views expressed in this article do not necessarily reflect the views of the Bill & Melinda Gates Foundation. The authors are grateful to the Carolina Population Center and its NIH Center grant (P2C HD050924) for general support.”

3. We would also like to ask for you to provide more justification for the contributions of JBOF as currently they do not automatically qualify for authorship. Contribution to the manuscript alone, does not usually justify authorship.

We apologize that this was not clear. JBOF made substantial contributions to the conception and study design. She led the data analysis and interpretation of findings and was lead author for the manuscript. She drafted the response to reviewers and gave final approval of the version to be published. This section was modified in the manuscript.

4. At this stage, please upload your manuscript as a single, final, clean version that does not contain any tracked changes, comments, highlights, strikethroughs or text in different colours. All relevant tables/figures/additional files should also be clean versions. Figures (and additional files) should remain uploaded as separate files.

This has been done.
Response to Reviewer #2 comment

1. But still my concern is not addressed on emergency contraceptive; due you think it is recommended to use Emergency contraceptive as routine? As to me emergency contraceptive should not be included in discontinuation group, because it is taken when individuals forgets or delay to take their routine contraceptive. Other concern the "other" modern methods should be describe either in bracket or as foot note under the table

As stated in the WHO Emergency Contraception fact sheet, updated June 2017, some women “use Emergency Contraceptive pills repeatedly or as their main method of contraception” (http://www.who.int/mediacentre/factsheets/fs244/en/). In such cases, counseling on contraceptive options would be appropriate and is recommended. Emergency contraceptive pill use was low in our sample- a total of 33 use events, accounting for 0.73% of total method use. We do not know whether emergency pills reported in a calendar month were used only once or more often. As stated in our previous response, “Emergency contraception is considered the same as other coitus-dependent methods, such as the condom; use of the method in the month in which it occurs is marked as “use” and non-use of the method in the subsequent month is considered a discontinuation.”

The text below Tables 2 and 4 now reads:

“*Includes Standard Days Method, emergency pill, and “other modern” as reported by women”