Author’s response to reviews

Title: Anatomical landmarks of the intra-pelvic side-wall as sources of pain in women with and without pregnancy-related chronic pelvic pain after childbirth: a descriptive study

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Editor-in-Chief
BMC Women’s Health

Dear Editor-in-Chief Professor Chibuike Chigbu,

Re. MS BMWH-D-17-00126.

Please find uploaded a revised edition of our manuscript with the new title "Anatomical landmarks of the intra-pelvic side-wall as sources of pain in women with and without pregnancy-related chronic pelvic pain after childbirth: a descriptive study". We really appreciate the
valuable work from the reviewers and please find below our response to their respective comments.

Reviewer 1

We agree that the methodology of the study is complex. Despite the somewhat complicated methodology we have now, to the best of our means, handled the challenge of describing this clearly. Reassuringly, we conclude that Reviewer 1 describes the method properly in his comments.

At the end of the Introduction section (page 6, paragraph 2, and line 2) the aim is made more specific to the presented results.

To clarify that this study is solely about chronic pelvic pain after childbirth and not pain during pregnancy we have changed the title to “Anatomical landmarks of the intra-pelvic side-wall as sources of pain in women with and without pregnancy-related chronic pelvic pain after childbirth: a descriptive study. In addition, we have added “after childbirth” to chronic pelvic pain to all adequate places in the abstract and within the paper.

Abstract: background line 7, methods lines 1 and 2, conclusions line 1.

Introduction: page 6, paragraph 2, line 3.

Methods: page 6, paragraph 1, line 2, paragraph 2, line 1

Discussion: page 11, paragraph 1, line 1, page 12, paragraph 1, line 3

Conclusions: page 14, paragraph 1, line 3

Table 1, Legend: line2

Table 2, Legend: line2

In Legend to Table 3 we changed the last half of the legend to with pregnancy-related chronic pelvic pain (CPP) after childbirth and those without low back or chronic pelvic pain (No CPP).
We have adjusted the conclusion according to the reviewer’s suggestion. The wording is as follows: “Parous women with CPP after childbirth have a heightened pain intensity over 13 anatomical landmarks during pelvic examination compared with parous women without CPP.”

Abstract: conclusions, line 1 and 2

Discussion: page 11, paragraph 1, lines 1 and 2.

We also added one reference regarding central sensitization in Discussion and separated central sensitization and referred pain. Discussion page 13 paragraph 2, line 7.

In the present study we compared parous women with CPP after childbirth with parous women without CPP. Thus, we cannot generalize the results to all women but those who have given birth. This is clarified by adding “parous” to the Conclusions in the Discussion section, page 14, line 2 and 4.

We use the term intra-pelvic side-wall to denote anatomical structures within the pelvis in contrast to structures that may be painful on the external side of the pelvis. Therefore, we still prefer our description on the location of the anatomical landmarks. In addition, In the Method’s section we describe the examination procedure as “The pain intensity provocation was performed by light manual pressure on each of 13 predetermined anatomical landmarks of the intra-pelvic side-wall by vaginal palpation…”. We avoid the expression “Intra-pelvic examination”.

Reviewer 2

Well designed and written study.

No further comments from us.

Yours sincerely,

Per Kristiansson

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