Reviewer’s report

Title: Early detection of maternal deaths in Senegal through household-based death notification integrating verbal and social autopsy: a community-level case study

Version: 2
Date: 24 August 2014

Reviewer: Caroline Homer

Reviewers report:

Thank you for the opportunity to review this interesting and important paper. The paper details a case study undertaken alongside the Millennium Villages Project in Senegal. The paper adds to the literature in this area and I recommend publication after consideration of minor changes.

The Background of the Abstract needs to state which country this is undertaken. At this stage, nowhere in the Abstract is the country provided.

The Abstract states that there was an alarming increase in deaths. Notwithstanding that any death is too many, the numbers were small (one to three) which means the authors must be careful as it could just be part of usual variation of data. I would suggest not using words such as ‘alarming’.

Para 2 of the Background is hard to follow. The initial sentence is very long and assumes that the reader knows what the Pathway to Survival is. This is then described in the second sentence. This section needs re-ordering for clarity. How does the Pathway to Survival and the issues in the paper relate to the Three Delays Model which is also widely used? Can the authors link the two?

There is a lot of description on the MVP but no references? I am sure papers on this project have been published and I would expect them to be referenced on pages 8 and 9.

The clinics are staffed by skilled birth attendants. It would be useful to state which cadre of attendant as midwives are mentioned later on.

There are some issues with grammar and syntax throughout. A careful read by a native English speaker would be important.

In the Data Collection section – were care providers in the hospital also interviewed? The section on page 14 suggests it was only the family members. Given all these women died in hospital, I would think care providers would have been important too?

I suggest putting the 5 cases into a Box or Figure as this will be easier to find and read.

I am a little unclear with the place of deaths. From the case stories, it seems as if
all the women died at the hospital. Para 3 on page 18 says that four out of 5 died in hospital. Is there a difference between hospital and referral hospital? If so, this needs to be clearer.

The fact that all deaths occurred in hospital and that 3 were related to CS is very concerning. It is not surprising that women often do not choose to go to health facilities to give birth – in this community it was where women died. Are the authors confident that no other deaths occurred in this time period in the community? Could it be that the hospital deaths were the only ones counted or that CHWs were aware of?

The Pathway to Survival is not really addressed in the cases or the findings although this is again mentioned in the Discussion. If this framework is being applied a better exploration of the cases in relation to the Pathway is needed. This could happen if the cases were presented in a table with a column showing how the Pathway was addressed or not.

The new Lancet Series on Midwifery has a number of papers which would be useful for these authors to consider in terms of audit and feedback, the need for a skilled midwife and skilled midwifery services for all communities and experience at country-level of reducing maternal mortality. My conflict of interest is that I am a co-author in the Series but feel that they would be useful. The 3 papers of most use are below:


Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I am an author of the Lancet Series on Midwifery which I have referred to. I have no other competing interests.