Author’s response to reviews

Title: DECIDE: A cluster-randomized controlled trial to reduce unnecessary caesarean deliveries in Burkina Faso

Authors:

Charles Kaboré (kaborewendyam@yahoo.fr)
Valéry Ridde (valery.ridde@ird.fr)
Nils Chaillet (nils.chaillet@fmed.ulaval.ca)
Fadima Bocoum (fadimabocoum@yahoo.fr)
Ana Betrán (betrana@who.int)
Alexandre Dumont (alexandre.dumont@ird.fr)

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Author’s response to reviews:
April 9, 2019

Re: BMED-D-19-00161

Dear editor,

Please find attached the revised version of our manuscript, titled ‘DECIDE: A cluster-randomized controlled trial to reduce unnecessary caesarean deliveries in Burkina Faso’, which we are re-submitting for publication in BMC MEDICINE.

We would like to thank you for giving us the opportunity to revise our manuscript. We also thank the Editors and the Reviewers for their helpful recommendations and insightful comments, which have helped us substantially improve our manuscript and clarify our methods and results.

We attach a revised version of the manuscript (with the changes highlighted in yellow). We believe we have adequately addressed all of the comments and concerns expressed by the Editors and the Reviewers.

Below we provide detailed point-to-point responses to each of the comments of the Editors and Reviewers (page 2). In the responses, we cite relevant fragments of the revised manuscript, which have been added or modified to address specific comments.
We hope that these changes make our revised manuscript suitable for publication in BMC MEDICINE.

However, if required, we will be ready to provide additional evidence and arguments and/or to make further changes to the manuscript.

We are looking forward to hearing from you.

With my best regards,

Charles KABORE, MD, PhD

Research Institute of Health Sciences, Ouagadougou, Burkina Faso

Reviewer reports:
Reviewer #2: Thank you for addressing my suggestions regarding this important paper. If possible could you clarify one point that was not clear to me on re-reading (results):
"The intervention did not significantly affect the rate of maternal death (Adjusted OR 0.32; 95% CI 0.04 to 2.23; p=0.253) or intrapartum-related neonatal death (Adjusted OR 1.73; 95% CI 0.82 to 3.66; p=0.149)

It would be useful to have the actual numbers of maternal and intrapartum-related NND's in the text and in the abstract, and add that the non-significance of the trends found does not exclude the possibility of differences as the trial was not powered for these outcomes

Response:
We would want to thanks the reviewer #2 for this relevant comment.
As suggested by reviewer 2, we added the following sentence “The intervention did not significantly affect the rate of maternal death (0.75% to 0.19% and 0.92% to 0.40% in the intervention and control groups, respectively; adjusted OR 0.32; 95% CI 0.04 to 2.23; p=0.253) or intrapartum-related neonatal death (4.95% to 6.32% and 5.80% to 4.29% in the intervention and control groups, respectively; adjusted OR 1.73; 95% CI 0.82 to 3.66; p=0.149).” in the abstract section, Page 2 and 3, lines 48 to 52.

We also added the following sentence in the results section, “The intervention did not significantly affect the rate of maternal death (0.75% to 0.19% and 0.92% to 0.40% in the intervention and control groups, respectively; adjusted OR 0.32; 95% CI 0.04 to 2.23; p=0.253) or intrapartum-related neonatal death (4.95% to 6.32% and 5.80% to 4.29% in the intervention and control groups, respectively; adjusted OR 1.73; 95% CI 0.82 to 3.66; p=0.149). The non-significance of the trends found does not exclude the possibility of differences as the trial was not powered for these outcomes.” page 15, lines 347 to 353.

Reviewer #3:
The authors really excelled in the way they addressed the reviewers suggestions and do admit the short coming of not knowing the effect of the intervention on the overall perinatal morbidity and mortality.
Response:
We would want to thanks the reviewer #3.