Reviewer’s report

Title: Food taboo among pregnant Ethiopian women: magnitude, drivers, and association with anemia

Version: 1 Date: 25 Feb 2019

Reviewer: Sara Wuehler

Reviewer’s report:

My primary concern is that the authors state they have removed two food items from the list of PRFTs, but there is no way to confirm that the actual reported analyses reflect these changes. I need the original review paper for comparison.

The paper still needs some review by an editor, for example in the abstract:

"Adherence to PRFT was 26.2% and 14.6% among the anemic and the nonanemic individuals, restrictively." This should be "..., respectively." Or "... green leafy green..." should be "...dark green leafy..." ; L13-18: "... 40%.... TWO percentage points from ...43%"; L23 "a reversing trend" should be "an increasing trend". L33: "including endorsing and attending food taboo" should be "... including following food taboo."... L53 "Thus, a further restrictive eating due to..." should be "Thus, further restricting eating due to..." etc

P14 L24-29 state that you did not consider raw meat, but results indicate that 1/3 of participants reported avoiding raw meat. This needs to be clarified.

Also, given the P14 change, where are your new analyses? You have not highlighted any changes in the tables of data as being new, and your response gives no indication that you redid the analyses. You removed both liver and raw meat from the list of potential PRFTs so there should have been some shifts in the results.

As for liver: what is your reference for removing liver and page 17 L32 "it is not recommended during pregnancy"? This statement requires reference from Ethiopia or globally. You are totally allowed to remove it and state your reasoning, but you also need to give some justification. Perhaps your statement could be "potentially harmful" or "potentially unsafe" instead of "harmful" or "unsafe"

The WHO mentions the risk of large amounts of liver, but also recommends liver as a good source of vitamin A (see two quotes and link below) and the updated "WHO recommendations on antenatal care for a positive pregnancy experience" does not list liver at all. Certainly remove it if in Ethiopia there is a concern that women will consume large amounts of liver during pregnancy, but large amounts of liver are contraindicated for non-pregnant women and men as well as those pregnant...
"Dietary sources of provitamin A include vegetables such as carrot, pumpkin, papaya and red palm oil; animal foods rich in preformed vitamin A include dairy products (whole milk, yogurt, cheese), liver, fish oils and human milk (7, 8)."

Followed by "Toxicity generally results from excessive ingestion of vitamin A supplements but regular intake of large amounts of liver, although usually not a problem in vitamin A-deficient areas, may also result in toxicity due to its high content of vitamin A (19)."

Link: https://apps.who.int/iris/bitstream/handle/10665/44625/9789241501781_eng.pdf?sequence=1

Don't duplicate sentences in methods and results, for example, the following is only required in methods: The green leafy green vegetables group included food items like spinach, lettuce, kale, and broccoli.

You do not need to repeat methods in discussion, such as avoiding raw meat. (P14)

P15 L9, remove "quantity" you have not justified its inclusion here.

P15L14: you are comparing anemia to non-anemia among PRFT vs no PRFT, so how can you compare which items are PRFT more or less? Your analyses only compare those who avoided PRFT, including cereals, to those who did not avoid PRFT. True those items that are PRFT might have more iron than fruits (because you have no fruits listed in your PRFTs) or compared to "non-meat" in general, but you did not compare those who avoided cereals to those who did not avoid cereals.

P17 L32-34, please provide a reference for the lack of dieticians in hospitals. You have corrected the double negative, but are you sure there are no nutritionists in the hospital workforce? 8 years ago they were going to non-hospital staff for dietary advice, but that should have changed by now.

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