Author’s response to reviews

Title: Factors Associated with Dietary Supplement Use in Saudi Pregnant Women

Authors:

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Author’s response to reviews:

Reviewer reports:

Reviewer #1: Review of the manuscript "Factors associated with dietary supplement use in Saudi pregnant women".

The aim of the study was to study the prevalence of dietary supplement use during pregnancy in Saudi Arabian women and study its relationship with sociodemographic factors, attitudes, behavior and awareness.

1. It is not mentioned in the text but I would like to know if there are any national recommendations regarding dietary supplements during pregnancy in Saudi Arabia. In several countries in Europe, for instance, there are country-specific recommendations regarding iron, folate, iodine etc. If this were the same in Saudi, this would be good to include in the background.

Response

No, till date, there is no such recommendation for Saudi Arabian population.
2. Page 4, row 100 - 102; I would move this section and combine it with the section where the pilot study are described (Page 5, rows 109-121).

Response
As reviewer’s comment, the section is moved in the pilot study.

3. Page 6, row 130: chi-square is used as the statistical method of choice but it is wrong to use the word "determine relationships between use of dietary supplement use during pregnancy.." This method detects differences between two groups. The method do not analyze associations.

Response
The words “determine relationship” is replaced by “examine differences” in the updated version of manuscript.

4. Page 6, row 136-137: this sentence could be rephrased. What is normal family income in Saudi? "Graduation" should be defined as higher education (number of years? University graduation?)

In data collection and measurement section, the salaries are mentioned as low, normal, average, good and high. However, in order to differentiate the education levels, post graduate has been assigned as higher studies instead of graduate level.

5. Page 6, row139-140: "...dietary supplement use before and after pregnancy are presented in table 2". The text in table 2 states: Do you take supplements throughout pregnancy? This question asks is the respondent took dietary supplements during the entire pregnancy. I cannot find any question relating to supplement use after pregnancy.
Response

The word “after pregnancy” has been replaced by “during pregnancy” in this paragraph.

6. Page 6, row 140 - 143: the sentence is too long and difficult to follow. I would suggest that to change that 62.2% of the women reported having vitamin D deficiency. ..

Response

The sentence has been changed as per reviewer’s suggestion.

7. Page 6, row 144-146; this sentence is difficult to understand, rephrase.

Response

It is rephrased and cut short.

8. Page 6, row 145 - 148: it would help the reader is the direction of association was described in text. For instance; higher education level was associated with dietary supplement use.

Response

A reference has been included to show the effect of level of education and dietary knowledge among pregnant mothers.
9. Page 6, row 148: Delete (or rephrase) the sentence "With rest of the variables..")

Response

The sentence is deleted.

10. Page 7, row 149-150: "No significant association was observed between health consequences in babies and dietary supplement use during pregnancy as compared to non-users" should be rephrased to (for example) "No significant differences in health outcomes in the offspring were observed between users and non-users." To correspond to the results in Table 4.

Response

The sentence is rephrased as suggested.

11. Any thoughts about the difference in fatty acid supplement use in this study population and other populations in Saudi Arabia (as described in the discussion Page 8, row 191-194.

Response

In present study we discussed mainly about the use of Folic acid (FA) supplements in different populations.

12. Page 9, row 195: no need to repeat the p-values.

Response

The p values has been removed as per suggestion.
13. Why do the authors think it is important to increase the awareness and (change?) the attitudes about dietary supplement use before and during pregnancy? Are there specific recommendations regarding dietary supplement use during pregnancy that women need to know about (like folic acid)? Should be included in the discussion.

Response

As per suggestion, more discussion, supported with related references has been included in the updated version.

14. The headings for the tables could be improved (overall). Also, as a suggestion; change wording for volunteers to study participants. Be consequent in the manuscript.

Response

The headings are changed and the word “volunteers” has been replaced with “study participants”.

Reviewer #2:

This is an interesting topic and there seems to be a lot of data. However, the data presentation is not very clear. The aim of the paper is not very clear either. I would like to suggest that there will be a major re-organization of the manuscript. Several questions should be answered before starting to analyze and write the paper. What is the aim of this study? Who are the participants? Are they representing the population of interest? How were they recruited and where (what does it include to recruit "online"?)? When were they contacted and studied (in a hospital after delivery?)? If they were contacted during the pregnancy they were not able to answer accurately e.g. did they use the supplements the entire pregnancy. Which methods were used (questionnaire) and how detailed the supplement use was asked (e.g. start date, stop date or start week, stop week, frequency of use? Are you interested in which trimester they used supplements)? How was the data analyzed? Suggestions: First you could present the general info about the dietary supplement use: % of users/non-users, duration of use on average or categorized, maybe also by age group depending what your research questions are. If the aim
was to describe various characteristics of the expecting mothers and how they are associated with dietary supplement use, they could be classified (the current classification is confusing): 1. Sociodemographics 2. Physical outcomes (e.g. BMI, current health conditions) 3. Behavioral characteristics 4. Perceptions (e.g. is dietary supplement use safe). Using logistic regression you could predict supplement use (yes/no), e.g. in age categories -25, 26-30, 31-35, 26- and see what are the odds ratios for the age groups using one of the age groups as a reference, maybe the oldest category. In the same way you can study other characteristics, e.g. whether perception (safe: yes/no) is associated with supplement use. You could also run an adjusted analysis and see what the most important predictor of supplement use is.

Conclusions, recommendation from the public health point of view. Looking forward to seeing a more structured manuscript about this important topic! Thank you for working on this!

We really thank the reviewer for the comments raised and we have amended the manuscript to make it more coherent, including editing for more clarity. We unfortunately was not able to record the age and this is a big limitation of the study which we acknowledged in the last paragraph of the revised discussion.

Reviewer reports:

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