Author’s response to reviews

Title: BARRIERS OR GAPS IN IMPLEMENTATION OF MISOPROSTOL USE FOR POST-ABORTION CARE AND POST-PARTUM HEMORRHAGE PREVENTION IN DEVELOPING COUNTRIES: A SYSTEMATIC REVIEW

Authors:

Dr. Amir Ali Samnani (am_samnani@hotmail.com)

Narjis Rizvi (narjis.rizvi@aku.edu)

Tazeen Ali (tazeen.ali@aku.edu)

Farina Abrejo (farina.abrejo@aku.edu)

Version: 1 Date: 06 Sep 2017

Author’s response to reviews:

Comment on Reviewer 1:

Thank you for providing me the productive feedback. You can find my inputs with green highlighted field in the track change version of manuscript)

Comment 1: This article contributes to the on-going discussion of the use of Misoprostol to prevent PPH through a systematic review of published and non-published literature around gaps and challenges to its roll out. A first comment for the authors, is that the paper needs a comprehensive editing in English - it appears as if the paper was either written in a rush, or no English review was undertaken. This makes sections of the paper difficult to understand. Related to language, it is suggested to refer to safe abortion where appropriate (see page 4 where the word 'safe' appears to be missing). Yes, you are right. The English review was not done for this systematic review. Kindly suggest me if there is free English review service available to improve my write-up (if really required). By the way I have tried to improve this lacking by rephrasing the sentences where required and critically review the tenses and coherence.

Comment 2: The description of the methods is good (despite language issues). The description of the results appears to be within the framework of either Health System Building Blocks or Universal Health Coverage areas for action. However, the article makes no mention of either of these frameworks - nor are the results linked to the Every Woman, Every Child framework, 2030 Agenda or other global commitments around reducing maternal mortality and securing safer motherhood. Definitely, I have followed the WHO health system building block framework to
guide the highlighted barriers, based on your suggestions I have added the brief regarding Health system building block framework under the heading of result highlighted in green

It is recommended to situate both the need for this systematic review, - this has been already discussed under introduction heading 5th Paragraph, the significance of the inclusion of misoprostol in the EML as of 2011- Kindly refer para 4 under introduction heading, the reason was already provided WHY adding misoprostol to EML…. The World Health Organization announced the inclusion of misoprostol to its Model List of Essential Medicines based on its proven safety and efficacy for the treatment of incomplete abortion and miscarriage in setting where oxytocin is not available or in absence of SBA’s as well as the ways that addressing gaps in misoprostol use/roll out can help to fulfill current global agendas (EWEC, SDG, UHC, etc) thank you for highlighting this particular lacking, I have now incorporated these linkages under discussion chapter, refer Para 1, highlighted in green.

Comment 3: While the systematic review is on gaps and barriers, it is difficult to situate and understand the recommendations without having an idea of where, how and with which populations is Misoprostol being effectively rolled out. Including a small section on this would not only enhance the systematic review, but also this summary article. (the recommendation has been customized based on provide feedback, refer policy level recommendation 3, highlighted in green).

Comment 4: Finally, the conclusions and recommendations do not address the issues around training of health care workers or the myths/fears about Misoprostol. Do the authors have any recommendations in this area? (recommendation for the training of health care provider has been added under provider level recommendations point 4)

Comment on Reviewer 2 Remarks

All the points were well taken and incorporated in the final version of manuscript. My comments were highlighted in yellow in tract change version of manuscript

1. Lines:20-33; use recent data (http://www.who.int/reproductivehealth/publications/monitoring/maternal-mortality-2015/en/) I have referred to this documents and recent data has been added

2. Line 56: Although Oxytocin is the first line drug… is either incomplete statement or "and in practice" is added incorrectly (correction made)
3. Line 58; capitalize the world "who "similar to others (done)

4. Line 58; "but on the basis of emerging body of evidence regarding misoprostol use for similar..." better to write as …but on the basis of emerging body of evidences WHO recommend… (rephrased as suggested)

Methods (page 7)

5. Line 23; why you use only three data base by excluding the known data base (Cochrane data base)???? At time of attempting this systematic review I was well informed of these 3 data bases. This systematic review is the outcome of mandatory thesis requirement. At that neither my supervisor nor the thesis committee member advised me to use this particular database. In later stages of my systematic review i recognized the value of Cochrane data base but at that time I have already submitted my work for publication. Currently I am writing the systematic review on Barriers associated with stunting reduction and I’m using this particular date base in addition to PubMed and Google scholars

6. In introduction section page 6, line 7; you stated that misoprostol was included in its essential medicines list (EML) model in March, 2011 but in methods line 36; you wrote as misoprostol was included in essential medicine list in March, 2012? Please check it. (Correction made, misoprostol was added in EML in 2011, the recommendation of distribution through CHWs was made in 2012)

Page 8

7. Lines 9-14; what is the importance of writing outcome?? Because you didn't assessed the outcomes you mentioned, you only review the barriers/gaps in the implementation of misoprostol for (Outcome part was eliminated from table. in methodology part under selection criteria (PICO it was mentioned that outcome was not assessed)

Page 9

8. Line 35; …is =was (done)

9. Line 45; The Mirza and Jenkins checklist was used for quality assessment of each included studies. It is better to write as "The Mirza and Jenkins checklist was used for assessing the quality of each included studies". (rephrased)
Discussion (page 15)

10. Line 14; put reference (reference added)

11. Line 60; put the reference (reference added)

Page 17

12. Line 20; what does mean LHWs? Do you mean CHWs?? (that was typo error, rectified)