Reviewer’s report

Title: Views and preferences of medical professionals and pregnant women about a novel primary prevention intervention for hypertensive disorders of pregnancy: a qualitative study

Version: 0 Date: 01 Dec 2018

Reviewer: Theresa Lawrie

Reviewer's report:

Thanks for allowing me to review this paper.

My thoughts as follows:

As calcium supplementation is recommended for pregnant women with low dietary calcium intake and those at high risk of preeclampsia, and aspirin is recommended in pregnant women at high risk of preeclampsia, I wonder whether those interviewed were representative of the populations for whom calcium and aspirin is recommended.

Was any form of assessment of pregnant participants preeclampsia risk or of their dietary calcium intake performed?

The evidence on calcium and/or aspirin supplementation as a PE preventive strategy for all pregnant women is limited, so it seems rather irrelevant to investigate what stakeholders from an unselected pregnant population would think of a combined pill in the absence of evidence on effectiveness and safety in this population. Counselling about a healthy diet that includes calcium rich foods would be more appropriate intervention for this Dutch population perhaps?

It would be helpful to the reader to include the information that was provided to participants with regard to preeclampsia and the role of calcium and aspirin within the paper, instead of as a supplementary file. How accurate/certain is the evidence contained in the supplementary file? What are the confidence intervals for the estimates on effect? What duration of treatment was being 'recommended' to women in the focus groups - are we really sure aspirin is safe throughout pregnancy? Were women informed of the WHO recommendations (which include different doses and specify the context for the supplements)?

This combined pill is referred to in the paper as 'the' polypill, as if it has already been manufactured - is this the case? If not, perhaps refer to it as 'a' instead of 'the'. If it has already been manufactured or is in development, please provide more details of it for the reader.
Further, to my mind, 'poly' refers to 'multiple' components, which in the case of this pill is two components - so I think 'combined pill' or alternative would be better that 'poly' which sounds like 'multi'.

I don't think it's appropriate to make any recommendations, as the benefits and harms of a combined pill in an unselected population have not been proven and so the information provided in the figure is not accurate. Also, I do not agree that it is like folic acid supplementation.

Lines 349/350 - I don't understand this sentence. Do you mean more research should be done, or shouldn't be done?

Lines 357-359 - "most participants, healthcare practitioners and women, considered the polypill to be a simple, presumably harmless method to decrease the risk of a serious condition. " - I feel that this will really depend on what the women have been told about the intervention....I suggest deleting this sentence.

The conclusions - that study participants thought it would be an improvement in care if the pill was offered, provided it is shown to be effective and safe (i.e. an improvement in care) - seems a bit nonsensical.

General: - I would be interested to know what are the beliefs and position of the investigators of this study regarding introducing a polypill to women in the Netherlands? Did you include a reflexive statement in your protocol?

Level of interest
Please indicate how interesting you found the manuscript:

An article of limited interest

Quality of written English
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