Author’s response to reviews

Title: Perceptions of parents and religious leaders regarding minimal invasive tissue sampling to identify the cause of death in stillbirths and neonates: results from a qualitative study

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Author’s response to reviews:

COVER LETTER

Dear Caitlin Williams

BMC Reproductive Health
Greetings from Pakistan

We are very thankful for editor’s and reviewers’ comments and are pleased to submit the revised research manuscript titled “Perceptions of parents and religious leaders regarding minimal invasive tissue sampling to identify the cause of death in stillbirths and neonates: results from a qualitative study” (REPH-D-18-00492).

A point-by-point response is provided below in the table.

The current word count of the manuscript is 3,836 (excluding title page, abstract, list of abbreviations, competing interests, authors’ contributions, acknowledgements, references).

Kindly note that we have made changes to authorship and we do not have any provision for further English language editing of this paper and request the Journal for the same.

We look forward to a publication of our manuscript in BMC Reproductive Health.

Sincere Regards

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S. No.

Comment

Point by point response

1. One clean copy of your manuscript (submitted as supplementary file)
   Clean copy of manuscript is attached as a supplementary file

2. One copy where your changes are highlighted (track changes) (submitted as main manuscript file)
I have addressed all the comments and highlighted text in the revised file. Please let me know if any further modifications are required.

REVIEWER 1 COMMENTS

S. No.

Comment

Point by point response

1. Can you report any information about education or SES of parents participating in the FGDs (or even general demographics of the study population from which you pulled ie those who visit well-baby clinics of NICH hospital)? This is directly relevant to what you report, particularly with respect to parent comments related to MITS being more acceptable amongst those who are more educated. It is impossible for the reader to understand whether your sample disproportionately represented those who are more educated or of higher SES, and thus demonstrated higher acceptability to MITS than might be found in the general population.

We have added the demographic information of FGDs study participant in Table 2. We have also added a line on this on page no. 8 line no. 177 – 178.

2. Please add a paragraph to the discussion describing how the findings of this study may have influenced the manner in which consent was obtained for PURPose, e.g., who was approached for consent, the manner in which MITS was described, whether a religious leader was available for questions etc.

We have added a paragraph on ‘how the findings of this study may have influenced the manner in which consent was obtained’ on page no. 18 line no. 396-404.

3. Consider whether "fear of unexpected medical findings" should be analyzed under factors affecting implementation of MITS. This seems more in line with those affecting acceptance of the procedure.
We completely agree to this comment and have included the code of “fear of unexpected medical findings” under the theme of factors affecting acceptance of MITS. Changes have been highlighted in Table 3 and page no.12 line no. 251-259.

S. No.

Comment

Point by point response

4.

152: It is stated that there were 4 to 6 participants per FDG; Table 1 states there were 5 per group.

We have made corrections in line no. 152 page no. 7.

5.

159: It is stated that FGDs and KIIs were coded as one data set; however, the information in the results sections splits the content by FGDs vs KIIs. Please explain (i.e., were there no common themes that overlapped between the FGDs and KIIs?)

We have made corrections in line no. 159 page no. 7. As KIIs were religious leaders, the themes mostly focused on religious permissibility.

6.

177: It is ambiguous whether n=8 is referring to parents or number of FGDs until you get to Table 1. Please clarify in this sentence.

We have made corrections in line no. 175 page no. 8.

7.

Table 2: religious and cultural perspective, desire to bury the body as soon as possible--this is not addressed in the results of the manuscript.

We have made changes in the Table 3. Changes have been highlighted.
8.

Please review the following lines for language corrections:

a) 105-107: sentence is missing an "and" after "CDA"

b) 187: precious=previous

c) 195: This sentence does not add any new thought compared to the one prior to it ("Parents widely recognized..."). Suggest deleting.

d) 230: general=general

e) 389-390: End of sentence is missing a word--acceptability OF MITS.

f) 405-407: Run-on sentence

g) 408-409: Please review grammar for this sentence.

h) Table 2, acceptability of MITS, precious=previous

a) Corrections have been made in page no. 5 line no. 106

b) Corrections have been made in page no. 9 line no. 189

c) Sentence has been deleted

d) Corrections have been made in page no.11 line no. 230

e) Corrections have been made in page no. 6 line no. 116-117

f) Corrections have been made in page no. 18-19; line no. 409-412

g) Corrections have been made in page no. 19 line no. 412-414

h) Changes have been made in Table 3. This is now Table 3 as one more table has been added prior to this.