**Reviewer’s report**

**Title:** Differences in early risk factors for obesity between African American formula-fed infants and White breastfed controls

**Version:** 1 **Date:** 04 Sep 2017

**Reviewer:** Alison Hill

**Reviewer's report:**

Very interesting study and supports the need for a larger intervention in this higher-risk population. I have listed a few queries below.

General comment: the inclusion of tracked changes in this document would have facilitated the review of this revised manuscript.

**ABSTRACT/INTRODUCTION**

1. In their reply to the editor, the authors indicated that the pilot study was designed to test the feasibility of recruitment and retention, yet this is not listed as an objective of the study, nor mentioned in the abstract.

2. The abstract suggests that the intention was to inform the design of a larger study. This is not consistent with the aims described in the introduction, which focus on differences between AAFF and WBF.

3. Please define - what is WIC? Possibly also RCT at first mention.

4. Line 64. Please specify the differences in weight gain are evident by feeding mode

5. Line 69: as written it can be interpreted as African American women themselves overeat, would be clearer if written as "…engage in child or infant-feeding practices…”
METHODS

8. Include the month of recruitment (lines 83, 94) as opposed to the season to accommodate an international audience.

9. Potentially maternal obesity will influence healthy delivery and birth weight - were there BMI cut-offs?

10. Line 100: those who did not meet criteria for predominantly breast or formula fed were excluded. Figure 1 suggests that this is not the case - mixed-fed enrolled?

11. Line 101: It is clear to me how the sample of WBF were recruited or where this comparison sample came from? I think this confusion stems from the word "included" rather than "recruited", and also because figure 1 suggests that 112 were excluded due to breastfeeding?

12. Need references to support the statement "in our previous RCTS" on line 103

13. As an outcome measure for feasibility, reporting of outcomes for recruitment and retention (lines 106-115) should be part of the results.

   a. Figure 1 - what is DD

   b. Figure 1 - WBF = 26, AFFF = 33, so 59 at baseline? Line 112 states 57

   c. Line 113: it is difficult to determine that 51 AFFF and WBF participants completed the study (should this be 53 if lost 6 AFFF mothers - line 115?) as these are not specifically identified in the final numbers (pooled as total BF or FF in figure 1).

14. Infant feeding style: Did you happen to record whether these beliefs were "enforced" at feeding time? I.e. did infant finish the bottle during feeding time. This could be an interesting addition to the larger study.
RESULTS

15. I would be interested to see the data for all maternal feeding beliefs and behaviours, as opposed to only those that were significant (lines 192-198) e.g. introduction of solids/beverages. Can all of the data for maternal feeding beliefs and behaviours be included in an appendix.

16. I am not convinced that figure 3 is needed, I think reporting these data in the text is preferable.

DISCUSSION

17. Line 230 - relates to 13c above - figure does not clearly indicate final numbers related to retention of W or AA women.

   BUT, how did you determine that recruitment of AA women was more challenging? Did you compare response rates between W and AA women or the number of (different) recruitment strategies required to meet the same enrolment targets for each sample? Currently, the data you present does not sufficiently support this statement around recruitment.

18. Line 260-264: consider revising - one statement about BF recommendations and comparison to WBF, and another about FF recommendations and comparison to AAFF.

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