Reviewer’s report

**Title:** Gestational Obesity Weight management: Implementation of National Guidelines (GLOWING): A pilot cluster randomised controlled trial of a guideline implementation intervention for the management of maternal obesity by midwives

**Version:** 0  **Date:** 29 Jun 2017

**Reviewer:** Annick Bogaerts

**Reviewer’s report:**

Thank you for revising your article about "GestationaL Obesity Weight management: Implementation of National Guidelines (GLOWING): A pilot cluster randomised controlled trial of a guideline implementation intervention for the management of maternal obesity by midwives".

Maternal obesity is increasing worldwide, and represents a considerable health burden for the mother and her child. This pilot study is a valuable and timely study considering the lack of implemented guidelines in daily practice in most regions today.

Globally, this pilot study is described in deep detail and very conscientiously. I miss some structure and overview in a quick to read table, especially regarding the clustering and included respondents from different groups. I suggest to present this more clear in a table, for the ease of readers.

**Remarks/questions:**

Line 74: can you add refs about association obesity development in offspring and maternal obesity as the refs 4-9 not really support this association.

Line 76: I don't think 'metabolic plasticity' is the appropriate term here: the way you describe it here, it is the nutrition behaviour that is changing, rather than the metabolic system. The latter could potentially be a consequence of the behaviour change. Please re-write.

Line 81: "pregnancy is a vulnerable life stage for increased risk of weight gain" - weight gain is normal and very important during pregnancy. You should elaborate a bit on healthy and unhealthy (excessive) weight gain here.

Line 178-182: I don't understand the meaning of this, can you please re-write? What is the focus of what you try to say here.

Line 210: not clear to me what you mean with 'standardised delivery'?

Line 218-221: how did you select these midwives?
Line 223: -227 I don't understand these sentences. Please include a bit on the consequence of weight loss during pregnancy - e.g. nutritional deficiencies for both mother and child. Also, please elaborate a bit on what the study group will do in case of adverse events as a consequence of the intervention.

Line 275 and 278: can you be more specific how midwives were selected (method), including a 'random subset of midwives'?

Line 286: idem remark, be specific about selection of pregnant women please.

Line 401-402: What do you mean by 'no follow up for pregnant women'? and further .. op to one year (line 403)?

Line 462: Is double data entry necessary in this type of RCT?

Line 480-483: can you be more clear here about … in the evidence base of HCP barriers & facilitators, as we don't understand what you try to mention here?

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Please indicate how interesting you found the manuscript:

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Quality of written English
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