



SDI Review Form 1.6

Journal Name:	European Journal of Nutrition & Food Safety
Manuscript Number:	Ms_EJNFS_46638
Title of the Manuscript:	The correlation of maternal pre-pregnancy BMI and gestational weight gain with birth outcomes in Zibo, China
Type of the Article	Short Research Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



SDI Review Form 1.6

PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	The theme dealt here is important. I have some advice. 1. GMD occurred less frequently in obese women, which is contradictory to preexisting knowledge. Please state the reason why. You touched it in 3.4.1 but you did not state if "actually" obese women had less weight gain compared with normal weight women. This can be very easily determined in your study population. 2. You state that your country does not have guideline for weight gain during pregnancy. But I believe that each doctor in your country may have some "idea" regarding this, according to which some advice may be given to every woman in daily practice. Please state how you advised women as to weight gain. Or, if you had "nothing" to advise, state the meaning "you did not perform/advise weight gain education". 3. A woman A (BMI 30 and weight gain 5 kg) vs. a woman B (BMI 22 and weight gain 5kg). A woman X (BMI 30 and weight gain 20 kg) vs. a woman Y (BMI 22 and weight gain 20 kg). The important point of this issue is combination of pre-pregnancy weight and weight gain. You may naturally consider that X vs. Y or A vs. B may have "different" features. You state that 10-15 kg weight gain may be appropriate. Is this so? Naturally, this depends on the pre-pregnancy weight. You slightly touched this issue but you did not discuss it. Ideally you classified women both by pre-pregnancy weight and weight gain but this surely will reduce the study population and statistical significance will disappear. If so, your conclusion cannot be generalized and thus please state all your conclusion very softly. 4. Please reconsider if this small number can conclude something. Usually, we study on this theme at least on 10,000 women. If you consider that the present population is OK, please state the reason.	First, thank you very much for the advices. We try to modify our manuscript based on them. 1. Obese and normal weight groups have similar levels of weight gain (15.46 ± 3.09 kg vs. 15.65 ± 5.39 kg) during pregnancy. Therefore we made preliminary explanation that this observation may result from the intentional body weight control during pregnancy by the obese women, and hence contribute to the lower GMD incidence. 2. Since no guideline for weight gain has been issued so far by our country, in clinical practice we are following the protocol by US Institute of Medicine (Weight Gain During Pregnancy: Reexamining the Guidelines, Washington (DC): National Academies Press (US); 2009). However, it is certain that disparities of optimal weight gain during pregnancy exist between two populations with different ethnic compositions. Therefore we did this preliminary study aiming to find the optimal amount for Chinese women. 3. Thank you for raising such an important question. We understand the same amount of body weight increase may suggest different "burdens" to women with different pre-pregnancy BMIs. Some of our data, as the answer to question 1 discussed, suggest that the similar weight increase observed in both the obese and normal weight group results in increased risk to the latter group. That is why we made preliminary conclusion that an optimal weight gain (i.e. 10-15 kg) may be beneficial for all groups, which brings more nutrition supply to infants of low initial body weight mothers and reduces risk of unfavourable outcomes by high pre-pregnancy BMI. However, we do agree that the conclusion should be expressed more softly given the comparatively small study population. 4. Thank you for the suggestion on more acceptable study population. The data reported in the manuscript is for a preliminary study and we are recruiting more subjects for more detailed analysis. Another reason for the relatively smaller population is our hospital mainly admits patients from city of Zibo, but this policy also eliminates the influence from different dietary habits of different areas.
Minor REVISION comments		
Optional/General comments		

PART 2:

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Are there ethical issues in this manuscript?	(If yes, Kindly please write down the ethical issues here in details)	