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PART 1:

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2013_IJTDH_4985
Title of the Manuscript:	PATTERN OF NEONATAL MORTALITY IN A TERTIARY HEALTH FACILITY IN UMUAHIA, SOUTH EAST, NIGERIA
Type of the Article	Research paper

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	Reviewer's comment	
<u>Minor</u> REVISION comments	The ABSTRACT will be modified as per the revisions in the RESULTS The INTRODUCTION is rather lengthy and reads more like a discussion. I suggest a reduction to no more than 2/3 of the present length. After a brief mention of the magnitude of neonatal deaths globally, followed by the situation in Africa and Nigeria, the author should focus on the situation in Umuahia metropolis and its immediate environs. The idea is that the author should convince readers on the need for this hospital-based study.	Abstract has been modified in line with the changes in the results section. Efforts have been made to rewrite the Introduction section in line with suggestions made. See pages 2-4.
<u>Optional-General</u> comments	The paper has the potential of being a good publication since the magnitude of new-born deaths in most countries of the third world is currently very topical. The major areas of concern are the overall contribution of these deaths and to under-five deaths, the places and timings of these deaths and their largely preventable nature. However, the author should give a lot more thought and time to the METHODOLOGY AND RESULTS sections and particularly the tabulations and statistical analyses/inferences. Association should be clearly demonstrated by available evidence. I suggest a statement on ethnical clearance from the Ethics Committee of the hospital since the article could be published in an international journal	Further statistical analyses carried out on the following: A. Table 1. Demographic characteristics of neonates (mortalities); Table II: Probable direct causes of neonatal deaths, and table III: Time of death from probable direct causes of death. Ethical clearance was sought from the Ethics and research committee of the Hospital.

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PART 2: 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)
<u>Compulsory</u> REVISION comments	Under MATERIALS AND METHODS, the author should include in his background information the annual delivery rate at the Federal Medical Centre. The RESULT SECTION will need to be drastically revised. For instance, he kept using the term <u>neonatal mortality rate</u>, whereas <u>he actually calculated case-fatality rate</u> (line 144). They are two completely different indices. Similarity <u>preterm delivery</u> is preferred to <u>prematurity</u> (line 158) since the former is much easier to define. I fail to understand the significance of the information from lines 148 to 151. For this information to have any meaning the author should show that the place of confinement of the women significantly influenced outcome. For instance, of the 440 babies that died, 263 were out-born. The author should also provided information on the proportion of outborn babies out of the 2,316 who survived. The subsets of survivors and deaths (of our-born babies) could then be compared using the places of confinement. The result should then be subjected to statistical analysis using chi-square (χ^2) statistic with an appropriate correction for continuity if necessary. One very vital information in the result is that 185 (42.0%) of the	The annual delivery rate in the Hospital is about 1500 on the average. See materials and methods subsection page 5 lines 8-9. This has been corrected in the entire manuscript as case fatality rate per 100 live births and also prematurity changed to preterm deliveries in the entire manuscript. This has been captured in the new Table I in the revised manuscript and the resulting statistical relationship written in prose. This has been taken care of in the new

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	deaths occurred within 24 hours of admission (line 161). However, the author should bring out the significance of this result by constructing a table to compare the deaths ≤ 24hrs (n=185) with those of >24hrs (n=255) using the following probable direct causes of death; <i>complications of birth asphyxia, infection, neonatal jaundice, neonatal tetanus</i>. Finally the result should be subjected to statistical analysis as described above. The author is rather silent on the social background of the mothers. These are usually the intermediate and distal determinants of outcome exerting their influences on the probable direct causes like complications of birth asphyxia, infections, etc. the author should provide information on the educational background of the mothers, employment status, place of residence (urban vs. rural), etc. Still under RESULTS, the pie diagram on page 13 should be deleted. The information is well captured in the text. Similarly, the bar chart on page 14 should be deleted. On Table II, I suggest as the legend <i>Probable Direct Causes of 440 Neonatal Deaths at the Federal Medical Centre, Umuahia, South-eastern Nigeria</i>. Usually, a legend should be as comprehensive as possible, figure 1 and Table 1 should also be captioned accordingly. Table III should be reconstructed along the lines suggested above and the legend should be modified accordingly. The DISCUSSION should be revised taking into account the suggestions above.	Table 3 in the revised manuscript. The sociodemographic background of the mothers of the babies in this cohort: see Materials and methods section page 5 lines 22-24. The bar chart and pie charts have been deleted and the information captured in prose form. Table 2 constructed with the legend: probable direct causes of neonatal deaths. The discussion revised in line with the
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		suggestions made.
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