

Review of: "Delayed vs Early Umbilical Cord Clamping in 100 Preterm Infants: an RCT from Bhavnagar, Gujarat"

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Potential competing interests: No potential competing interests to declare.

In this RCT authors want to investigate the safety, feasibility and efficacy of delayed cord clamping (DCC) compared with early cord clamping (ECC) at delivery among 100 preterm infants born before completed 37 weeks' gestation. Authors conclusion is that the requirement of blood transfusion is reduced with delayed cord clamping up to the first four month of age. The paper could be valuable for publication but need to be revised (major revision) and corrected for english language.

These are my suggestions:

1. In the introduction section authors stated that "*Advantages of delaying clamping of the umbilical cord and subsequent increase in placental transfusion include...*" citing a paper by Grajeda R, et al. *Am J Clin Nutr.* 1997; 65:425-31. doi: 10.1093/ajcn/65.2.425. PMID: 9022526". It should be better to specify that all these advantages have been described in preterm newborns and cite one of the recent metanalysis published on this topic.
2. In the introduction section the sentence "*The disadvantages may include delay in resuscitation, hypothermia, polycythemia, hyperbilirubinemia needing treatment*", need a citation, above all as the disadvantage of jaundice needing of phototherapy is debated and does not represent a real problem for most of the autnors.
3. This phrase "*Another benefit of DCC is that along with hemoglobin the Oxygen is also received by the baby and so asphyxia is prevented or minimized. This is seen as 'intact cord resuscitation' studies for asphyxia babies being carried out now*" should be eliminated.
4. The primary outcome "*To determine the selected hematological effects of*" should be less generic and better specified by authors (requirement of blood transfusion as stated in the abstract? Hb level at 4 months?...).
5. Sample size calculation should be better specified as it can't be based simply on the expected number of preterm babies
6. Authors should better describe what happen to recruited newborns during the hospitalization, as for newborn less than 32 weeks (mean gestational age is reported to be 32 weeks, please provide also range in table) is insufficient to say "*The infant was assessed at 1 and 6 h by the midwife nurse...*" The description of methods seems to be related to a population of term babies. Please, provide a better description of methods.
7. Results are not well presented, there are too many tables/figures and the only descriptive text is that in the table legends. The column "p, X2" in table 2 is not clear. Which was the definition of anemia? Figure 4 could be eliminated and data put in text. Also, Figure 5 could be eliminated as data are already reported in table 1 and 2. Please, provide a

better description of results.

8. Discussion is not well represented, it would be better not to subdivide it in paragraphs according to various outcomes (*follow up, hemoglobin, polycitemia...*) but underline and comment only the most important results of the study.