

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

Bupe Mwamba

Potential competing interests: No potential competing interests to declare.

Peer Review Report

Title: Delayed vs Early Umbilical Cord Clamping in 100 Preterm Infants: an RCT from Bhavnagar, Gujarat.

Article Type: Original

Recommendation: Accept with minor revisions

Comments to Authors

Your manuscript has provided insights on the topic, which investigated the safety, feasibility and efficacy of delayed cord clamping (DCC) compared with early cord clamping (ECC) at delivery among preterm infants born before completed 37 weeks' gestation in Bhavnagar, Gujarat. Delayed cord clamping is an extremely important evidence-based practice at birth and reading through provided more information on the topic and the article is well written and coherent. Your background is informative and the rationale to the study has been excellently explained. The data collection method seems appropriate to answer to the study objectives. Your results have provided important information on the topic and agrees with some of the articles that you cited in your manuscript. Your data analysis methods seem appropriate to answer to your research purpose. However, are you able to work on the discussion? The opening paragraph of the discussion looked at several issues regarding the effects of DCC as compared to ECC, which include the risks for maternal PPH, and infants' risk for polycythaemia and jaundice. Was this from your study? Possible benefits of improved iron status in a high-income country where iron stores are usually adequate are not known, kindly search literature on this statement because there is data from developed countries. The main proposed disadvantages of DCC in newborn infants are associated with events occurring close to birth, such as polycythaemia, respiratory distress, and hyperbilirubinemia, and the need for phototherapy, kindly provide more information on this statement too, were these findings from your study? Reasons for ECC in obstetric practice are decreased maternal post-partum haemorrhage and to facilitate umbilical artery blood gas sampling, were these findings from your study and what do you mean by decreased maternal post-partum haemorrhage in this statement? Kindly work on your discussion Overall, a very good contribution to the body of knowledge. Job well done.