

# OBSTETRICS & GYNECOLOGY



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- Comments from the reviewers and editors (email to author requesting revisions)
- Response from the author (cover letter submitted with revised manuscript)\*
- Email correspondence between the editorial office and the authors\*

*\*The corresponding author has opted to make this information publicly available.*

Personal or nonessential information may be redacted at the editor's discretion.

Questions about these materials may be directed to the *Obstetrics & Gynecology* editorial office:  
[obgyn@greenjournal.org](mailto:obgyn@greenjournal.org).

**Date:** Dec 03, 2018  
**To:** "Luwam A Ghidei" [REDACTED]  
**From:** "The Green Journal" em@greenjournal.org  
**Subject:** Your Submission ONG-18-2016

RE: Manuscript Number ONG-18-2016

Revisiting Race, Research, and Women's Health: Best Practice Guidelines for Investigators

Dear Dr. Ghidei:

Your manuscript has been reviewed by the Editorial Board and by special expert referees. Although it is judged not acceptable for publication in Obstetrics & Gynecology in its present form, we would be willing to give further consideration to a revised version.

If you wish to consider revising your manuscript, you will first need to study carefully the enclosed reports submitted by the referees and editors. Each point raised requires a response, by either revising your manuscript or making a clear and convincing argument as to why no revision is needed. To facilitate our review, we prefer that the cover letter include the comments made by the reviewers and the editor followed by your response. The revised manuscript should indicate the position of all changes made. We suggest that you use the "track changes" feature in your word processing software to do so (rather than strikethrough or underline formatting).

Your paper will be maintained in active status for 21 days from the date of this letter. If we have not heard from you by Dec 24, 2018, we will assume you wish to withdraw the manuscript from further consideration.

#### REVIEWER COMMENTS:

Reviewer #1: This is a commentary on the need to standardize data acquisition and interpretation as it relates to race and its impact on healthcare disparities especially in women's health.

1. Although the commentary is intended for investigators and readers of the Green Journal, it need not be explicitly directed at the journal; suggest removing references to the journal in the abstract and discussion. Alternatively, it may be re-formatted as a letter to the journal.
2. The introduction (lines 76-94) can be considerably shortened, removing allusions or references to current political climate. The tone is rather admonishing and can be tempered.
3. The cited case examples are lengthy, with too many rhetorical questions (lines 112-117) and would suggest eliminating completely lines (96-179).
4. The entire article will be better articulated and received if condensed to focus on recommendations for appropriate use of race in research (lines 181-260) preceded by a short introduction and rationale for need to change status quo. Will suggest removing all references to personal anecdotes- at the very least, it is confusing when "I" is used so frequently in a commentary authored by 3 people.

Reviewer #2: This is a thoughtful and much needed commentary to discuss race and research. However, this commentary could be made stronger by evaluating references to see if they are appropriately cited. Additionally, the suggestion in lines 176-179 that we should "separate race from the equation" seems incongruent with the remaining commentary - the authors discuss the complexities of race and the implications not commonly discussed showing that race is the tip of the iceberg and should be explored more for a deeper understanding of why these differences between races may exist (beyond any debunked genetic claim).

Reviewer #3:

Revisiting Race, Research, and Women's Health: Best Practice Guidelines for Investigators

Is a commentary on the use of race and ethnicity in OB/GYN research in the U.S. The authors argues that race, being a socio-political construct, is often misused and misrepresented in medical research. These misuses have the potential to misdiagnose and to perpetuate racial disparities in medicine. The authors uses two examples to make this case: Anemia, which is defined differently for white and black women, and the VBAC calculator, which includes black race as a determinant of VBAC success. The commentary concludes by recommending specific uses of race, and questions for

researchers to encourage them to think critically about race/ethnicity and the consequences of its use in medical research.

This is a very important, and timely topic. The authors rightly encourage the field of OB/GYN to critically examine its own perceptions and uses of race in its literature. As the authors note, this is particularly appropriate given the increasing attention to racial disparities in pregnancy outcomes. As other fields in medicine seem to be grappling with the effects of racism on patient outcomes, the field of OB/GYN would do well to examine its own shameful disparities through a similar lens. While the specific recommendations are very useful and would serve the Green Journal well, the two case examples seem less relevant to the core argument. Debating the appropriateness of using separate cut offs for anemia or using race as a factor in the VBAC calculator is important and valid; however, the brief discussion of these examples does not clearly bolster the authors' claim about the dangers of misusing race in medicine. The commentary would be stronger if these examples were briefly mentioned, but not used as the central argument.

The discussion of how researchers define race is useful and important, and the tables at the three tables are helpful, particularly table 2

The authors should focus this commentary on specifically how researchers can use race to answer important questions about health disparities, without perpetuating misunderstanding and racism. As above, I recommend not focusing so much, or at all, on the two examples.

#### EDITORIAL OFFICE COMMENTS:

1. The Editors of Obstetrics & Gynecology are seeking to increase transparency around its peer-review process, in line with efforts to do so in international biomedical peer review publishing. If your article is accepted, we will be posting this revision letter as supplemental digital content to the published article online. Additionally, unless you choose to opt out, we will also be including your point-by-point response to the revision letter, as well as subsequent author queries. If you opt out of including your response, only the revision letter will be posted. Please reply to this letter with one of two responses:

1. OPT-IN: Yes, please publish my response letter and subsequent email correspondence related to author queries.
2. OPT-OUT: No, please do not publish my response letter and subsequent email correspondence related to author queries.

2. Each author on this manuscript must submit a completed copy of our revised author agreement form (updated in the January 2018 issue). Please note:

a) Any material included in your submission that is not original or that you are not able to transfer copyright for must be listed under I.B on the first page of the author agreement form.

b) All authors must disclose any financial involvement that could represent potential conflicts of interest in an attachment to the author agreement form.

c) All authors must indicate their contributions to the submission by checking the applicable boxes on the author agreement form.

d) The role of authorship in Obstetrics & Gynecology is reserved for those individuals who meet the criteria recommended by the International Committee of Medical Journal Editors (ICMJE; <http://www.icmje.org>):

\* Substantial contributions to the conception or design of the work;

OR

the acquisition, analysis, or interpretation of data for the work;

AND

\* Drafting the work or revising it critically for important intellectual content;

AND

\* Final approval of the version to be published;

AND

\* Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

The author agreement form is available online at <http://edmgr.ovid.com/ong/accounts/agreementform.pdf>. Signed forms should be scanned and uploaded into Editorial Manager with your other manuscript files. Any forms collected after your revision is submitted may be e-mailed to [obgyn@greenjournal.org](mailto:obgyn@greenjournal.org).

3. Standard obstetric and gynecology data definitions have been developed through the reVITALize initiative, which was convened by the American College of Obstetricians and Gynecologists and the members of the Women's Health Registry Alliance. Obstetrics & Gynecology will be transitioning as much as possible to use of the reVITALize definitions, and we encourage authors to familiarize themselves with them. The obstetric data definitions are available at <http://links.lww.com/AOG/A515>, and the gynecology data definitions are available at <http://links.lww.com/AOG/A935>.

4. Because of space limitations, it is important that your revised manuscript adhere to the following length restrictions by

manuscript type: Current Commentary articles should not exceed 12 typed, double-spaced pages (3,000 words). Stated page limits include all numbered pages in a manuscript (i.e., title page, précis, abstract, text, references, tables, boxes, figure legends, and appendices).

Please limit your Introduction to 250 words and your Discussion to 750 words.

5. Specific rules govern the use of acknowledgments in the journal. Please edit your acknowledgments or provide more information in accordance with the following guidelines:

- \* All financial support of the study must be acknowledged.
- \* Any and all manuscript preparation assistance, including but not limited to topic development, data collection, analysis, writing, or editorial assistance, must be disclosed in the acknowledgments. Such acknowledgments must identify the entities that provided and paid for this assistance, whether directly or indirectly.
- \* All persons who contributed to the work reported in the manuscript, but not sufficiently to be authors, must be acknowledged. Written permission must be obtained from all individuals named in the acknowledgments, as readers may infer their endorsement of the data and conclusions. Please note that your signature on the journal's author agreement form verifies that permission has been obtained from all named persons.
- \* If all or part of the paper was presented at the Annual Clinical and Scientific Meeting of the American College of Obstetricians and Gynecologists or at any other organizational meeting, that presentation should be noted (include the exact dates and location of the meeting).

6. Provide a short title of no more than 45 characters (40 characters for case reports), including spaces, for use as a running foot.

7. The most common deficiency in revised manuscripts involves the abstract. Be sure there are no inconsistencies between the Abstract and the manuscript, and that the Abstract has a clear conclusion statement based on the results found in the paper. Make sure that the abstract does not contain information that does not appear in the body text. If you submit a revision, please check the abstract carefully.

In addition, the abstract length should follow journal guidelines. The word limits for different article types are as follows: Current Commentary articles, 250 words. Please provide a word count.

8. Only standard abbreviations and acronyms are allowed. A selected list is available online at <http://edmgr.ovid.com/ong/accounts/abbreviations.pdf>. Abbreviations and acronyms cannot be used in the title or précis. Abbreviations and acronyms must be spelled out the first time they are used in the abstract and again in the body of the manuscript.

9. The journal does not use the virgule symbol (/) in sentences with words. Please rephrase your text to avoid using "and/or," or similar constructions throughout the text. You may retain this symbol if you are using it to express data or a measurement.

10. Please review the journal's Table Checklist to make sure that your tables conform to journal style. The Table Checklist is available online here: [http://edmgr.ovid.com/ong/accounts/table\\_checklist.pdf](http://edmgr.ovid.com/ong/accounts/table_checklist.pdf).

11. The American College of Obstetricians and Gynecologists' (College) documents are frequently updated. These documents may be withdrawn and replaced with newer, revised versions. If you cite College documents in your manuscript, be sure the reference you are citing is still current and available. If the reference you are citing has been updated (ie, replaced by a newer version), please ensure that the new version supports whatever statement you are making in your manuscript and then update your reference list accordingly. If the reference you are citing has been withdrawn with no clear replacement, please contact the editorial office for assistance ([obgyn@greenjournal.org](mailto:obgyn@greenjournal.org)). In most cases, if a College document has been withdrawn, it should not be referenced in your manuscript (exceptions could include manuscripts that address items of historical interest). All College documents (eg, Committee Opinions and Practice Bulletins) may be found via the Resources and Publications page at <http://www.acog.org/Resources-And-Publications>.

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If you choose to revise your manuscript, please submit your revision via Editorial Manager for Obstetrics & Gynecology at <http://ong.editorialmanager.com>. It is essential that your cover letter list point-by-point the changes made in response to each criticism. Also, please save and submit your manuscript in a word processing format such as Microsoft Word.

If you submit a revision, we will assume that it has been developed in consultation with your co-authors, that each author has given approval to the final form of the revision, and that the agreement form signed by each author and submitted with the initial version remains valid.

Again, your paper will be maintained in active status for 21 days from the date of this letter. If we have not heard from you by Dec 24, 2018, we will assume you wish to withdraw the manuscript from further consideration.

Sincerely,

The Editors of Obstetrics & Gynecology

2017 IMPACT FACTOR: 4.982

2017 IMPACT FACTOR RANKING: 5th out of 82 ob/gyn journals

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In compliance with data protection regulations, please contact the publication office if you would like to have your personal information removed from the database.

## Cover Letter-Response to revisions

Reviewer #1: This is a commentary on the need to standardize data acquisition and interpretation as it relates to race and its impact on healthcare disparities especially in women's health.

1. Although the commentary is intended for investigators and readers of the Green Journal, it need not be explicitly directed at the journal; suggest removing references to the journal in the abstract and discussion. Alternatively, it may be re-formatted as a letter to the journal.

**We have removed specific references to the Green Journal.**

2. The introduction (lines 76-94) can be considerably shortened, removing allusions or references to current political climate. The tone is rather admonishing and can be tempered.

**The introduction has been shortened.**

3. The cited case examples are lengthy, with too many rhetorical questions (lines 112-117) and would suggest eliminating completely lines (96-179).

**Lines 112-117 have been deleted.**

**The first example has been entirely deleted (Lines 95-147). The authors feel the second example highlights how race is inappropriately used in clinical practice every day. We believe that by focusing on the well-known and widely-used TOLAC calculator, we can connect with our audience. This example demonstrates how inappropriate use of race in research can directly impact clinical outcomes.**

4. The entire article will be better articulated and received if condensed to focus on recommendations for appropriate use of race in research (lines 181-260) preceded by a short introduction and rationale for need to change status quo. Will suggest removing all references to personal anecdotes- at the very least, it is confusing when "I" is used so frequently in a commentary authored by 3 people.

**The personal anecdotes were removed, significantly condensing the article.**

Reviewer #2: This is a thoughtful and much needed commentary to discuss race and research. However, this commentary could be made stronger by evaluating references to see if they are appropriately cited. Additionally, the suggestion in lines 176-179 that we should "separate race from the equation" seems incongruent with the remaining commentary - the authors discuss the complexities of race and the implications not commonly discussed showing that race is the tip of the iceberg and should be explored more for a deeper understanding of why these differences between races may exist (beyond any debunked genetic claim).

**Thank you, we have removed the text stating we should “separate race from the equation” and we have clarified our argument in that sentence.**

Reviewer #3:

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**We have removed the example of anemia and have kept the example of the vbac calculator. See comment above.**

The discussion of how researchers define race is useful and important, and the tables at the three tables are helpful, particularly table 2

The authors should focus this commentary on specifically how researchers can use race to answer important questions about health disparities, without perpetuating misunderstanding and racism. As above, I recommend not focusing so much, or at all, on the two examples.

**Please see comment above.**

## Daniel Mosier

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**From:** Luwam Ghidei [REDACTED]  
**Sent:** Monday, January 7, 2019 1:49 PM  
**To:** Daniel Mosier  
**Subject:** Re: Manuscript Revisions: ONG-18-2016R1

Hi Mr. Mosier,

We agree with all changes

On Fri, Jan 4, 2019 at 3:29 PM Daniel Mosier <[dmosier@greenjournal.org](mailto:dmosier@greenjournal.org)> wrote:

Dear Dr. Ghidei,

Thank you for submitting your revised manuscript. It has been reviewed by the editor, and there are a few issues that must be addressed before we can consider your manuscript further:

1. Please note the minor edits and deletions throughout. Please let us know if you disagree with any of these changes.
2. LINE 6: Dr. Murray and Singer will need to complete our electronic Copyright Transfer Agreement, which was sent to them from Editorial Manager. The form was sent to Dr. Murray at the email in the query above, [REDACTED] and to Ms. Singer at [REDACTED]. Are these the correct email addresses?

Please let me know if you have any questions. Your prompt response to these queries will be appreciated; please respond no later than COB on **Tuesday, January 8th**.

Sincerely,

-Daniel Mosier

### Daniel Mosier

Editorial Assistant

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