NOTICE: This document contains correspondence generated during peer review and subsequent revisions but before transmittal to production for composition and copyediting:

- 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.
RE: Your Submission ONG-18-2431

Bias in the peer review process; can we do better?

Dear Dr. Palatnik:

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 Feb 21, 2019, we will assume you wish to withdraw the manuscript from further consideration.

REVIEWER COMMENTS:

Reviewer #1: This is a commentary about improving the peer review process and a review of the different types of bias and types of peer review, the pros and cons of each type.

1. The Winston Churchill reference comes from citation 11, so this should be cited as the origin of this idea.

2. Line 82: Why would authors be allowed to waive their anonymity in double blind peer review? Wouldn't it be mandatory?

3. Was there any event that prompted this commentary? What are the authors' own experiences with peer review? That would be helpful for readers to know in terms of transparency regarding the authors. Do the authors have any special expertise (e.g. have served as Editors of journals, peer reviewers etc.) on this matter?

4. The authors don't make a final recommendation at the end, so which do they think is better, double blind peer review or open review? Personally, I would not participate in peer review if it was open, I agree that it would cause conflicts among colleagues and inhibit honest comments.

5. The authors do not comment at all on the Green Journal's new policy of transparent peer review where the comments are now available to the public, this should be included in their discussion.

Reviewer #2: Authors comments:

It is my understanding that this is a Current Commentary. Still I have some questions and or concerns to contents of the Current Commentary.

1. Lines 21-24: "This commentary aims... potentially interfere ...the journal of Obstetrics and Gynecology". The wording of potentially interfere it's an assumption and there is no proof of it in the article.

Introduction:

2. Lines 44-46: "But in reality...The system is susceptible to the influence of personal and professional biases..." Is there is proof for this line?

3. Line 49-50: "The most pertinent category of bias..." How do we know these are the most pertinent bias. Can there be
others that are prominent/pertinent.

4. Line 52-54: "Ad homines bias...or honor". It is not one of the rules for reviewers at most journals that the reviewer needs to abstain from reviewing any potential article from any author that the reviewer may know of having a conflict with. As a matter of fact the reviewer needs to abstain to review any submitted material if there is any bias and or conflict of interest.

5. Line 56-59: "Affiliation bias" Is there any proof on how this bias occurs?

6. Line 65-66: "These biases...on merit alone" It assumes these biases do exist and are a reality.

7. Line 80-83: "In addition, the authors...advantage" How can we prove this happens?

8. Line 127-128: "Nevertheless...journals face". It is assume in this line that the bias do happen and it is a reality.

Reviewer #3: The argument is well presented in this Current Commentary about different blinding for the peer review process, discussing double, triple and open peer review as alternatives to current practice by the Green Journal. It led me to thinking about other issues with peer review worth discussing in addition to bias, particularly those that would allow open peer review to be accepted by the medical community. First, the culture of medicine and peer review would have to change. We would need to equip reviewers with stronger manuscript appraisal skills and authors to be more receptive to feedback once they have confidence in the reviewers expertise. However, since most peer review is done on a volunteer basis, with limited time and energy, and reviewers having varying levels of expertise in manuscript appraisal, authors will remain skeptical over the quality of the review (and oftentimes, rightfully so). If peer reviewer selection could be more formalized and reviewers could be compensated (or incentivized in another way), the quality of the reviews would be improved. It would require more formal training during medical school and residency in manuscript appraisal and communicating feedback. Only then it would make sense to adopt an open review process, which would allow reviewers to appraise manuscripts with getter skill and confidence and the author to get meaningful and kinder feedback.

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. As of December 17, 2018, Obstetrics & Gynecology has implemented an "electronic Copyright Transfer Agreement" (eCTA) and will no longer be collecting author agreement forms. When you are ready to revise your manuscript, you will be prompted in Editorial Manager (EM) to click on "Revise Submission." Doing so will launch the resubmission process, and you will be walked through the various questions that comprise the eCTA. Each of your coauthors will receive an email from the system requesting that they review and electronically sign the eCTA.

Any author agreement forms previously submitted will be superseded by the eCTA. During the resubmission process, you are welcome to remove these PDFs from EM. However, if you prefer, we can remove them for you after submission.

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 has adopted the use of the reVITALize definitions. Please access the obstetric and gynecology data definitions at https://www.acog.org/About-ACOG/ACOG-Departments/Patient-Safety-and-Quality-Improvement/reVITALize. If use of the reVITALize definitions is problematic, please discuss this in your point-by-point response to this letter.

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 16 typed, double-spaced pages (4,000 words). Stated page limits include all numbered pages in a manuscript (i.e., title page, précis, abstract, text, references, tables, boxes, figure legends, and print appendixes) but exclude references.

5. Specific rules govern the use of acknowledgments in the journal. Please note 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 response in the journal’s electronic author 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 précis on the second page, for use in the Table of Contents. The précis is a single sentence of no more than 25 words that states the conclusion(s) of the report (ie, the bottom line). The précis should be similar to the abstract’s conclusion. Do not use commercial names, abbreviations, or acronyms in the précis. Please avoid phrases like "This paper presents" or "This case presents."

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. Authors whose manuscripts have been accepted for publication have the option to pay an article processing charge and publish open access. With this choice, articles are made freely available online immediately upon publication. An information sheet is available at http://links.lww.com/LWW-ES/A48. The cost for publishing an article as open access can be found at http://edmgr.ovid.com/acad/accounts/ifauth.htm.

Please note that if your article is accepted, you will receive an email from the editorial office asking you to choose a publication route (traditional or open access). Please keep an eye out for that future email and be sure to respond to it promptly.

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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 and that each author has given approval to the final form of the revision.

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 Feb 21, 2019, 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

In compliance with data protection regulations, please contact the publication office if you would like to have your personal information removed from the database.
Reviewer #1: This is a commentary about improving the peer review process and a review of the different types of bias and types of peer review, the pros and cons of each type.

1. The Winston Churchill reference comes from citation 11, so this should be cited as the origin of this idea.

_The source of citation was added to references under reference #12._

2. Line 82: Why would authors be allowed to waive their anonymity in double blind peer review? Wouldn't it be mandatory?

_We agree with the reviewer that it would be mandatory. In this line we reviewed the critic of double blind review approach, and that some authors would be against this type of review in lieu of their reputation in the field, reputation that may be advantageous and promote positive review of their paper._

3. Was there any event that prompted this commentary? What are the authors' own experiences with peer review? That would be helpful for readers to know in terms of transparency regarding the authors. Do the authors have any special expertise (e.g. have served as Editors of journals, peer reviewers etc.) on this matter?

_Dr. Palatnik is a junior faculty in the division of Maternal Fetal Medicine. She serves as a reviewer for several Obstetric journals and reviews on average 1-2 papers per month. Dr. Palatnik has experience with peer review of her own papers and published around 25 articles in the field of Clinical Obstetrics. Dr. Palatnik is currently enrolled in a CTSI sponsored mentorship research course, called “Clinical Research Scholar Program” (CRSP) at the Medical College of Wisconsin. One of the mentors in this course is Dr. Ryan Spellecy, a Professor in Bioethics at the Institute of Health and Equity. In addition to running the mentorship program, Dr. Spellecy regularly speaks and teaches on responsible conduct of research. Dr. Spellecy also serves as Editor of the American Society for Bioethics and Humanities Reader and is a reviewer of a few journals in Bioethics. During the CRSP sessions, Dr. Palatnik discussed with Dr. Spellecy the peer review process in two major American OBGYN journals, the Green Journal and AJOG. Dr. Spellecy was surprised to find out that it was different from the Ethics and behavior literature that in general uses a double blind peer review process. The impetus aroused in conversation among the authors and different peer review processes in different fields. Dr. Tvina is an OBGYN resident who is passionate about ethics in OBGYN research and is planning a carrier in that niche. She contributed to the manuscript by helping with literature search and writing and first draft of the commentary. We are happy to add this paragraph of transparency at the end of the commentary if the Editor and the reviewer think it will enhance the commentary._

4. The authors don't make a final recommendation at the end, so which do they think is better, double blind peer review or open review? Personally, I would not participate in peer review if it was open. I agree that it would cause conflicts among colleagues and inhibit honest comments. _We agree that open peer review may lead to conflicts. However, single blind peer review is also_
not fair. We added recommendation regarding the review changing to a double blind peer review, page 7, last paragraph:”Based on literature review in this field we favor double-blind peer review.”

5. The authors do not comment at all on the Green Journal’s new policy of transparent peer review where the comments are now available to the public, this should be included in their discussion.

We did comment on a single blind peer review process of the Green Journal. We thank the reviewer of bringing to our attention the transparent policy around peer review that was started in 2018. We added this information to page 7:”Starting 2018, the Green Journal added more transparency to peer review of accepted articles. It publishes reviewers’ and Editor’s comments to the author, along with the authors’ responses as a supplemental digital content. However the review remains single blind and reviewer comments remain anonymous”

Reviewer #2: Authors comments:

It is my understanding that this is a Current Commentary. Still I have some questions and or concerns to contents of the Current Commentary.

1. Lines 21-24: "This commentary aims... potentially interfere ...the journal of Obstetrics and Gynecology". The wording of potentially interfere it's an assumption and there is no proof of it in the article.
   We changed this to say: “This commentary reviews some of the most common biases that could potentially affect objective evaluation of a manuscript and propose alternatives to the current single blind peer review process that is being utilized by most scientific journals including the journal of Obstetrics and Gynecology”

Introduction:

2. Lines 44-46: "But in reality...The system is susceptible to the influence of personal and professional biases..." Is there is proof for this line?
   We agree with the reviewer that it is hard to prove bias in certain submissions/publications and this is a topic that is very hard to study. The evidence on whether there is bias in peer review against certain sorts of authors is conflicting, but there is strong evidence of bias against women in the process of awarding grants (Wenneras C, Wold A. Sexism and nepotism in peer-review. Nature 1997;387:341–3); The most famous piece of evidence on bias against authors comes from a study by DP Peters and SJ Ceci (Peters D, Ceci S. Peer-review practices of psychological journals: the fate of submitted articles, submitted again. Behav Brain Sci 1982;5:187–255). They took 12 studies that came from prestigious institutions that had already been published in psychology journals. They retyped the papers, made minor changes to the titles, abstracts, and introductions but changed the authors’ names and institutions. They invented institutions with names like the Tri-Valley Center for Human Potential. The papers were then resubmitted to the journals that had first published them. In only three cases did the journals realize that they had already published the paper, and eight of the remaining nine were rejected—not because of lack of originality but because of poor quality. Peters and Ceci concluded that this was evidence of bias against authors from less prestigious institutions. Because this is a commentary we are limited by 12 references, therefore could not add these papers to the bibliography.
3. Line 49-50: "The most pertinent category of bias..." How do we know these are the most pertinent bias. Can there be others that are prominent/pertinent.

The three biases we covered are the main biases in peer review, therefore we used the adjective pertinent. We meant to refer not to a specific bias but to all three categories. We agree with the reviewer that among the bias categories, it is hard to establish which one is the most important.

4. Line 52-54: "Ad homines bias...or honor". It is not one of the rules for reviewers at most journal that the reviewer needs to abstain from reviewing any potential article from any author that the reviewer may know of have a conflict with. As a matter of fact the reviewer needs to abstain to review any submitted material if there any bias and or conflict of interest.

We completely agree with the reviewer's comment. We do think, however, it is hard to proof that this is being done in reality, since this is a single blind peer review process, and authors don't have a guarantee that the reviewer that was selected indeed is free of bias. They are relying on the honesty and conscientiousness of the reviewer, and this is probably true in most cases, but there are exceptions to this rule. We cannot proof this; therefore this is a commentary and not a scientific article.

5. Line 56-59: "Affiliation bias" Is there any proof on how this bias occurs?

Similar to our answer for the second questions, we provide the following reference that proofs affiliation bias: A study by DP Peters and SJ Ceci (Peters D, Ceci S. Peer-review practices of psychological journals: the fate of submitted articles, submitted again. Behav Brain Sci 1982;5:187–255) that took 12 studies that came from prestigious institutions that had already been published in psychology journals. They retyped the papers, made minor changes to the titles, abstracts, and introductions but changed the authors' names and institutions. They invented institutions with names like the Tri-Valley Center for Human Potential. The papers were then resubmitted to the journals that had first published them. In only three cases did the journals realize that they had already published the paper, and eight of the remaining nine were rejected—not because of lack of originality but because of poor quality. Peters and Ceci concluded that this was evidence of bias against authors from less prestigious institutions.

6. Line 65-66: "These biases...on merit alone" It assumes these biases do exist and are a reality.

Based on our review of the literature, biases in peer review exist. We even found one interesting article published by former editor of BMJ that admits himself being biased as young editors by a strong name of the author and publishing “unimpressed” paper (Smith R. Peer review: a flawed process at the heart of science and journals. J R Soc Med. 2006 pr;99(4):178-82)

7. Line 80-83: "In addition, the authors...advantage" How can we proof this happens?

We agree with the reviewer that we cannot proof this happened but deducting from existing literature, based on other biases that happen, this is likely happening as well.

8. Line 127-128: "Nevertheless...journals face". It is assume in this line that the bias do happens and it is a reality.

We again would refer to references cited in answering the previous questions of the reviewer as well as those that were cited in the commentary. As much evidence as can be found in this conflicting topic, it points towards existence of bias in peer review.

Reviewer #3: The argument is well presented in this Current Commentary about different blinding for the peer review process, discussing double, triple and open peer review as
alternatives to current practice by the Green Journal. It led me to thinking about other issues with peer review worth discussing in addition to bias, particularly those that would allow open peer review to be accepted by the medical community. First, the culture of medicine and peer review would have to change. We would need to equip reviewers with stronger manuscript appraisal skills and authors to be more receptive to feedback once they have confidence in the reviewers’ expertise. However, since most peer review is done on a volunteer basis, with limited time and energy, and reviewers have varying levels of expertise in manuscript appraisal, authors will remain skeptical over the quality of the review (and oftentimes, rightfully so). If peer reviewer selection could be more formalized and reviewers could be compensated (or incentivized in another way), the quality of the reviews would be improved. It would require more formal training during medical school and residency in manuscript appraisal and communicating feedback. Only then it would make sense to adopt an open review process, which would allow reviewers to appraise manuscripts with greater skill and confidence and the author to get meaningful and kinder feedback.

We completely agree with the reviewer. There should be better education of the reviewers and they should be incentivized. In our university, there is a small academic incentive for amount of peer review done per year and it is proportional to number of papers reviewed. In order to encourage peer review, especially among highly successful academic physicians with limited amount of time, a small incentive should be offered.

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
   We choose to Opt-in.
   2. OPT-OUT: No, please do not publish my response letter and subsequent email correspondence related to author queries.

2. As of December 17, 2018, Obstetrics & Gynecology has implemented an "electronic Copyright Transfer Agreement" (eCTA) and will no longer be collecting author agreement forms. When you are ready to revise your manuscript, you will be prompted in Editorial Manager (EM) to click on "Revise Submission." Doing so will launch the resubmission process, and you will be walked through the various questions that comprise the eCTA. Each of your coauthors will receive an email from the system requesting that they review and electronically sign the eCTA.

Any author agreement forms previously submitted will be superseded by the eCTA. During the resubmission process, you are welcome to remove these PDFs from EM. However, if you prefer, we can remove them for you after submission.

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 has adopted the use of the reVITALize definitions. Please access the obstetric and
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5. Specific rules govern the use of acknowledgments in the journal. Please note 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 response in the journal's electronic author 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 précis on the second page, for use in the Table of Contents. The précis is a single sentence of no more than 25 words that states the conclusion(s) of the report (i.e., the bottom line). The précis should be similar to the abstract's conclusion. Do not use commercial names, abbreviations, or acronyms in the précis. Please avoid phrases like "This paper presents" or "This case presents."

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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. Authors whose manuscripts have been accepted for publication have the option to pay an article processing charge and publish open access. With this choice, articles are made freely available online immediately upon publication. An information sheet is available at http://links.lww.com/LWW-ES/A48. The cost for publishing an article as open access can be found at http://edmgr.ovid.com/acd/accounts/ifauth.htm.
Dear Daniel,
Thank you for your email.
I agree with the edits.
What does it mean that it was suggested to be an editorial on the ECC?
Thank you,
Anna Palatnik

On Thu, Feb 21, 2019 at 2:15 PM Daniel Mosier <dmosier@greenjournal.org> wrote:

Dear Dr. Palatnik,

Thank you for submitting your revised manuscript. It has been reviewed and edited by the editor.

Please note the minor edits and deletions throughout. Please let us know if you disagree with any of these changes.

If you need to make any additional changes to the manuscript, please use the attached version of the paper. Leave the track changes on, and do not use the “Accept all Change” function prior to re-submission.

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 Wednesday, February 27th.

Sincerely,

-Daniel Mosier