

## Author's response to reviews

**Title:** Perinatal outcome in preterm premature rupture of membranes with Amniotic fluid index<5 , (AFI<5)

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The BioMed Central Editorial Team Thanks for your attention to my paper. The following statements are reply to questions of Mr. Frederick McElrath Item by items. The abstract corrected with adding of rate of antenatal infections. Material and methods: 1- All patients were singleton with pprom, without any maternal medical complications and advanced labor, Growth restriction, non-reassuring fetal status. 2- Gestational age in our patients was determined by ultrasound confirmed by LMP. 3- Purpose of advanced labor was cervical dilatation > 3cm & Growth restriction, was fetal weight < %10 percentile for gestational age . Neonatal sepsis was diagnosed by positive blood, urine, or cerebrospinal fluid cultures. Possible neonatal sepsis was diagnosed when two or more of the following criteria were present: white blood cell count less than 5000/mm<sup>3</sup>, polymorphonuclear count less than 1800/mm<sup>3</sup>, ratio of bands to total neutrophil count greater than 0.2. Early onset neonatal sepsis was defined as sepsis in a neonate with positive culture results or possible sepsis within the first 48 hours of life and prior to the antibiotic administration. The clinical diagnosis of chorioamnionitis was made in presence of two or more of the following criteria: maternal fever greater than 38C, maternal tachycardia (120 beats per minute or more), leukocytosis (greater than or equal to 20,000/mm<sup>3</sup> white blood cell), fetal tachycardia (greater than 160 beats per minute), uterine tenderness, and foul-smelling amniotic fluid. 4- The Ultrasound that determined the AFI was performed at admission. In this study data analyzed based on initial AFI. 5- The meaning of fetal distress was non-reassuring fetal status. Antibiotics were given post partum for C/S based on our protocol . 6- Placental pathology is not available now. 7- Difference 2 weeks between two group was not significant for logistic regression. In Results: Data's of length of stay in the hospital for mother and newborn were not available. Corrections of Reference and Article edition done, regarding of Mr. Von Dadelszen comments. I revised my article based on the comments of your reviewer's, Mr. Frederick McElrath and Mr. Von Dadelszen. Best regards Dr. Sedigheh Borna