

Author's response to reviews

Title: A Descriptive, Cross-sectional Study of Anogenital Distance in Human Male and Female Newborns

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Author's response to reviews: see over



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Philippe Grandjean and David Ozonoff
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Dear Drs. Granjean and Ozonoff:

Thank you very much for seeing that our manuscript was carefully reviewed by knowledgeable scientists. We are grateful for the chance to revise the manuscript in response to the reviewers' comments (revised version of manuscript accompanies this letter). A point by point response to the comments of the three reviewers begins on the following page.

I do not use Endnote or Reference manager. I assume that you will let me know if there is a fee for submitting a manuscript that does not use either system.

We look forward to your assessment.

Yours,

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Response to reviewers' comments

Drs. Main and Skakkebaek

Major comments

1. The reviewers suggested shortening of the manuscript. The version they reviewed was 2,050 words. *Environmental Health: A Global Access Science Source* does not have a short communication category of publication.
As described under item 3 below, we removed more than 6 sentences that the reviewers objected to (but other material was added to address other reviewer concerns).
The revised manuscript is 2079 words.
2. We have added a paragraph to the discussion that acknowledges what is known about ethnic differences in AGD measures (P 8, Discussion, second paragraph).
3. To shorten the discussion about potential use for studies on endocrine disruptors we removed 4 sentences (8 lines) from the introduction, 2 sentences from the Discussion (3 lines), and elsewhere removed several phrases mentioning hormonally active agents.
4. We agree completely with the reviewers. The personnel who did the field work in 1999, however, are no longer available. Others may benefit from our experience, despite its limitations, which are acknowledged in the report.
5. We have rewritten the sentence in question; the rewrite makes it clear that the implications suggested by the reviewer do not apply (P 10, L 5-6 from bottom).

Minor comments

1. We have completely redone the statistical analysis (in response to reviewer 3); the new methods are more standard and are explained.
2. We have revised Tables 1 and 2 so that no digits to the right of the decimal are presented for the anogenital distance measures.
3. We agree that the discussion of the two previous papers on AGD needed expansion and have done so (see new second paragraph of the Discussion, P 8).
4. All references to "clinical condition at the end of gestation" have been deleted.
5. We like the reviewers' suggestion about how to blind the observers. Our method, however, was probably good enough in achieving blinding (see below, last reviewer, item #4).
6. Information about the gestational age of the infants has been added to the methods section (P 5, L 2; and P 5, L 4 from bottom).
7. The previous reports presenting data on anogenital distance in human females raised questions about how best to adjust for overall body size but left the issue inadequately addressed. We think carefully considering the relation of overall body dimensions (and gestational age) to AGD is important for moving this field forward.
8. We believe that the adjusted results are of greatest interest, and in the adjusted model for females the coefficient for gestational age was far from being statistically significant. Thus, we think that making much of the difference between sexes would be an overinterpretation of the data.
9. See the response to item #6 above.

Dr. Swan

We have added a diagram (Figure 1), as suggested by the reviewer.

Dr. Weisskopf

1. We now present the results of an analysis of variance, done as suggested by the reviewer (P 7, L 5-10).
2. The first set of reviews (from Drs. Main and Skaakebaek) also commented that the statistics in this section were not clear. Therefore, we now use a much more standard and straightforward analysis of reliability, which gave results nearly identical to those presented previously, and is much easier to explain.
3. We have added numeric results to the abstract.
4. We now state how long on average the time interval was between measurements (P 5, L 2 from bottom).
5. We now make it clear in the table footnotes that the only adjustment variables were as described in the footnotes.

Editor's comments

We now provide the figures in an EPS format. We changed the title so that the study design comes after the colon. We have added complete addresses for the authors. We now use only Times New Roman font, except in the tables, where the Courier font is better for maintaining columniation in the bodies of the tables. We have added a list of abbreviations. We have shortened the title of Tables 3 and 4, and added material to the footnotes. The quotation marks have been removed from the Hospital name. The references have now had volume numbers in boldface type.