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## **REVIEWER'S REPORT**

Manuscript No.: IJAR- 50412

Date: 24/02/2025

Title: "Underwater Delivery: A Safe Birthing Option (Experience Sharing from Tertiary Care Hospital)"

Recommendation:	Rating	Excel.	Good	Fair	Poor
✓ Accept as it is	Originality		$\checkmark$		
Accept after minor revision Accept after major revision	Techn. Quality		$\checkmark$		
Do not accept ( <i>Reasons below</i> )	Clarity		$\checkmark$		
	Significance	$\checkmark$			

Reviewer Name: Dr. S. K. Nath

Date: 25/02/2025

### **Reviewer's Comment for Publication:**

The study is well-structured, with clear inclusion and exclusion criteria ensuring participant safety. The focus on low-risk pregnancies helps maintain consistency in the study population. The study offers valuable insights into the safety, benefits, and outcomes of underwater delivery in a clinical setting. Future studies should include participants from different socio-economic backgrounds and regions for broader applicability.

# **Reviewer's Comment / Report**

### Strengths

1. **Relevant and Timely Topic**: Water birth is an increasingly popular alternative birthing method. The study offers valuable insights into the safety, benefits, and outcomes of underwater delivery in a clinical setting.

2. Comprehensive Methodology: The study is well-structured, with clear inclusion and exclusion criteria ensuring participant safety. The focus on low-risk pregnancies helps maintain consistency in the study population.

3. **Thorough Outcome Analysis**: The research effectively analyzes maternal and fetal outcomes, covering key metrics such as duration of labor stages, perineal tears, birth weight, and neonatal complications. The use of a 5-point Likert scale to measure maternal satisfaction adds an important subjective dimension to the results.

4. Clear Presentation of Results: The results are presented with clear statistics, including percentages for birth weights, perineal tears, and gravidity distribution. Graphical data visualization enhances understanding, although some graphs could be better explained.

5. **Discussion is Well-Supported by Previous Studies**: The paper successfully compares its findings with existing literature, enhancing the credibility of its results.

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6. Ethical Considerations: Proper consent and counseling procedures for participants and family members were emphasized, aligning with ethical research practices.

### Areas for Improvement

1. **Sample Size Limitation**: The study was conducted on 180 participants, which is reasonable for a pilot study, but larger sample sizes would increase the validity and generalizability of the findings.

2. Limited Diversity of Participants: There is no mention of the participants' socio-economic background, ethnicity, or other demographic factors that could influence birthing outcomes.

3. Lack of a Control Group: The study could have benefited from a comparative analysis against traditional delivery methods to highlight the differences more clearly.

4. Formatting Issues and Clarity: Some sections contain typographical errors (e.g., inconsistent percentage formatting). Graphs lack clear legends and explanations, making it harder for readers to interpret the visual data independently.

5. Short-Term Outcome Focus: The study primarily focuses on immediate outcomes (e.g., birth complications, APGAR scores). A follow-up assessing long-term maternal and neonatal health outcomes would strengthen the findings.

6. **Statistical Analysis Depth**: The study would benefit from more detailed statistical tests (e.g., chi-square tests, regression analysis) to validate the significance of results.

7. **Discussion Depth**: While the discussion effectively ties back to existing research, it could delve deeper into explaining why certain outcomes (like low incidence of perineal tears) occurred and how the underwater environment might have influenced those results.

### **Suggestions for Improvement**

1. Expand Sample Size and Diversity: Future studies should include participants from different socioeconomic backgrounds and regions for broader applicability.

2. Add a Comparative Group: Including a group undergoing conventional delivery would allow for a more direct comparison of outcomes.

3. **Include Long-Term Follow-Up**: Tracking mother and child health for at least 6 months postpartum would offer valuable insights into long-term effects.

4. **Improve Data Visualization**: Enhance graph clarity with proper legends, axis labels, and detailed captions explaining the data.

5. **Refine Language and Grammar**: Minor grammatical and typographical errors should be addressed to improve readability.

6. **Deeper Statistical Analysis**: Incorporate advanced statistical methods to strengthen the reliability of the findings.