

Reply

Reply to Comment on Samim S, *et al.* “Maternal Obesity: Can Raising Awareness on Related Risks Improve the Pregnancy Outcomes? A Longitudinal Study among Moroccan Pregnant Women”. *Clinical and Experimental Obstetrics & Gynecology*. 2024; 51, 263

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We would like to thank the reader for their interest in our article and for taking the time to provide a detailed and thoughtful critique [1]. We appreciate the opportunity to clarify and respond to the points raised:

(1) Inclusion of Illiterate Participants

Our study [2] aimed to reflect real-life conditions in public health settings, particularly in Morocco, where a proportion of pregnant women have limited or no formal education. While the educational intervention included a brochure, it was designed to be highly accessible: approximately 80% of the content consisted of illustrations that conveyed the core messages visually, supported by verbal explanations during prenatal visits. This approach ensured that even participants with limited literacy could fully engage with the intervention.

(2) Pre-pregnancy (Body Mass Index) BMI Differences Between Groups

The difference in pre-pregnancy BMI between the two groups was the result of random allocation and occurred by chance. No stratification was performed at baseline, and although randomization helps reduce selection bias, imbalances in baseline characteristics can still occur, particularly in smaller samples. That said, the higher BMI in the intervention group may be viewed as a strength of the study, as it allowed us to evaluate the effectiveness of the intervention among women with a higher risk profile. Despite this initial difference, the intervention appeared to have a positive impact on several outcomes in this higher-risk group.

(3) Multiple Comparisons and Correction Methods

We acknowledge the concern regarding the lack of multiple testing corrections such as the Bonferroni or Benjamini-Hochberg procedures. However, due to the exploratory nature of our study and the limited sample size, we chose not to apply strict correction methods. These procedures, while statistically sound, may be overly conservative in small datasets and increase the risk of Type II errors.

We agree that future studies with larger cohorts should incorporate correction techniques to validate and extend our findings.

(4) Use of Fisher’s Exact Test

We appreciate the comment regarding the use of chi-square tests. We confirm that Fisher’s exact test was applied whenever the expected cell frequency was less than five, in accordance with statistical standards. This is clearly stated in the methodology section of our manuscript.

(5) Data Presentation and Typographical Errors

We thank the reader for highlighting potential inconsistencies in the data tables. These appear to be typographical discrepancies rather than analytical errors. We will carefully re-examine the tables and correct any inaccuracies identified to ensure the clarity and precision of the reported data.

In conclusion, we are grateful for the reader’s constructive feedback. Constructive scientific discussion helps improve the quality of research and encourages future developments in the field. We hope this response clarifies the concerns raised.

Author Contributions

SL, LM, and SS contributed to the drafting and critical revision of the reply. All authors read and approved the final version and agree to be accountable for all aspects of the work.

Ethics Approval and Consent to Participate

Not applicable.

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Conflict of Interest

The authors declare no conflict of interest.

References

- [1] Balci MF, Karaca İ. My concerns about the article “Maternal Obesity: Can Raising Awareness on Related Risks Improve Pregnancy Outcomes? A Longitudinal Study among Moroccan Pregnant Women”. *Clinical and Experimental Obstetrics & Gynecology*. 2025; 52: 37798.
- [2] Samim S, Loukid M, Lamtali S. Maternal Obesity: Can Raising Awareness on Related Risks Improve the Pregnancy Outcomes? A Longitudinal Study among Moroccan Pregnant Women. *Clinical and Experimental Obstetrics & Gynecology*. 2024; 51: 263. <https://doi.org/10.31083/j.ceog5112263>.