FM REVIEW 2016 25 COMMENTS

COMMENTS TO EDITOR: This essay describes one physician's successful efforts to breastfeed 4 children while happily pursuing her profession. Both reviewers liked it quite a bit, as do I, because it addresses in a personal, practical way how to "balance" (if such a thing were actually possible) the personal and the work life. Reviewer 2 makes some excellent suggestions, which I will reinforce. My main concern is that the essay does not come across as "Super-Mom," having the unintended effect of discouraging young women going into family (or simply medicine) because they feel they could never achieve what the author has. However, I'm confident it can be rewritten to emphasize that there are many paths up this particular mountain - and many rewards along the way.

COMMENTS TO AUTHOR: This is a lovely and important article about the nuts and bolts of being a Dr./Mom - or Mom/Dr., or better yet, for this season, "a nurturer." Both editor and reviewers think this is an important perspective to present, and we are eager to do so. However, we recommend some thoughtful revisions, following the lines of Reviewer 2. Please consider the following:

- 1) You have had remarkable success breastfeeding 4 kids. Kudos to you. However, while this has been your path, in the essay on the one hand you sometimes come across as Super-Mom having 4 children, much less breastfeeding them all is an awesome undertaking. On the other hand, as you rightfully acknowledge, you've had amazing help in the form of your husband, nanny, and (hopefully) supportive work environment, which are not always available to all working/breastfeeding physicians. The essay's strength is that it is true to your experience. But could you also acknowledge that there are many ways to proceed in motherhood and doctoring that are "legitimate" and rewarding? In this way, you will avoid inadvertently setting the bar too high for young women looking toward their future in medicine.
- 2) A related point is that, although it is wonderful that you endorse breastfeeding in your patients and have committed to nursing your own children until they are two, again you want to make sure that this does not come across as prescriptive. I know that is not your intent, but again explicitly recognizing that there are many configurations that lead to happy healthy babies and doctor/moms would be valuable.
- 3) In a related point, since this is a personal essay, please remove the WHO citation. Most family docs and most moms-to-be know the benefits of breastfeeding, so you do not need to "persuade" on this issue. Each mom-doctor who reads this essay is going to be weighing all these difficult choices for herself and her own circumstances.
- 4) I agree in part that the essay needs a bit clearer focus. I don't really think it's about being a woman in medicine i.e., sexual harassment, pay issues, difficulty rising on the institutional ladder etc. but about being a mom in medicine (which is a great theme). So please pay attention to this as your initial focus. Then, as Reviewer 2 points out, the primary focus is on being a breastfeeding mom and a practicing physician. This is another great focus, and the two complement each other perfectly. However, because these essays are so short, it also strikes me as good advice to cut the paragraphs of

"a life in the day" and choosing artwork - too tangential, although I understand you are trying to show yourself as a doctor as well as a mom.

- 5) I also support Reviewer 2's suggestion that you can beneficially provide more insight into how being a breastfeeding mom informs your interactions with patients about breastfeeding (this is a better link back to patient care than "day-in-the-life"). You already state early on that you encourage breastfeeding in your patients. Can you be a little more self-revealing? How does your personal experience and expertise inform your conversations with patients? What happens when a patient decides not to breastfeed?
- 6) Initially I found the title slightly confusing, but now I'm on board, although I'd suggest changing it to One Mom in Medicine etc.; or even One Breastfeeding Mom, which I think would prepare readers for what is to come.

Thank you for working with these recommendations. We look forward to your revised manuscript.

COMMENTS TO EDITOR II: Reviewers liked this paper initially but were concerned that the tone was unintentionally prescriptive (every doctor should nurse her children, preferably till two!). They also felt that the author came across (again unintentionally) as a bit of a super-hero. The author has addressed these concerns in her rewrite, qualifying her language, taking out WHO recommendations, and acknowledging some of her own early difficulties, and the necessity of lots of help from others. Unfortunately, in making her revisions, the essay lengthened from 1139 to 1275 words, and often lost its narrative thread. I've done line editing to reduce the word count to 1082, by reducing a lot of tangential details and anecdotes.

COMMENTS TO AUTHOR II: Thank you for your thoughtful and meticulous response to reviewer and editorial comments. We appreciate that you took these seriously and obviously made a dedicated effort to revise the manuscript in consideration of their concerns. The result is a much improved manuscript. We especially appreciate the qualifications you've added that make it clear this is your personal story and is not prescriptive for every woman in medicine.

As a result of your revisions, the manuscript mushroomed from 1139 to 1275 words. This is too long for a narrative essay; further, while much that you added was valuable, the essay often lost its narrative thread. Please look at the attached line edits, which reduce the word count to 1082 (more acceptable) and eliminate many tangential details and anecdotes. You do not have to accept these edits as written, but please consider both how to shorten the word count so it is closer to the 1000 word limit and how to keep your main points in focus.

The introductory material I felt still struggles with the mommy vs. woman in medicine. I continue to feel that the focus should be on the former rather than the latter, so I've tried to shape the material in this direction. The title I really like!

All in all, the essay is a lovely testament to your personal path. Now, appropriately, it does not go beyond that; but I am confident that young women physicians reading your story will be encouraged to chart their own course as mothers and as doctors

COMMENTS TO EDITOR III: The author has considerably shortened the ms (although it is over the limit by 84 words). Importantly, she has narrowed the focus so that she is not taking on the very large issue of "women in medicine" (equal pay, status, sexism, harassment, discrimination etc.) but the narrower focus of being a breastfeeding mother who is also a family doc. The essay is streamlined and focused. I expect many readers (women and men) will be interested in the author's story.

COMMENTS TO AUTHOR III:

Thank you for accepting suggested edits and making a few of your own. The essay now has a very clear through-line - being a breastfeeding mom and a family doc - while emphasizing that your story is a personal, not a prescriptive one. I expect that many journal readers (both men and women) will be interested in your journey; and that your experience will change some minds about what it is like to be a mother in medicine.

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