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COMMENTS TO AUTHOR:

You are so right that someone has to be first! Editors and reviewers agree that you have written a courageous essay that speaks out about your own experience (and by implication that of so many other women and physicians who are women), and says, eloquently, enough. Your message remains personal - you commit to doing a better job of caring for your women patients with attention, awareness, and sensitivity; and to raise your children in ways that are not sexist and misogynist - but it will surely resonate deeply with female and hopefully male readers of the journal.

The main critique is that we feel the essay can be shortened and tightened. As you know, we have rather strict constraints on length, and we'd like to see you make some judicious cuts to bring this closer to the 1000 word limit. The opening paragraph is strong, and sets an important context, but perhaps could be trimmed by a sentence or two. Similarly, the anecdotes are all quite compelling, but perhaps you can shorten each slightly without reducing its power. The most pertinent descriptions to our readers are those that occur in the 4th and fifth paragraphs, so perhaps you can briefly refer to the earlier examples and then highlight your experiences in the medical environment. The conclusion is similarly gripping, but again could have the same impact with fewer words. Perhaps you could consolidate the final paragraph with a few points borrowed from the third paragraph from the end?

These are all minor changes in a very significant contribution to this journal. We look forward through your work to joining a key conversation of our times. See attached file for additional suggestions.

COMMENTS TO EDITOR II: This essay by our former fellow Amanda Kost is both angry and brave. As a family physician, she is taking the MeToo movement to the healthcare setting. She shares personal instances of sexual assault and inappropriate behavior, and concludes with what she has learned as a mother and a physician. The essay is still long, although she has reduced the length by about 170 words, and I am comfortable with the length, as each anecdote adds power while also documenting the developmental spread of mistreatment. One potentially problematic aspect of the essay is the health implications of such encounters. The author questions whether depression, autoimmune, and other poorly understood diagnoses might be related to sexual assault. The research is not yet there, but she does provide a reference for this line of thinking, and it adds a highly relevant dimension to the essay which might be especially likely to provoke discussion among physician readers. I recommend acceptance.

COMMENTS TO AUTHOR II: Thank you for reducing the length of this essay, and for honing your message. I am sure your painful yet brave reflections, as well as your personal owning of how to better carry this message into the future as a mother and a physician will resonate with readers.