Authors' reply to
Mackie, Fiona L; Morris, R Katie; Kilby, Mark D

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Authors’ reply to: Letter to the Editor in response to ‘Parental attachment and depressive symptoms in pregnancies complicated by twin-twin transfusion syndrome: a cohort study’

Fiona L. Mackie¹*, R. Katie Morris²,³ and Mark D. Kilby⁴,⁵

Abstract
In this correspondence we thank the authors for highlighting the importance of our work, and agree with the limitations they have raised regarding performing this study.

Keywords: Twin twin transfusion syndrome, Parental attachment, Anxiety, Fetoscopic laser ablation, Mental health

Main text

Dear Editor

We thank Rameh et al. [1] for highlighting the importance of our work [2]. The limitations of our study, as stated by Rameh et al. are mentioned in our published article. The need to interpret our findings of the post-ablation and postnatal questionnaires with caution due to the low numbers was highlighted in our article. We agree that future research should explore the additional potential associations with anxiety, coping styles in times of stress, the parent’s own attachment style, and romantic attachment to their partner on parental attachment. Ideally these associations should be explored with validated assessment tools. Interviews with parents would give additional useful information and may improve follow-up data collection. Additionally future studies should be performed in larger cohorts which would require collaboration between treatment centres. We hope that our study will improve patient care by increasing health care professional and patient awareness of the need to risk assess and screen mothers and fathers going through a pregnancy complicated by twin-twin transfusion syndrome for mental health problems, and consequently enabling additional psychological support where needed.

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Authors’ contributions
FLM drafted the reply, RKM and MDK reviewed and revised the reply. FLM, RKM and MDK have approved the reply.

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Ethics approval and consent to participate
Not applicable.

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Consent for publication
Not applicable.

Competing interests
The authors declare that they have no competing interests.

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References

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