

Letter to Jerrold J. Heindel, Lesley A. Skalla, Bonnie R. Joubert, Caroline H. Dilworth, Kimberly A. Gray

Congratulations to “[Review of Developmental Origins of Health and Disease Publications in Environmental Epidemiology](#)” in “Reproductive Toxicology 2016”. The trend to more frequent (major) congenital malformations in the varenicline group compared to unexposed controls is interesting and also the similar rates in the NRT/B group, though affecting different organs. I was missing a comparison of NRT with controls (see <http://hpq.sagepub.com/content/12/2/215.short>), of Bupropion with controls and of any pharmaceutical aid (Varenicline or NRT or Bupropion) with controls. Unfortunately the exposed groups may be confounded by smoking and ETS.

All pharmaceutical support of smoking cessation seems to fail during pregnancy, therefore you will not find enough women for a study, who stopped smoking before pregnancy or during the first 3 weeks and continued to take one of the 3 aids, to compare them with pregnant women receiving counseling only (which should actually be the method of choice). But in larger cohorts you could account for continuation of smoking.

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