

Appendices

Table 1: Results for studies mentioning low birth weight (S=statistically significant, NS=not statistically significant, LBW=low birth weight, NA=not applicable)

Author, Year, Country Title	Study design, (Methodology/ SIGN rating)	Participant info	Outcomes Measured	Measure of Exposure/ Length of exposure	Results and Analysis	Confounders Measured
Arnetz, 2013, USA (data collected from Iraqis in USA) 1991 Gulf War Exposures and Adverse Birth Outcomes	Retrospective cross-sectional study, (one plus/ 2+)	n=307 (immigrated to US from Iraq pre-war=122 and post-war=185) (incl. male and female participants)	Lifetime prevalence of: congenital abnormalities, stillbirth, LBW, pre-term delivery, mean number of adverse outcomes	Study specific questionnaire/ Aug 1990-Feb 1991 (varied length of exposure to specific chemicals/ non-chemicals)	S: LBW and contact with smoke from oil well fires (OR 3.00, CI 1.25, 7.18 p<0.017), LBW and contact with contaminated water in local pond/ river or the Gulf (OR 3.87, CI 1.3, 11.8, p<0.028)	Smoking, sex, income, health insurance, education, employment, ethnicity
Bakken, 2015, Norway Immigrants from conflict-zone countries: an observational comparison study of obstetric outcomes in a low-risk maternity ward in Norway, Somalia/ Kosovo/ Iraq/ Afghanistan	Prospective cohort study, (one plus/ 2+)	n=7408 Somalia (n = 278), Iraq (n = 166), Afghanistan (n = 71), and Kosovo (n = 67) and ethnic Norwegians (n = 6,826)	Onset of labour, delivery/ post birth complications, gestational age, pre/ post term delivery, APGAR, birth-weight, transfer to NICU (high-dependency unit)	Country of birth/ NA	S: Somali mothers compared with ethnic Norwegians: Small for Gestational Age (OR 3.97, CI 2.73–5.77)	Time in Norway, age, educational level, parity, previous still birth, previous CS, health issues before pregnancy, cigarette smoking (at start and end of pregnancy)
Bodalal, 2014, Libya Pregnancy outcomes in Benghazi, Libya, before and during the armed conflict in 2011	Mixed retrospective and prospective interrupted time series (one plus/ 2-)	n=13,031 (Feb-May 2011 during active fighting n=7,096 and between October to December 2010 (the months immediately before the war) n=5,935)	Birth weight, preterm birth	Dates of delivery/ Feb-May 2011	S: LBW pre=8.5%, during=10.1% (p<0.01.) Peaks of preterm births coincided with most intense conflict	None reported

<p>Bralić, 2006, Croatia</p> <p>Secular Birth Weight Changes in Liveborn Infants before, during, and after 1991-1995 Homeland War in Croatia</p>	<p>Interrupted time series (one plus/ 2-)</p>	<p>n=959,591 (pre-war 1983-1989 n=384,367, during the war (1991-1995) n= 226,226 and post-war (1996-2003) n=3448,998. Mothers who lived in Croatia at least 1yr before delivery. Covered infants born in all health facilities in Croatia. Liveborn infants</p>	<p>Birth weight</p>	<p>Given birth in Croatia during war/ 1991-1995</p>	<p>S: Infants born 2500-3499g (normal weight) decreased during war (RR 1.073; 95% CI, 1.046-1.101, p<0.001); This continued post-war (rate ratio, 1.126; 95% CI, 1.110-1.156, p<0.001). War: infants weighing 2000-2499 g (underweight) increased (P<0.001)</p>	<p>None reported</p>
<p>Makhseed, 1996, UK (Kuwaiti authors)</p> <p>Post-war Changes in the Outcome of Pregnancy in Maternity Hospital, Kuwait, First Gulf War</p>	<p>Interrupted time series (one plus/ 2-)</p>	<p>No final figure given but: 16,023 in 1989 and 8,653 in 1992</p>	<p>Abortion rate, stillbirth rate, early neonatal and perinatal mortality rate, pre-term delivery rate, birth weight of newborn babies, multiple pregnancy and congenital anomalies</p>	<p>Babies from 1992 in the hospital were presumed to be born to mothers who had experienced the war/ NA</p>	<p>S: Increased LBW rate pre-war=6%, war=7.8% (p<0.001)</p>	<p>None reported</p>
<p>Mansour, 2011, USA (conducted in USA with Palestinian data)</p> <p>Armed conflict and birth weight: Evidence from the al-Aqsa Intifada, Palestine</p>	<p>Retrospective Cohort study (one plus/ 2+)</p>	<p>n=1,244 (when restricted to sibling sample n=501)</p>	<p>Birth weight, died within 1-2 months of birth, pregnancy complications, anaemia</p>	<p>No. of Palestinian deaths by Israeli security forces in district of residence in excess of expected mortality rates=exposure/ NA</p>	<p>S: An additional fatality in the region 2–0 months before birth associated with decreased birth weight of 2.1 g in the full sample (p<0.05)</p>	<p>Marital status, labour force participation, district of residence, pre-natal visits, socio-economic/ refugee status among others, lived in the same community since Sept 2000, husbands education, parity</p>

<p>Maric, 2009, USA (Serbian authors)</p> <p>Prenatal stress during the 1999 bombing associated with lower birth weight—a study of 3,815 births from Belgrade, NATO bombing of Yugoslavia</p>	<p>Retrospective cross-sectional study (one plus/ 2+)</p>	<p>n=3,815 (1996 control n=1251, Mar 24th 1999-Mar 23rd 2000 exposed n=1,198, 2003 control n=1,366)</p>	<p>Complications of pregnancy/ delivery. Infant weight, BMI</p>	<p>Gave birth in Belgrade within a year of the first bombing/ 77 days</p>	<p>S: LBW (mean difference=86 g, 95% CI= 67-104, p<0.001) NS: Conflict intensity and use of medical services, prenatal care visits, anaemia or education</p>	<p>Length, head circumference, Maternal variables: age, marital status, education, place of residence Pregnancy variables: number/ type of deliveries, gestational age</p>
<p>Skokic, 2010, UK (Bosnian authors)</p> <p>Association of Low Birth Weight Infants and Maternal Sociodemographic Status in Tuzla Canton during 1992–1995 War Period in Bosnia and Herzegovina</p>	<p>Interrupted time series (retrospective collection, (one plus/ 2-)</p>	<p>n=108,316 (1988-1991=23,194, 1992-1995=18,302, 1996-2009=66,820) age 15-43</p>	<p>LWB, birth length, gestational age</p>	<p>No explanation: just the fact that the babies were born in the canton in the time period/ NA</p>	<p>S: Increased % LBW: pre=3.6 war=7.5 (RR=2.129, CI 1.950-2.324, p<0.001) post=2.8 (RR=2.826, CI 2.630-3.036, p<0.001) Increased % of term infants with LBW: pre-war=1.8 war=4.5 post=1.1 (p<0.001). LBW infants average BW in grams: pre=2,063.49 war=1,857.52 post=2,015.85 (p<0.0003 and 0.0001 respectively)</p>	<p>Socio-economic status, maternal examinations, care in different trimesters, maternal age</p>
<p>Skokić, 2006, UK (Bosnian authors)</p> <p>Perinatal and Maternal Outcomes in Tuzla Canton during 1992-1995 War in Bosnia and Herzegovina</p>	<p>Interrupted time series (retrospective collection), (one plus/ 2-)</p>	<p>n=59,707 (1988-1991=23,194, 1992-1995=18,302, 2000-2003=18,211)</p>	<p>Perinatal mortality, maternal mortality, stillbirths, early neonatal deaths, gestational age, birth weight, body length</p>	<p>No explanation: just the fact that the babies were born in the canton in the time period/ NA</p>	<p>S: Increased % LBW <2500g: pre=3.6 war=7.5 (RR:2.11, CI 1.908-2.331) and post=2.3 (RR=3.931 CI 3.427-4.509), average birth weight= pre=3,400 war=3,200 post=3,500 (p<0.001)</p>	<p>Health care professional attendance at birth</p>

Table 2: Results for studies mentioning prematurity and stillbirth (S=statistically significant, NS=not statistically significant, LBW=low birth weight)

Author, Year, Country Title	Study design, (Methodology/ SIGN rating)	Participant info	Outcomes Measured	Measure of Exposure/ Length of exposure	Results and Analysis	Confounders Measured
Arnetz, 2013, USA (data collected from Iraqis in USA) 1991 Gulf War Exposures and Adverse Birth Outcomes	Retrospective cross-sectional study, (one plus/ 2+)	n=307 (immigrated to US from Iraq pre-war=122 and post war=185) (incl. male and female participants)	Lifetime prevalence of: congenital abnormalities, stillbirth, LBW, preterm delivery, mean number of adverse outcomes	Study specific Questionnaire/ Aug 1990-Feb 1991 (varied length of exposure to specific chemical/ non-chemicals)	S: Stillbirth % pre-war=6.0, post war=21.6 (p<0.01), NS: preterm birth pre-war/ post-war (but significant if exposed to generators or contaminated water p<0.013 and p<0.022)	Smoking, sex, income, health insurance, education, employment, ethnicity
Bakken, 2015, Norway Immigrants from conflict-zone countries: an observational comparison study of obstetric outcomes in a low-risk maternity ward in Norway/ Somalia/ Kosovo/ Iraq/ Afghanistan	Prospective cohort study, (one plus/ 2+)	n=7,408 (Somalia (n = 278), Iraq (n = 166), Afghanistan (n = 71), and Kosovo (n = 67) and ethnic Norwegians (n = 6,826)	Onset of labour, delivery/ post birth complications, gestational age, pre/ post term delivery, APGAR, birth weight, transfer to NICU (high-dependency unit)	Country of birth/ NA	S: Somalian women increased post term birth (OR: 1.93, CI 1.29-2.90), NS: change in late preterm birth	Time in Norway, age, educational level, parity, previous still birth, previous C Section, health issues before pregnancy, cigarette smoking (at start and end of pregnancy)
Bodalal, 2014, Libya Pregnancy outcomes in Benghazi, Libya, before and during the armed conflict in 2011	Mixed retrospective and prospective interrupted time series, (one plus/ 2-)	n=13,031 (Feb-May 2011 during active fighting n=7,096 and between October to December 2010 (the months immediately before the war) n = 5,935	Birth weight, preterm birth	Dates of delivery/ Feb-May 2011	S: Premature delivery pre-war=2.5 during war=3.6 (p<0.001)	None reported

<p>Keren, 2015, UK (Israeli authors)</p> <p>The complex impact of five years of stress related to life-threatening events on pregnancy outcomes: A preliminary retrospective study, Israel 2000-2008</p>	<p>Retrospective cohort study, (one plus/ 2+)</p>	<p>n=1,314 (S-E city=711, A-UE city=605)</p>	<p>Pregnancy complications, week of amniotic fluid rupture and delivery, premature contractions, APGAR score and head circumference</p>	<p>City S-E was regularly (almost daily) exposed to missile attacks between 2003-2008. More sporadically between 2000-2002/ Not specified: variable depending on when given birth</p>	<p>S: Prematurity rate in bombed city (p=0.031)</p>	<p>Maternal age, ordinal number of pregnancy and delivery</p>
<p>Makhseed, 1996, UK (Kuwaiti authors)</p> <p>Post-war Changes in the Outcome of Pregnancy in Maternity Hospital, Kuwait, First Gulf War</p>	<p>Interrupted time series, (one plus/ 2-)</p>	<p>No final figure given but: 16,023 in 1989 and 8,653 in 1992</p>	<p>Abortion rate, stillbirth rate, early neonatal/ perinatal mortality rate, preterm delivery rate, birth weight, multiple pregnancy and congenital anomalies</p>	<p>Babies from 1992 in the hospital were presumed to be born to mothers who had experienced the war/ NA</p>	<p>NS: Stillbirth and prematurity rates</p>	<p>None reported</p>
<p>Maric, 2009, USA (Serbian authors)</p> <p>Prenatal stress during the 1999 bombing associated with lower birth weight— a study of 3,815 births from Belgrade, NATO bombing of yugoslavia</p>	<p>Retrospective cross-sectional study, (one plus/ 2+)</p>	<p>n=3,815 (1996 control n=1251, Mar 24th 1999-Mar 23rd 2000 exposed n=1,198, 2003 control n=1,366)</p>	<p>Complications of pregnancy/ delivery. Infant weight, BMI</p>	<p>Gave birth in Belgrade within a year of the first bombing/ 77 days</p>	<p>NS: Prematurity rates</p>	<p>Length, head circumference, Maternal variables: age, marital status, education, place of residence Pregnancy variables: number/ type of deliveries, gestational age</p>

<p>Pavlinac, 2008, Croatia</p> <p>Influence of the wars in Croatia and Bosnia and Herzegovina on the incidence and outcome of singleton premature births in the Split University Hospital</p>	<p>Retrospective interrupted time series, (one plus/ 2-)</p>	<p>n=2,358</p>	<p>Gestational age, fetal presentation, birth weight, trophicity, pregnancy related complications, singleton preterm birth rate, stillbirth rate, early neonatal mortality, perinatal mortality, fetal hypotrophy</p>	<p>Gave birth in the hospital in Split/ NA</p>	<p>S: Singleton preterm rates % pre-war=6.19 war=5.02, post-war=4.74 (p<0.001). Singleton stillbirth rates pre=15.7, war=14.2, post=9.64 (p<0.001). Stillbirth among premature labours: pre=193, war 226, post=134 (p<0.001)</p>	<p>Age, parity, Year of birth, obstetric data, mode of delivery, total number of births, singleton births</p>
<p>Skokić, 2006, UK (Bosnian authors)</p> <p>Perinatal and Maternal Outcomes in Tuzla Canton during 1992-1995 War in Bosnia and Herzegovina</p>	<p>Interrupted time series (retrospective collection), (one plus/ 2-)</p>	<p>n=59,707 (1988-1991=23,194, 1992-1995=18,302, 2000-2003=18,211)</p>	<p>Perinatal mortality, maternal mortality, stillbirths, early neonatal deaths, gestational age, birth weight, body length</p>	<p>No explanation: just the fact that the babies were born in the canton in the time period/ NA</p>	<p>S: Prematurity %: Pre=11.1. War=12.5, post=9.5 (p<0.001). NS: Stillbirth</p>	<p>Health care professional attendance at birth</p>
<p>Valente, 2015, UK (conducted in the UK with Nepali data)</p> <p>Civil conflict, gender-specific fetal loss, and selection: A new test of the Trivers–Willard hypothesis, Nepal civil war 1996-2006</p>	<p>Interrupted time series, (one plus/ 2+)</p>	<p>n=11,572 pregnancies (including 596 miscarriages, 130 stillbirths and 10,846 live births)</p>	<p>Miscarriage, stillbirth, size of baby at birth as reported by the mother, neonatal mortality, dates of all births and deaths of any live born child and dates of end/ duration of other pregnancies</p>	<p>Districts mothers gave birth in given conflict intensity ratings/ NA</p>	<p>NS: Stillbirth</p>	<p>Pregnancy order, maternal age, gender</p>

Table 3: Results for studies mentioning all other outcomes (S=statistically significant, NS=not statistically significant, SA=spontaneous abortion)

Author, Year, Country Title	Study design, (Methodology/ SIGN rating)	Participant info	Outcomes Measured	Measure of Exposure/ Length of exposure	Results and Analysis	Confounders Measured
Arnetz, 2013, USA (data collected from Iraqis in USA) 1991 Gulf War Exposures and Adverse Birth Outcomes	Retrospective cross-sectional study, (one plus/ 2+)	n=307 (immigrated to US from Iraq pre-war=122 and post war=185) (incl. male and female participants)	Lifetime prevalence of: congenital abnormalities, stillbirth, LBW, preterm delivery, mean number of adverse outcomes	Study specific Questionnaire/ Aug 1990-Feb 1991 (varied length of exposure to specific chemical/ non-chemicals)	S: Congenital birth defects if exposed to diesel/ petrochemical fumes (OR 17 (CI1.5-192.76, p<0.021)) NS: Change in total congenital abnormalities	Smoking, sex, income, health insurance, education, employment, ethnicity
Bakken, 2015, Norway Immigrants from conflict-zone countries: an observational comparison study of obstetric outcomes in a low-risk maternity ward in Norway/ Somalia/ Kosovo/ Iraq/ Afghanistan	Prospective cohort study, (one plus/ 2+)	n=7,408 Somalia (n= 278), Iraq (n = 166), Afghanistan (n = 71), and Kosovo (n = 67) and ethnic Norwegians (n = 6,826)	Onset of labour, delivery/ post birth complications, gestational age, pre/ post term delivery, APGAR, birth-weight, transfer to NICU (high-dependency unit)	Country of birth/ NA	S: Somalian women increased meconium-stained liquor (OR 2.39, CI 1.76–3.25), NS: placental abruption, Placenta previa, perineal rupture, postpartum bleeding >500 mL, late preterm birth, umbilical cord complications, neonatal jaundice	Time in Norway, age, educational level, parity, previous still birth, previous C Section, health issues before pregnancy, cigarette smoking (at start and end of pregnancy)
Keren, 2015, UK (Israeli authors) The complex impact of five years of stress related to life-threatening events on pregnancy outcomes: A preliminary retrospective study, Israel 2000-2008	Retrospective cohort study, (one plus/ 2+)	n=1,314 (SE city=711, A-UE city=605)	Pregnancy complications, week of amniotic fluid rupture and delivery, premature contractions, APGAR score and head circumference	City S-E was regularly (almost daily) exposed to missile attacks between 2003-2008. More sporadically between 2000-2002/ Not specified: variable depending on when given birth	S: Premature rupture of membranes (p=0.029)	Maternal age, ordinal number of pregnancy and delivery

<p>Makhseed, 1996, UK (Kuwaiti authors)</p> <p>Post-war Changes in the Outcome of Pregnancy in Maternity Hospital, Kuwait, First Gulf War</p>	<p>Interrupted time series, (one plus/ 2-)</p>	<p>No final figure given but: 16,023 in 1989 and 8,653 in 1992</p>	<p>Abortion rate, stillbirth rate, early neonatal/ perinatal mortality rate, preterm delivery rate, birth weight, multiple pregnancy and congenital anomalies</p>	<p>Babies from 1992 in the hospital were presumed to be born to mothers who had experienced the war/ NA</p>	<p>S: Cardiopulmonary ($p<0.001$) and alimentary anomalies ($p<0.05$) NS: absolute rise in congenital abnormalities rates</p>	<p>None reported</p>
<p>Maric, 2009, USA (Serbian authors)</p> <p>Prenatal stress during the 1999 bombing associated with lower birth weight—a study of 3,815 births from Belgrade, NATO bombing of Yugoslavia</p>	<p>Retrospective cross-sectional study (one plus/ 2+)</p>	<p>n=3,815 (1996 control n=1251, Mar 24th 1999–Mar 23rd 2000 exposed n=1,198, 2003 control n=1,366).</p>	<p>Gestational age, complications of pregnancy/ delivery. Infant variables: weight, BMI</p>	<p>Gave birth in Belgrade within a year of the first bombing/ 77 days</p>	<p>NS: Breech birth, cord around neck, premature amniotic rupture, Rh incompatibility, imminent fetal asphyxia, malformations, body length</p>	<p>Length, head Circumference, Maternal age, marital status, education, place of residence, Pregnancy variables: number/ type of deliveries</p>
<p>Pavlinac, 2008, Croatia</p> <p>Influence of the wars in Croatia and Bosnia and Herzegovina on the incidence and outcome of singleton premature births in the Split University Hospital</p>	<p>Retrospective interrupted time series, (one plus/ 2-)</p>	<p>n=2,358</p>	<p>gestational age, fetal presentation, birth weight, trophicity, pregnancy related complications, singleton preterm birth rate, stillbirth rate, early neonatal mortality, perinatal mortality, fetal hypotrophy</p>	<p>Gave birth in the hospital in Split/ NA</p>	<p>S: Among singleton births: early neonatal mortality decreased: pre 12.7 war =10.6 post=7.7 (n=107, $p<0.001$). Among singleton preterm births: early neonatal mortality rate %: pre=209 war=215 post=156 ($p=0.020$) NS: Among preterm singletons: pre-eclampsia or hydroptic newborns</p>	<p>Age, parity, Year of birth, obstetric data, mode of delivery, total number of births, singleton births</p>
<p>Skokic, 2010, UK (Bosnian authors)</p> <p>Association of Low Birth Weight Infants and Maternal Sociodemographic Status in Tuzla Canton during 1992–1995 War Period in Bosnia and Herzegovina</p>	<p>Interrupted time series (retrospective collection), (one plus/ 2-)</p>	<p>n=108,316 (1988-1991=23,194, 1992-1995=18,302, 1996-2009=66,820) age 15-43</p>	<p>LWB, birth length, gestational age</p>	<p>No explanation: just the fact that the babies were born in the canton in the time period/ NA</p>	<p>S: Early neonatal deaths per 1000 of LBW infants: pre=2.1 war=5.8 ($p<0.001$) post=2.4 ($p<0.448$). Perinatal mortality per 1000 of LBW infants: pre=6.2 war=10.8 post=5.2 ($p<0.05$ for both)</p>	<p>Socio-economic Status, maternal examinations, care in different trimesters, maternal age</p>

<p>Skokić, 2006, UK (Bosnian authors)</p> <p>Perinatal and Maternal Outcomes in Tuzla Canton during 1992-1995 War in Bosnia and Herzegovina</p>	<p>Interrupted time series (retrospective collection), (one plus/ 2-)</p>	<p>n=59,707 (1988-1991=23,194, 1992-1995=18302, 2000-2003=18,211))</p>	<p>Perinatal mortality, maternal mortality, stillbirths, early neonatal deaths, gestational age, birth weight, body length</p>	<p>No explanation: just the fact that the babies were born in the canton in the time period/ NA</p>	<p>S: Maternal mortality/100,000: pre=39 war=65 post=12 (p<0.001 for both)</p>	<p>Health care professional attendance at birth</p>
<p>Valente, 2015, UK (conducted in the UK with Nepali data)</p> <p>Civil conflict, gender-specific fetal loss, and selection: A new test of the Trivers–Willard hypothesis, Nepal civil war 1996-2006</p>	<p>Interrupted time series, (one plus/ 2+)</p>	<p>n=11,572 pregnancies (including 596 miscarriages, 130 still-births and 10,846 live births)</p>	<p>Miscarriage, stillbirth, size of baby at birth as reported by the mother, neonatal mortality, dates of all births and deaths of any live born child and dates of end/ duration of other pregnancies</p>	<p>Districts mothers gave birth in given conflict intensity ratings/ NA</p>	<p>NS: Miscarriage: controlled for maternal heterogeneity</p>	<p>Pregnancy order, maternal age, gender</p>
<p>Wainstock, 2013, USA (Israeli authors)</p> <p>Prenatal Stress and Risk of Spontaneous Abortion, Gaza: April 2001 and December 2008 rocket launches in Siderot</p>	<p>Retrospective cohort study, (one plus/ 2+)</p>	<p>n=3,488 (n=1,345 exposed, n=2,143 unexposed)</p>	<p>Spontaneous abortion, pregnancy outcomes, and other</p>	<p>Number of rocket alarms to which women were exposed/ Variable</p>	<p>S: SA (6.9% versus 4.7%, adjusted odds ratio = 1.59, 95% CI = 1.13-2.03, p = .005)</p>	<p>Obstetrics history of the mother, medical characteristics, pregnancy outcomes, and other known risk factors, age, intensity of attacks preconception</p>

Appendix X

Study Discarded (agreement between authors)	Reason
Ahamadani: Perinatal health care in a conflict-affected setting: evaluation of health-care services and newborn outcomes at a regional medical centre in Iraq, 2014	No reference to before/after populations
Ahuka: The effects of armed conflict on pregnancy outcomes in the Congo, 2004	Editorial
Arnetz: Gulf war exposures and pregnancy outcomes: a retrospective of Iraqi immigrants, 2012	Poster
Balic: Impact of war on maternal mortality, 1999	Conference paper
Bodalal: The effect of armed conflict on spontaneous abortions in Benghazi - Libya, 2011	Conference paper
Brentlinger: Pregnancy outcomes, site of delivery, and community schisms in regions affected by the armed conflict in Chiapas, Mexico, 2005	No military involvement
Cutts: Child and Maternal Mortality during a Period of Conflict in Beira City, Mozambique, 1996	War predominantly relates to 1980s
DeJong: The safety and quality of childbirth in the context of health systems: mapping maternal health provision in Lebanon, 2010	Outside of dates
Dossa: Fistula and other adverse reproductive health outcomes among women victims of conflict related sexual violence, 2014	No statistical analysis
Falb: Symptoms associated with pregnancy complications along the thai-burma border: the role of conflict violence and intimate partner violence, 2014	War started in 1948, pre 1990 exposure to same war
Fatusic Z: The influence of the war on perinatal and maternal mortality in Bosnia and Herzegovina, 2005	Poor methodology and limited statistical analysis
Faustic J: Perinatal mortality during fifteen-year period in Tulza Canton, Bosnia and Herzegovina, 2012	Descriptive, not analytical
Haggaz: High perinatal mortality in Darfur Sudan, 2008	Letter
Hakeem: Adverse birth outcomes in women exposed to Syrian chemical attack, 2015	Editorial
Hudic: Incidence and causes of maternal death during 20-year period (1986–2005) in Tuzla Canton, Bosnia and Herzegovina, 2011	Descriptive, not analytical
James DC: Terrorism and the pregnant woman, 2005	Editorial
Jenny K: Giving birth in the dust: the Palastian experience, 2005	Editorial
Keren: The impact of stress related to war on pregnancy outcomes, 2012	Abstract for poster
Kottegoda: Reproductive health concerns in six conflict-affected areas of Sri Lanka	Not specific to pregnancy/war
Krpina, Increase in the frequency of premature births in a war affected area (Zadar, Croatia)	Letter
Kulane A, Health in a fragile state: a five-year review of mortality patterns and trends at Somalia's Banadir Hospital (not specific to pregnancy outcomes, v little info on it)	Not specific to pregnancy outcomes
Makhseed: Post-Invasion Change in the Trend of Complications and Outcome of Pregnancy in Maternity Hospital Kuwait from 1981 to 1995, 1999	Descriptive, not analytical
Materson: Assessment of reproductive health and violence against women among displaced Syrians in Lebanon, 2014	No comparator group or real statistical analysis, only descriptive (no sense of pre/during/post war OR exposed/not exposed)
Mikulandra: Perinatal mortality in twins in a south croatian area before and during 1991/93 war, 1996	Only abstract printed
Moro: Birthweight and breast feeding of babies born during the war in one municipal area of Sarajevo, 1995	Descriptive, not analytical

Naim: Birth Defects in Gaza: Prevalence, Types, Familiarity and Correlation with Environmental Factors, 2012	Poor methodology and too little information about the population
Radonicic: Perinatal outcomes during 1986–2005 in Tuzla Canton, Bosnia and Herzegovina, 2008	Unclear sample
Rajab, K: Incidence of spontaneous abortion in Bahrain before and after the Gulf War of 1991, 2000	Bahrain not directly exposed
Saulnier: A systematic review of the health effects of prenatal exposure to disaster, 2015	Only war study in dates is already included
Schenker: Did anxiety during the Gulf War cause premature delivery?	Poor methodology
Schenker: The effect of anxiety state during the Gulf War on the course of labour, 1993	Letter
Simetka: Obstetrics during Civil War: Six Months on a Maternity Ward in Mallavi, Northern Sri Lanka, 2002	War started in 1983
Simic: Nutritional effects of the siege on new born babies in Sarajevo, 1995	Poor methodology, no confounders and referencing
Solberg: Intimate moments: The lives of Afghan women, 2012	Editorial
Southall: Armed conflict women and girls who are pregnant, infants and children; a neglected public health challenge. What can health professionals do?, 2011	Editorial
Stankovic: Incidence of micronuclei in pregnant women and cord blood samples before and after the bombing of Serbia, 2004	Not linked to pregnancy outcomes
Sumanovic: Incidence of Major Congenital Malformations in a Region of Bosnia and Herzegovina Allegedly Polluted with Depleted Uranium, 2003	No true comparison between exposed and non-exposed
Swatzyna: The effects of disaster on women's reproductive health in developing countries, 2013	No true comparison between exposed and non-exposed
Tomic: Hypertensive Disorders in Pregnancy: A 5-year Analysis of the Wartime and Postwar Period in South-Western Region of Bosnia and Herzegovina, 2009	All data is analysed together. Whilst it compares the rates of hypertensive disorders complicating pregnancies in 1995 (last year of the war) to the rest of the period it does not give any information on the sample in 1995, or a break down of the other years.
Webster: Questions raised over Iraq congenital birth defects study, 2013	Editorial
Webster: Roots of Iraq's maternal and child health crisis run deep, 2013	Editorial