Letter to the Editor

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Dear Editor

I read the article by Kompally et al. published in your journal (Volume 71| Number 3) critically and with interest.

I would like to make the following comments on this article and would like to draw the attention of the authors and the editors to certain issues, listed below.

1. For any original article, in the introduction, the authors have the responsibility to clarify the aims and objectives of the study to guide the readers into the article. Unfortunately in this article it was not mentioned anywhere.
2. In the materials and methods section the inclusion criteria for the cases were not mentioned. The authors included all the patients with varicose veins in their study. Normally a patient with varicose veins should have some indications for surgery. This sort of inclusion without any criteria is extremely misleading for the readers. It would be interesting to know the number of patient subgroups in this study according to the indications for surgery.
3. In the abstract, in the results section it has been mentioned that surgery was preferred for 34 patients and remaining 6 patients underwent conservative treatment. I think the term preferred is quite vague. It was not clear who preferred the surgery, the surgeon or the patient. There should be some defined exclusion criteria for the operative management.
4. I think the authors also need to mention the study type and study design for an original research article.
5. The CEAP classification has been used by the authors to assess the patients. It would have been helpful for the readers to have the classification in the article as this is not used by most of the surgeons.
6. The authors mention that in India we do not have a lot of data published on varicose vein surgery. We do not have any epidemiological data for our population. In this context the time period of this study, which has not been given in the article, would have helped the readers to have at least an idea about the incidence of this entity and the magnitude of the problem in a specific region in our country. I also noted that the authors also omitted the basic epidemiological data like age and sex distribution..
7. There were three patients in the study group who did not have the operation due to their pregnant state. It would be interesting to know what happened to them later in the follow up and whether the authors would consider them for surgical treatment later or not.
8. I am a bit curious to know why all the patients in this study, who came for follow up, underwent color Doppler study for assessment. This is not normally practiced even by the vascular units.
9. I would like to know the reason for not doing stab avulsion phlebectomy for the varicose veins in the leg as this is almost routinely done in the west. The authors also did subfascial ligation, which is also not routinely done by most surgeons. The authors also did not mention whether they operated on bilateral varicosities at the same time or not.
10. The authors noted the immediate success of the operation on the day of operation itself. I am extremely curious about the assessment tool used by the authors for evaluation of the result of surgery immediately after the operation.

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11. In the conclusion of this article the authors mention only about some basic surgical principles such as the importance of thorough clinical assessment, careful preoperative evaluation and close postoperative follow-up. This is applicable to all surgical cases. At the end of an original research article the authors should offer the readers something beyond this as the take home message.

I have raised the above issues because I felt that the article can be quite misleading especially to the trainee surgeons without the above clarifications. I keenly look forward to the responses from the authors.

Yours sincerely

Dr. Sandip Kumnar Halder