



Wrist arthroscopy: Is it really effective for all common wrist disorders?

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Dear editor,

I was very delighted to read one of your latest issues (Ann Med Res 2021;28(12)) with various articles about the different aspects of medicine and I was also pleased that among the authors were many faculties from multiple disciplines. I read, with interest, the study by Koroğlu et al. (Ann Med Res 2021;28(12):2150-3) analyzing the role of arthroscopy in the treatment of common wrist disorders. I had several concerns about the article that I wanted to mention in this sincere letter. First, the wrist arthroscopy, as a diagnostic and therapeutic tool, can be used in a very wide range of etiologies [1, 2]. In the literature, different arthroscopic portals and different arthroscopic techniques have been described for this wide range of wrist pathologies. Hence, I think that analyzing all these pathologies in a single data pool with the same outcome measures has a great risk of bias. Second, almost all the wrist pathologies mentioned in the study have different stages within themselves which make comparative analysis somehow impossible [3]. Additionally, there was no data available about scaphoid nonunions and scapholunate instabilities in the results section. I think the outcomes of these pathologies also should be added into the results section and all should have been described in detail with comparable wrist pathologies. Finally, the literature contains numerous studies analyzing the effectiveness of wrist arthroscopy for different etiologies with a variety of outcome measures [4]. The study had only 2 parameters (Q-DASH and Mayo score). Q-DASH is a questionnaire and a subjective outcome measure. Mayo score only partially evaluates the physical condition. I believe objective

outcome measures including radiologic evaluation should have been included in the study [5]. In short, although well-designed, I believe that, the study group should be meticulously composed with well-defined inclusion and exclusion criteria, the objective outcome measures has to be clarified, if possible with a contribution from the literature and again, methodological details about the physical examination should be added for the final conclusion.

References

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Author Response

Dear editor,

We want to thank them for their comments.

In current article we just aimed to report that wrist arthroscopy can be used for common wrist disorders diagnosis and treatment. We did not compare the results of different stages of diseases. In results section we did not add results of the diseases with fewer patients like scaphoid nonunion and scapholunate instability to shorten article. Our future plan with wrist arthroscopy is report the results of treatment of common wrist pathologies separately with larger series.

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