In Response to Comments on "Could the Hanging Drop Technique be an Alternative Technique to Loss of Resistance in Cervical Epidural Injections?"

TO THE EDITOR:

We read with interest the comments made by Ling Ye, MD (1), on our article titled "Could the Hanging Drop Technique Be an Alternative to the Loss of Resistance Technique in Cervical Epidural Injections?". We appreciate the opportunity to clarify several points.

We routinely assess all patients undergoing interventional pain procedures using the Visual Analog Scale (VAS) at one hour and at 3 weeks post-procedure. However, the primary objective of our study was to evaluate the success of the two techniques and to record complications; assessment of pain reduction was not within the study's scope. Nevertheless, the absence of pain-related outcomes is one of the acknowledged limitations of our study. Similar considerations regarding limitations of outcome reporting in interventional pain studies have been noted in the literature (2).

All patients underwent only one trial. We believe that the duration of the procedure does not influence the success rates of the hanging drop or loss of resistance methods. Prior systematic reviews have also emphasized that technique selection, rather than procedure duration, plays a more critical role in determining safety and efficacy (3).

The LOR technique was superior to the HD technique for cervical ILESIs. Further studies with larger sample sizes may provide more precise and detailed information.

Shahin Azizov, MD
Department of Pain Management, Ege Hospital
Baku, Azerbaijan
E-mail: shahinazizov1@gmail.com

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