

Letter to the Editor regarding “Reducing neck incision length during thyroid surgery does not improve satisfaction in patients” by Kim et al.

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Dear Editor,

It has been a pleasure reading the article titled ‘Reducing neck incision length during thyroid surgery does not improve satisfaction in patients’ by Kim et al. [1] published in your esteemed journal. The author’s effort in conducting such a meticulous study is commendable. However, there are few points of concern regarding the methodology which I would like to highlight through your esteemed journal.

There have been few more previous studies which have derived similar conclusions [2–5]; however, none have been as extensive as the present study. The sample size is large and very heterogeneous; therefore, there can be many confounding factors which I would like to highlight.

The first one is the time factor; the time range post surgery ranges from 6–365 months, which is a very long range. The patients with long gap between surgery and the survey are less likely to be cosmetically affected by the scar since they would have come to terms with the cosmetic outcome and the scar would have faded with time. This creates a bias and can affect the outcome.

The second major factor is the age of the patients, if we analyze the patients; the average age is 47.5 ± 11.3 years, that means the patients are mostly in the middle age and

elderly for whom cosmeses may not be really that important and significant. A similar study in a younger age group can be carried out for a more definite conclusion.

In such a large group with surgeries performed by different surgeons of varying skill and expertise, multiple confounding factors may also be present like the location of the scar in the neck, occurrence of post operative infection, revision thyroid or neck surgery, type of suture material used, suturing technique for closing the wound, etc. These factors must be matched and bias eliminated before a final conclusion can be derived.

Compliance with ethical standards

Conflict of interest None.

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