Reply to comment on Irena Krusche-Mandl et al. crossed pinning in paediatric supracondylar humerus fractures: a retrospective cohort analysis

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Dear Editor,

Regarding the comments to our article published in International Orthopaedics [1], the authors have chosen to use the visual analogue scale (VAS) (0–10), because in their opinion children aged five years do not really know or can properly judge the difference between “42” and “47”; they can handle a “4” or “5” much better. The authors did discuss this point with their clinical psychologist and she agreed on that. Certainly, at follow-up the patients were older and a score between 0 and 100 would be mathematically more precise. Since none of the patients reported any relevant pain symptoms, only 1/78 had a 1/10 VAS, thus resulting in an average of 0.012820513; the authors rounded this figure and

specified the range (0–1). The authors agree that this figure is more accurate, but in this particular case, they do not see a benefit to the readership in discussing this in detail.

Reference

1. Krusche-Mandl I, Aldrian S, Köttstorfer J, Seis A, Thalhammer G, Egkher A (2012) Crossed pinning in paediatric supracondylar humerus fractures: a retrospective cohort analysis. *Int Orthop* 36 (9):1893–8

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