Letter in response to: Mazeh H, Greenstein AJ, Swedish K, Nguyen SQ, Lipskar A, Weber KJ, Chin EH, Divino CM (2009) Laparoscopic and open reversal of Hartmann's procedure—a comparative retrospective analysis (Surg Endosc 23:496–502)

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Dear Sir,

We read with interest the article entitled “Laparoscopic and open reversal of Hartmann's procedure—a comparative retrospective analysis” by Mazeh and co-workers.

We principally agree with the authors that laparoscopic approach for reversal of Hartmann's procedure is feasible with low perioperative morbidity and mortality. However, the number of laparoscopic Hartmann reversals worldwide is negligible low and thus plays no relevant role in daily clinical practice. To date, the total number of patients published in the English-language literature, including studies and case reports worldwide, dealing with this laparoscopic approach may hardly exceed 250. In our own prospective observational multicenter study on all types of laparoscopic colorectal procedures with 5,853 patients recruited, the number of laparoscopically performed Hartmann reversals was less than 1% [1].

In laparoscopic colorectal surgery trials with relevant numbers of patients recruited, nononcologic resections usually show conversion rates of clearly less than 10%. Therefore a conversion rate of 19.5% as found in the present study—although otherwise absolutely comparable

with other series—remains high (and therefore not acceptable as the authors stated) and is definitely much higher than for other colorectal procedures [1]. Although Hartmann reversal is a feasible procedure, the high conversion rate must be seen in terms of a technically very demanding operation even in experienced hands.

Furthermore, the presented study with 41 patients represents definitely not the largest series of laparoscopic Hartmann's reversal to date. Beside our own publication with 71 patients [1] there is at least another one from Haughn et al. [2] with 61 patients.

References

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2. Haughn C, Ju B, Uchal M, Arnaud JP, Reed JF, Bergamaschi R (2008) Complication rates after Hartmann's reversal: open or laparoscopic approach. *Dis Colon Rectum* 123:2–1236

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