Letter to the Editor regarding the article “Comparison of intra- and postoperative analgesia and pain perception in robot-assisted vs. open radical prostatectomy”

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Dear Editor

I read with great interest the article of Knipper et al. in a recent issue of the journal [1]. The authors performed a study on 420 patients undergoing radical prostatectomy and concluded that when comparing robot-assisted radical prostatectomy (RARP) vs. open retropubic radical prostatectomy (ORP), a small increase in perioperative morphine administration may be expected in patients undergoing RARP procedures. The authors should be applauded for performing a well-designed study in an important topic (e.g., pain and opioid consumption) in patients undergoing surgery [2, 3]. Moreover, the need to identify the highest risk patients so specific preventive analgesic strategies can be tailored to patients who will benefit the most is of great interest in perioperative medicine [4, 5].

Nonetheless, there are several points that need to be clarified by the authors to determine the strength of their findings. First, it is unclear if the patients received a standard intraoperative analgesic regimen as this can affect the study outcomes. Second, it is unclear if the patients received a standard postoperative non-opioid analgesic regimen as this can also alter the study results. Last, it would be important to describe if any of the patients received regional anesthesia (i.e., nerve blocks) as part of their multimodal analgesia regimen as this could reduce the post-operative opioid consumption.

I would welcome comments by the authors as this would help to further validate the findings of this important study.

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Compliance with ethical standards

Conflict of interest The author declares that he has no conflict of interest statement.

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