It's time to re-acknowledge the differences: author's reply

A. Martín Duce¹

Received: 30 August 2021 / Accepted: 3 September 2021 / Published online: 21 January 2022
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Dear Editor,

Regarding the comment made by Tripoloni et al. [1] to our article [2], first, I would like to share his opinion on the need to individualize each study group to obtain results with the least possible bias. This leads us to classify different subgroups based on the characteristics of the patient, including their work activity, types of anesthesia, surgeon's experience, etc.

On many occasions, the problem of group differentiation resides in the lack of members in each group, which entails results impossible to be validated scientifically. For this reason, this problem should never be ignored, neither by the authors nor by the editors, as it is not done in any experimental study.

The quality criteria for the patient's follow-up that we propose in our publication aim to bring together both qualitative and purely quantitative conceptual elements so that any type of study on the evolution of hernia surgery can consider these criteria as part of its selection methodology of patients, prior to the analytical study.

In reference to the criterion proposed by Tripoloni, I consider that point 1 of them, "Homogeneous study group", is where the different subgroups would have a place, brilliantly commented on by him. I sincerely thank him for his comments and concern regarding this extremely important matter.

Declarations

Conflict of interest The author confirms that there is no conflict of interest to disclose.

Ethical approval Not applicable.

Human and animal rights Not applicable.

Informed consent Not applicable.

References

1. Tripoloni DE, Canaro García MI, Cassani F, Zanni M (2021) It's time to re-acknowledge the differences. *Hernia*. <https://doi.org/10.1007/s10029-021-02500-x>
2. Martín Duce A, Lozano O, Galván M et al (2021) Results of Shouldice hernia repair after 18 years of follow-up in all the patients. *Hernia*. <https://doi.org/10.1007/s10029-021-02422-8>

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✉ A. Martín Duce
antonio@martinduce.com

¹ University of Alcalá de Henares Faculty of Medicine and Health Sciences, Madrid, Spain