CORRESPONDENCE

In reply: Practice advisory on the bleeding risks for peripheral nerve and interfascial blockade: *rooted in evidence*

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To the Editor,

We thank Tsui *et al.*¹ for their comments on our editorial.² While we may disagree on some points, we share the goal of furthering our understanding of the bleeding risks associated with peripheral regional anesthetic techniques. We believe strongly that scientific discourse, such as that exemplified by the advisory of Tsui *et al.*³ and our accompanying editorial,² is crucial to developing perspective when addressing difficult clinical questions plagued by sparse data. Nevertheless, when creating guidelines, it is important to neither undervalue limited data nor overvalue expert opinion or new suggestions that are derived from invalidated methodologies. Finally, weighing risks and benefits in collaboration with the patient, surgeon, and anticoagulant prescriber should also be considered. In other words, take care to avoid going too far out on a limb when constructing a decision tree in order to decrease the likelihood that the recommendations will be uprooted.

Conflicts of interest None.

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References

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2. Horlocker TT, Neal JM, Kopp SL. Practice advisory on the bleeding risks for peripheral nerve and interfascial blockade: going out on a limb. Can J Anesth 2019; 66: 1281-5.
3. Tsui BC, Kirkham K, Kwofie MK, *et al.* Practice advisory on the bleeding risks for peripheral nerve and interfascial plane blockade: evidence review and expert consensus. Can J Anesth 2019; 66: 1356-84.

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