

To the Editors:

Authors response: Outcome after revascularisation of marginally viable limbs and dead limbs following lower limb arterial injuries
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Thank you for the comments. I accept that there are few limitations in this study [1]. In this study included two groups; group 1 - viable limb and group 2 - dead limb (all compartments are non-viable), and marginally viable limb (two or more lower limb compartments are non-viable). We classified as mentioned above because we confirmed viability / non viability in all patients after fasciotomy because some of the features of viability like movements and sensation may be affected by associated nerve injury following trauma. But I agree that this will affect comparisons with other similar studies. And we have not included any patient with a Mangled Extremity Severity Score (MESS) of 7 or more. The main reason for including

marginally viable and dead limb for revascularisation is that in our region most of the patients are transferred after long delay to the Teaching Hospital Anuradhapura and we will lose significant number of limbs if we do not consider above type of limbs for revascularisation. Anyway this should only be attempted in fit and young individuals.

References

1. Arudchelvam J. Outcome after revascularisation of marginally viable limbs and dead limbs following lower limb arterial injuries. *Ceylon Med J* 2017; 62: 203-4.

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