I hope to see only articles with conclusions based on evidence in IJS.

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REFERENCE

Laparoscopy, a tool in diagnosis of lower abdominal pain: Author's reply

Sir,
The authors are grateful for the critical review of our article in detail and the interest shown by the reader. Such constructive feedback and the discussion create a healthy environment for the future research and publication in IJS.

Sir, it is not because of the recent trend or fashion that we have mentioned about the merits of laparoscopy. We have commented the facts observed by us in our original work and similar results have also been quoted by other researchers, which we have already mentioned. After all the superiority and advantages of the procedure can be authenticated only by us and those who have been working on the problem.

The matter of cost analysis was discussed, when the article was being reviewed by the editorial committee, which the latter preferred to omit. Comparison with open surgery was not part of this study.

The errors in calculation and tabulation are due to oversight, in spite of repeated editing and corrections.

The number of appendicitis cases in table 4 may be read as 12. In the same table the number of patients with no organic cause should be read as 6. In the discussion, in para 3, line 12 the number of patients undergoing open procedures should be read as 5.

No alteration has been made to the content of the study. Such errors cannot put question mark on the authenticity of the useful work done by the authors.

The authors are aware of the article about the macroscopic findings of appendicitis, mentioned in letter. It is indeed a good article but so much details were not warranted in our article.

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Surgical training for overseas doctors in the UK- Facts, realities and solutions! Comments

Sir,
Dr. Raghu’s special article1 on surgical training for overseas doctors in the UK is highly informative and gives essentially right directions to the aspiring young doctors who wish to acquire excellence in the subject of their choice in the UK. It is important for the candidates to realize that they should be well equipped with degrees, training and publications which could be obtained in India and a secure training post in the UK before leaving their country in order to avoid future disappointments and embarrassment.

Dr. Raghu’s article clearly sweeps away the fantasy cloud that seems to envelope many young medical
graduates in today’s era, in view of the mad rush for flying abroad. The students should also remember that it is their duty and responsibility to build up their own motherland at par with the most developed nations of the world. They should return to their country where there are millions of patients waiting for treatment, fully armed with the specialist training that they acquire abroad.

Author’s Reply: Surgical history

Sir,

I was pleased to read the comments of Dr. Kaushik regarding my article on Dr. Halsted¹. I chose to write on Dr. Halsted as he remains one of the towering personalities in the world of surgery. I however fully agree with the views of Dr. Kaushik who has opened thought provoking vista in the subject. We should certainly come up with collective reviews as a tribute to our own pioneers in the field of surgery and medicine.

REFERENCE


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