


Letter to Editor on “Infection Recurrence in Instrumented Spinal Fusion in Children” by Carlos A. Moyano et al

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To the Editor, we read with enormous attention the current paper by Carlos A. Moyano et al highlighting the possibility of pediatric postoperative spinal infection recurrence.¹ We are grateful for the views of the authors to encourage discussion on significant aspects of management in children with postoperative infection. As a result, we wish to present some of our comments related to this valuable article.

First of all, the title and aim of the study is evaluation of infection recurrence or reinfection in posterior spinal fusion in children. It means that patients with traumatic spinal cord injury and following posterior fusion should be included in this research. In spite of that, the authors preferred to study patients who underwent surgical procedure just for spine deformity. Our observations of surgical site infection (SSI) in children show that its rate is more common in traumatic patients compared with deformity ones.²⁻⁴ We think it is better to change the title or expand the study. Secondly, the authors revealed that at their center, the patient is considered to be cured from SSI after completing appropriate antibiotic therapy for at least 12 months. But their patient with reinfection was treated with oral antibiotic for 6 months. This approach and the earlier mention seem paradoxical. Moreover, definition and study of possible predisposing and risk factors such as age, body weight, time of surgery, and number of involved surgeons in the operation room may be more practical. At the end, retrospective quality of the study, narrow inclusion criteria and sample size can be limiting.

We once again appreciate the authors for this research and hope that our explanation and observation will help this valuable journal's readership.

Declaration of Conflicting Interests

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