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Author response to: Outcomes after totally minimally invasive *versus* hybrid and open Ivor Lewis oesophagectomy: Results from the International Esodata Study Group

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Dear Editor

We thank the authors for their interest in our study on totally minimally invasive oesophagectomy (TMIE) *versus* hybrid *versus* open oesophagectomy[1]. It is interesting to note results on their mentioned previous study; a decrease in infectious post-operative complications and overall complication rate without a compromise in anastomotic leakage or oncological outcomes for the TMIE. These results partly conflict with our results, in which an increased anastomotic leakage rate was seen for TMIE compared with hybrid or open oesophagectomy.

We agree with the authors that it is hard to concisely compare the anastomotic leakage rate for both techniques in such a large international study. Therefore, we concluded that there were no clear benefits for either surgical technique when used nowadays in daily clinical practice. An earlier study comparing TMIE complications between a randomized controlled trial (RCT) setting and performance in daily clinical practice has confirmed the earlier mentioned conflicts in results as well. In our view, the choice of technique should therefore depend on centre experience, volume, and surgeon preference. It should be noted, however, that all centres in our study were high-volume centres. It could still be that proficiency gain curve influenced the results of our study.

A robust RCT would be the most concise comparison between surgical techniques. Even after the publication of such an RCT, however, much effort should be put in the implementation of TMIE technique as emphasized by previously published studies. We do agree with the authors that an (inter)national education programme could help to efficiently pass the proficiency gain curve and decrease the associated morbidity. If the anastomotic leakage rates do indeed become comparable between all techniques, we agree that the minimally invasive procedure is advantageous over the hybrid or open procedure.

Reference

1. van der Wilk BJ, Hagens ERC, Eyck BM, Gisbertz SS, van Hillegersberg R, Nafteux P *et al.* Outcomes after totally minimally invasive versus hybrid and open Ivor Lewis oesophagectomy: results from the International Esodata Study Group. *Br J Surg* 2022;**109**:283–290

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