

Laser-assisted microsurgery for intracordal cysts decreases cost-effectiveness

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Sir,

Matar et al. [1] nicely presented their results after CO₂ laser-assisted microsurgery for intracordal cysts. The use of the laser in their clinic is widely acknowledged, recognized and respected. However, caution should be taken as one might think that laser-assisted microsurgery is the single best technique in treating intracordal cysts. As no comparison is made with the standard cold steel microsurgery, this is a question that remains unanswered.

We have published VHI results of patients with benign voice disorders [2], including cold steel microsurgery of intracordal cysts. Interestingly enough, the subjective functional results are very comparable. In our series of 68 patients, 8 were treated for intracordal cysts, 2 males and 6 females. Their VHI changed from 44/120 preoperatively to 25/120 3 months postoperatively, where Matar et al. describe 51/120 and 28/120, respectively.

Some comments should be made. Results are presented quite roughly: the change in median G in the GRBAS has been presented without mentioning the mean G. Improvement and trends were mentioned in changes of R, S, and B scale without offering exact data. Change in mean frequency range was presented in Hz, while dealing with a population of a combination of males and females. As the Hz scale is a logarithmic one, it would have been better to present the change in frequency range in semitones, thereby abolishing gender differences.

The authors should be congratulated with the nice description of the surgical technique. However, laser-assisted microsurgery is more expensive [3]. Laser-assisted microsurgery for intracordal cysts offers no clinical advantages. Comparable functional results can be obtained using cold steel instruments. In conclusion, laser-assisted microsurgery for intracordal cysts decreases cost-effectiveness.

Conflict of interest There is no conflict of interest to be disclosed.

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