

## Author's reply

Sir,

We appreciate the concerns raised by Ashish Gulia<sup>1</sup> on our article "Tru-cut biopsy as the initial method of tissue diagnosis in bone tumors with soft tissue extension".<sup>2</sup> We would like to clarify our views on the points raised.

First of all, we agree to the point that magnetic resonance imaging (MRI) will tell us (cognitive sense) the exact target area and we performed MRI in all of our cases; however, the somatosensory and tactile sensation (palpation) will definitely be needed to have a feel of where the needle is going. In our series, by saying palpation technique we mean that no additional locating devices were used to confirm the location of the needle.

Who should perform the biopsy is still a matter of debate. As far as the diagnostic accuracy is concern, Rougraff *et al.*,<sup>3</sup> reported that there was no evidence to address who is the best suited to perform the biopsy. Existing literatures have failed to address the technical aspect of biopsy scar placement by various physicians doing biopsy (Orthopedicians, Surgeons, Radiologists

and Pathologists). We hypothesized that an orthopedic resident or registrars, who are aware of the principles of biopsy and recommendations of musculoskeletal tumor society, will place the biopsy tract more appropriately than other subspecialties. We agree that whenever possible a biopsy (open or Tru-cut) should be performed by a specialist in a specialized center, but if it is not possible, Tru-cut should be the first choice as it has good diagnostic accuracy and more forgiving than open biopsy.

We never wanted to undermine the importance of imaging techniques to localize the needle in the correct position. We just wanted to emphasize that when tumor is palpable and imaging has shown the vital structure in and around the tumor, these adjuvant radiology techniques have no added advantage. As far as comparisons with similar studies are concern, we just wanted to compare the adequacy of tumor tissue obtained without using the localization techniques. We agree to the fact that the size and site of the tumor has an important role to play while choosing these adjuvant localization techniques.

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## REFERENCES

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3. Rougraff BT, Aboulaflia A, Biermann JS, Healey J. Biopsy of soft tissue masses: Evidence-based medicine for the musculoskeletal tumor society. *Clin Orthop Relat Res* 2009;467:2783-91.

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