



# Letter to the Editor: A Randomized Control Trial Comparing Local Autografts and Allografts in Single Level Anterior Cervical Discectomy and Fusion Using a Stand-Alone Cage

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Dear Editor,

We read this article “A randomized control trial comparing local autografts and allografts in single level anterior cervical discectomy and fusion using a stand-alone cage” by Kanna et al. [1] with interest and had a deliberate discussion at length extensive amongst our peer of spine surgeons. At the outset, we congratulate the authors for a thought-provoking article on a less pondered topic of a common problem and request generous views of our few salient queries.

1. A single-center study inclusive of only 27 patients operated by a single surgeon may be a too-small sample size to conclude on a procedural option for a common cervical spine problem being seen and tackled by spine surgeons [2,3].
2. In the study, 21 patients were diagnosed with radiculopathy and six with myelopathy. In these sub-cohorts, how many underwent local grafting and allograft subsequently and had the two diagnoses potentially skew and bias the study result?

3. The randomization numbers were generated by a computer-generated random chart in this study; how was it ensured that patients falling in the local grafting group would have sufficient osteophytes to fill in the stand-alone cage being used on them [4]?
4. Is there any specific reason for patients with the American Society of Anesthesiologists grading >3 being excluded from the study?

## Conflict of Interest

No potential conflict of interest relevant to this article was reported.

## References

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