

Author's reply

Sir,

We thank the reader¹ for showing interest in our article² and commenting on it.

Nutritional status of the patients does play an important role in the behavior of ulcers and their chronicity. However, this does not really affect the main complaint of rest pain in TAO. Moreover, to quantify and standardize the nutritional status is a very subjective affair and adds more confusion than clarity. As a general preoperative investigation, routine blood examinations were done for all patients and appropriate treatment for anemia was started when required. However, this did not affect the management plan in our series.

Cessation of smoking is the only proven method to control TAO and is the mainstay of treatment.³ All patients in our series had rest pain even after cessation of smoking. Medical management shows promise; however, the results are erratic and patients in our series could not really afford for a prolonged medical management. We believe distraction osteogenesis, although technically difficult, is a very cost-effective treatment in our group of patients and a low threshold for performing this procedure will avoid unnecessary delay and financial burden. Usefulness of the technique in cases of failed lumbar sympathectomies asserts our belief.

Role of Buerger's exercises in thromboangiitis remains unproven and we could find no papers in English Literature supporting the use of these. We have not used Buerger's Exercises in our series.

Improved nutrition and care of infected wounds are essential practices and are integral part of postoperative care, as is the counseling of the patients.

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