

Reply to the Comment of the Letter to the Editor on the Survey on Trauma Systems in Spain[☆]



Réplica al comentario de la carta al director sobre la encuesta de sistemas de trauma en España

Dear Editor,

First of all, I thank the author of the Letter to the Editor for the comments made. The article referred to is no more and no less than a glimpse of the current situation of polytrauma patient care in Spain, which is not up to par with that of other countries, such as the United States.¹

The ATLS method is likewise applicable to prehospital treatment (PHTLS), with certain nuances, but the method is essentially just as valid. Indeed, prehospital treatment is fundamental because the decisions made and steps taken are extremely important as they are part of the “golden hour” of polytrauma patient care.

It is true that several hospitals are currently starting to organize and create protocols for their polytrauma patients, and pre-hospital care is an important part of this organization.² Each hospital that organizes polytrauma patient treatment should obviously have a database. Nevertheless, the shortcoming that our health care system has not yet dealt with is, as stated by the

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authors of the letter, not just pre-hospital care, but also social reintegration programs for trauma patients.

REFERENCES

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2. Costa Navarro D, Jiménez Fuertes M, Medina Álvarez JC, Requena Meana L, Jimeno Lecina E, Inaba K, et al. Introduction and operation of a multiple trauma unit in a general hospital. *Cir Esp.* 2009;86:363–8.

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Laparoscopic Approach to Intestinal Obstruction[☆]



Abordaje laparoscópico de la oclusión intestinal

Dear Editor,

We have read with great interest the article by Poves et al.¹ about the use of laparoscopy in the treatment of intestinal obstruction due to adhesions and internal hernias. We believe it would be useful to complement the information of the authors by reporting our experience.²

* Please cite this article as: Fortea-Sanchis C, Priego-Jiménez P, Granel-Villach L, Salvador-Sanchis JL. Abordaje laparoscópico de la oclusión intestinal. *Cir Esp.* 2015;93:56–57.

We should highlight the importance of adequate patient selection, because the success of this approach depends on it. Also, despite the fact that there are currently no randomized clinical trials, there are certain recommendations that should be considered, in addition to those described by the authors. The suspicion of a single band is the main indication for laparoscopic treatment (fundamentally in patients with embryonic adhesions or after appendectomy). However, it is also indicated in obstructions due to foreign bodies, bezoars or gallstone ileus. Contraindications include patient intolerance of anesthesia, suspicion of obstruction due to peritoneal carcinomatosis, distension of the small bowel of more than 4 cm on imaging tests and suspected dense adhesions. Likewise, the use of laparoscopy in patients with suspected