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***Letter to the Editor on “Tourniquet Use Does Not Affect Functional Outcomes or Pain After Total Knee Arthroplasty”***

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Dear Editor,

I have read with much interest the article “Tourniquet Use Does Not Affect Functional Outcomes or Pain After Total Knee Arthroplasty” by Goel et al., October 2019 issue (1).

First, I am highly obliged to the authors for writing an informative article. The goal of the study was to determine the effects of tourniquet in terms of pain and functional outcome following TKA.

I would like to raise a few pertinent points.

1. The authors in Material and Methods did not mention the details of the adductor canal block, whether it is a single injection or continuous infusion? If the block was given in continuous infusion it could significantly influence the knee pain scores on Time 1 & Time 2, which is the In-hospital/immediate post-operative pain score (2).

2. I would like to know the approximate value of intraoperative blood pressure (BP) / Mean Arterial Pressure (MAP) range kept by the anesthetist. Because in most cases, the anesthetist will lower down the BP for arthroplasty to decrease the blood loss which indirectly influences Surgical time and the grading scale for the difficulty of intraoperative visualisation due to blood. Did the anesthetist reduce the BP during the whole procedure or only selectively?

3. I would like to know at which step of surgery the visualisation difficulty occurred or which step of surgery was difficult due to the bloody field, which was assessed by two surgeons. The answer to this question could be a great value for the surgeons.

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## References

1. Goel R, Rondon A, Sydnor K, Blevins K, O'Malley M, Purtill J et al. Tourniquet Use Does Not Affect Functional Outcomes or Pain After Total Knee Arthroplasty. The Journal of Bone and Joint Surgery. 2019;101(20):1821-1828.
2. Elkassabany N, Cai L, Badiola I, Kase B, Liu J, Hughes C et al. A prospective randomized open-label study of single injection versus continuous adductor canal block for postoperative analgesia after total knee arthroplasty. The Bone & Joint Journal. 2019;101-B(3):340-347.

Conflict of Interest: None Declared

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## Article Author Response

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### *Article Author(s) to Letter Writer(s)*

We thank Dr. Netaji for the kind comments.

1. The block was a single injection for all patients and was administered in a standardized fashion by an attending anesthesiologist using ultrasound guidance.
2. Our mean arterial pressure goal was 60 mm/Hg.
3. The grading of visualization was assessed at the conclusion of the case based on the average experienced during the entirety of the case.