

## Simultaneous laparoscopic nephrectomy in ADPKD

Dear Sir,

I read the interesting article 'Concomitant laparoscopic urological procedures: Does it contribute to morbidity?' written by Mourya *et al.*<sup>[1]</sup> Author has emphasized that simultaneous laparoscopic procedures can be done for urological diseases in selected patients with the advantages of single anaesthesia and hospital admission without increasing the morbidity. We strongly believe this point. We would like to emphasize that bilateral pre-transplant nephrectomies in autosomal dominant polycystic kidney disease is probably difficult due to large size kidney and associated infection, inflammation and adhesion. We have seen intestinal adhesions during laparoscopy for subsequent staged nephrectomy, leading to difficulty in dissection.<sup>[2]</sup> Bilateral simultaneous nephrectomy has an additional benefit of leaving the patient with minimum number of days with anephric status as renal transplantation can be done after a gap of 7-10 days of bilateral pre-transplant nephrectomies. Gill *et al.*,<sup>[3]</sup> Jenkins *et al.*,<sup>[4]</sup> Dunn *et al.*<sup>[5]</sup> have similar experience in this subject.

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## Laparoscopic right paraduodenal hernia repair

Dear Sir,

I read with interest the recent case report submitted by Bhartia *et al.*,<sup>[1]</sup> which describes the laparoscopic repair of a symptomatic right paraduodenal hernia. After reviewing the article, the authors claimed their patient had the longest follow-up to date, stated that only three published reports have detailed laparoscopic right paraduodenal hernia repair, and claimed their patient's postoperative hospital length of stay matched those of the patients in previous reports. Unfortunately, the authors did not include a time frame for follow-up but instead simply stated the patient "remains

well till date and had no recurrence of abdominal symptoms."<sup>[1]</sup> While their claim may be true, it is impossible for the reader to confirm this. At the time of case report submission, four published reports have been found to have detailed successful laparoscopic repair of right paraduodenal hernia. Perhaps the authors inadvertently overlooked a previously published article describing laparoscopic right paraduodenal hernia repair, complete with discussion and images of operative technique, embryology and literature review. Briefly, we reported the case of a 26-year-old female with symptoms suggestive of partial small-bowel obstruction and a 6-year history of intermittent abdominal pain. Plain

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