



## Reply to the editor

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To the Editor:

We thank the readers for valuable comments on our publication [1]. It is conceivable that hypertension, diabetes, and fasting time could affect the results of our randomized study.

However, the presence of hypertension and diabetes was shown in Supplementary Table 1 and there was no difference between the two groups in each age group. These results were similar to the prevalence from surveys in Japan [2, 3]. Due to the nature of prospective randomized studies, patients' backgrounds in study groups should not be different. Therefore, as long as there is no evidence that propofol is more potent in patients with hypertension or diabetes compared with thiopental, the effects of them on the results would not be crucial. Moreover, because diabetic patients with poorly controlled glycemia, who could have severe autonomic neuropathy, are usually classified as ASA-PS 3 at best, such patients were excluded from the study.

In our institution, fasting time before surgery is 2 h for clear liquids and 6 h for solids, which has been recommended by ASA guidelines. Although the final intakes before surgery were not recorded, it is thought that there was no difference between the two groups as well as for the numbers of patients with hypertension or diabetes.

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### Compliance with ethical standards

**Conflict of interest** The authors declare that they have no conflict of interest.

### References

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