



Supraglottic airway devices in pediatric airway simulation

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To the Editor:

I read with great interest the article of Kulnig et al. in a recent issue of the *European Journal of Pediatrics* [3]. The authors compared five different supraglottic airway devices in pediatric manikins under simulated physiologic and pathologic airway conditions and concluded that the laryngeal tube, AuraG, and AirQ were superior in providing fast and effective ventilation during simulated difficult airway situations in pediatricians with varying clinical experience. The authors should be congratulated for performing a well-designed study in an important topic (e.g., airway management) in pediatric patients [1, 4]. In addition, the use of simulation studies to improve training and evaluate new technology is very relevant to improve the management and outcomes of pediatric emergencies [2, 5].

The study of Kulnig et al. was well conducted; however, there are several questions regarding their study that need to be clarified. First, the participants had varied experiences with the devices but the authors did not adjust their analysis to account for the effect of prior experience on the outcomes. Second, the authors did not report any calibration between the two anesthesiologists who evaluated the outcomes as this is helpful to establish consistency among the observations. Last, the authors reported analysis that included multiple comparisons; however, it appears that they did not adjust their analysis to avoid type I errors.

I would welcome comments to address the aforementioned issues as they were not discussed by the authors. This would help to further support the findings of this important clinical study.

Attestation Dr. Mark C Kendall approved the final manuscript, decides to submit the correspondence for publication, and attests to the integrity of the original data and analysis reported in the manuscript.

Authors' Contributions The author designed and prepared the manuscript.

Compliance with ethical standards

Conflict of interest The author declares that there is no conflict of interest.

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