



Letter to the Editor concerning “The effect of patient positioning on the relative position of the aorta to the thoracic spine” by Plataniotis N, et al. (Eur Spine J; 2019: <https://doi.org/10.1007/s00586-018-5812-9>)

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We recently read with great interest the article titled “The effect of patient positioning on relative position of the aorta to the thoracic spine” by Plataniotis et al. Determining the exact position of the aorta during the surgery can help the surgeon to choose safer operative approach. The findings demonstrated the position of the aorta in different situations.

Firstly, radiation safety has become a major concern for spinal surgeons in recent years and there is no consensus about the definition of a low dose and the safety limit for a cumulative dose, but the probability of causing effects is proportional to the dose absorbed. Beside this, stochastic effects of radiation are not depended on the dose absorbed. Radioprotection precautions have decreased the risk of surgical team, but the patient is still in danger. Radiation exposure in thoracic spine computerized tomography scans is very high. Plataniotis et al. were applied three scans for each patient with low back pain, and in our opinion, this is controversial to radiation safety policy. This topic is very important and cannot be disregarded.

Secondly, Plataniotis and colleagues did not emphasize the features of the padding used that found to change the position of the aorta. Was it a standard one-piece padding material, or is it modular and can be changed for the patient’s physical features. Figure of the padding can help readers to understand the patient’s position during the CT scan. Different paddings can differentiate the results.

Compliance with ethical standards

Conflict of interest The authors declare that there is no conflict of interest.

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