

Letters to the Editor

Reply by the authors ⁽¹⁾

To The Editor,

I sincerely thank Dr Mini for going through my article and raising her doubts ⁽²⁾

Regarding the first query she has raised, I would agree that the study group included only term patients which is a definitely a drawback of the research but this has been already mentioned in the section "Limitations of the study" which reads "Though low birth weight at term (gestational age more than 37 completed weeks) is considered equivalent to intra uterine growth restriction, this phenomenon can occur at any gestation. The present study focuses only upon ultrasound parameters at term gestation and hence there is a need for further longitudinal prospective study starting from early gestation..."

Regarding the second query, we went by the definition of "term gestation" in selecting the patient and we had few patients without prior appointment who presented after 41 weeks. I definitely agree with Dr Mini that in supervised antenatal care, no one would like the pregnancy to continue beyond 41 weeks especially in India where babies are said to attain maturity by 39 weeks.

Thanking you

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References:

1. Shripad Hebbar, N. Varalakshmi. Comparison of three ultrasound ratios in term low birth weight babies – is there a role for thigh circumference. Calicut Medical journal. 2007; 5(3):e1
2. Mini. C.H. Should we wait till 42 weeks? Calicut Medical Journal. 2008;6(1):e9a

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Erratum:

Uterine artery embolization for fibroids

Thanikasalam K et al. Calicut Medical Journal 2007; 5(4): e1

Table 1. Contraindications for UAE [10]

Absence of active infection* is to be read as presence of infection.

The mistake is regretted.

Authors