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Response to commentary by Klyuev for Factors affecting extracorporeal shock wave lithotripsy (ESWL) success

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Abstract

Dear editor,

We express our gratitude for the keen interest and critical insights you and the readers of the your journal have provided regarding our manuscript. I am writing this commentary in response to the commentary article written by Sergey Klyuev on our article.

Cite as: Sagir S. Response to commentary by Klyuev for Factors affecting extracorporeal shock wave lithotripsy (ESWL) success. *J Clin Trials Exp Investig.* 2023;2(4):226-228.

Dear editor,

We express our gratitude for the keen interest and critical insights you and the readers of the your journal have provided regarding our manuscript. I am writing this commentary in response to the commentary article written by Sergey Klyuev on our article (1).

Firstly, I would like to emphasize that, upon consulting the EAU guidelines, a stone size under 2 cm for ESWL is not a stipulated criterion but rather an expert opinion. Segura et al. have found in their research that the success of ESWL is independent of stone size (2).

Our criteria for success in the group determination were retrospectively determined. Patients were deemed successful if they were stone-free, as evidenced by direct urinary system X-ray or ultrasound, or if they had stones smaller than 5mm. Conversely, those with residual stones larger than this threshold were classified as unsuccessful.

Regarding the demographic data, all patients resided in or around Mardin, Turkey, sharing similar climatic and racial backgrounds. Hence, we believe that these factors did not influence the ESWL outcomes in our study (3).

Although our initial hypothesis postulated the influence of stone-skin distance on ESWL success, and the EAU guidelines suggest a grade 2 recommendation in this regard, our study found no significant contribution of the stone-skin distance to the success rates.

The patient cohort exclusively comprised individuals primarily presenting without stents. Patients with a previous history of stone surgeries, those with DJ stents, and those with urinary anomalies were excluded from our study.

Furthermore, while recommendations regarding diet and fluid intake are typically made to all stone patients awaiting ESWL, our retrospective study design did not afford us the opportunity to assess this. This stands as a limitation of our research.

Conflict of interest:

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Ethical approval:

No need for Commentary papers.

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No

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Evaluated by at least two different institutions appointed by the field editor.

Data availability

The datasets generated during and/or analyzed during the current study are available from the corresponding author on reasonable request.

Contributions

Research concept and design: **SS**

Data analysis and interpretation: **SS**

Collection and/or assembly of data: **SS**

Writing the article: **SS**

Critical revision of the article: **SS**

Final approval of the article: **SS**

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