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Letter to Editor

Hydroxyethyl starch effects on tissue perfusion and oxygenation in patients undergoing liver surgery

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In their recent report on the results of a clinical trial on effects of hydroxyethyl starch (HES) 130/0.4 and HES 200/0.5 on microcirculation perfusion and tissue oxygenation in patients undergoing liver surgery, Cui and co-workers [1] concluded that for patients undergoing major abdominal surgeries that entail a large amount of blood loss, using HES 130/0.4 for volume replacement treatment may have potential benefit in internal organ perfusion. In support of this conclusion, two studies from Boldt and co-workers have been cited (reference 3 and 4; reference 3 is cited a second time as reference 16) which have been retracted in 2011 because of scientific fraud [2, 3]. These citations and the misleading referencing need to be corrected.

Disclosure of conflict of interest

CJW has received fees for speaking at industry symposia from CSL Behring and Baxter.

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