

INVITED COMMENTARY

Commentary re: Considerations about TASC II: Is it a Suitable Document for Specialists?

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The editors of TASC II thank Dr. Pedrini for his thoughtful comments on the TASC II document.¹ One of the primary goals of TASC II was to stimulate discussion, particularly at the National level, that will keep TASC a living document. His careful reading of the document has identified two referencing errors in the Technical Section F, that unfortunately were not picked up prior to press. We apologize for this mistake. Table F7a is incorrectly referenced to a meta-analysis of the aortic bifurcation grafts² instead of a somewhat earlier article by the same lead author comparing percutaneous and surgical revascularization of the femoral popliteal segment.³ Reference 209 (Klinkert)⁴ refers to a paper by the same author in the same year published in another journal.⁵

The TASC II document was primarily designed to provide guidance for primary health physicians, who should find an abbreviated, easy to read document without too many technical details or references. The editors also wanted to update information for vascular specialists. However the ongoing debate of the role of prosthetic versus vein grafts is an example of how national vascular societies can get involved to incorporate the general TASC II recommendations into local practice. Such issues as well as the important question when to use endovascular procedures versus open surgery, were intentionally only briefly addressed in consensus between all 16 societies that were involved in the writing process of TASC II.

The original intent of TASC II was to have a dissemination phase following publication. We will be encouraging interested vascular specialists, as exemplified by Dr. Pedrini, to become involved in this phase by responding and working on local updates that can be published in national journals. We hope this process will bring up controversial issues for discussion, and when appropriate publish summarized amendments.

References

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