

Advantage of Parker Flex-tip Tube™ in endotracheal intubation using AirwayScope™ videolaryngoscope

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Conflict of interest There is no conflict interest regarding this study.

To the Editor:

I read with interest a paper written by Suzuki et al. [1]. In that article, they evaluated the advantage of Parker Flex-tip Tube™ in endotracheal intubation using AirwayScope™ videolaryngoscope (AWS; Hoya, Tokyo, Japan) in patients without difficulty. I agree with the authors' conclusion that the use of the Parker tube in combination with the AWS is an optional technique on some occasions. However, there is no evidence to the advantage of their means of inserting the blade tip of the AWS behind the epiglottis in patients with difficulty. Indeed, it is crucial to examine such an advantage only in patients with unsuccessful endotracheal intubation using the AWS at the first attempt [2]. Therefore, we must await additional studies to confirm the conclusion drawn by Suzuki et al.

References

1. Suzuki A, Ohmura T, Tampo A, Goto Y, Oikawa O, Kunisawa T, Iwasaki H. Parker Flex-Tip Tube® provides higher intubation success with the Pentax-AWS Airwayscope® despite the AWS tip being inserted into the vallecula. *J Anesth.* 2012;26:614–6.
2. Minonishi T, Kinoshita H, Hirayama M, Hatakeyama N, Matsuda N. Modification of endotracheal intubation using AirwayScope™ videolaryngoscope for straight reinforced tubes. *Minerva Anesthesiol.* 2011;77:850–1.

An answer to this letter to the editor is available at
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