

Letter to the editor regarding the article: “Prevalence of Orthopedic Complaints Among Endourologists and Their Compliance with Radiation Safety Measures”

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Dear Sir,

I read the article by Elkoushy and Andonian with great interest [1]. This study is a valuable contribution to the literature which is elucidating the habits of endourologists about radiation protection and orthopedic problems that they face. Furthermore, they assess the compliance of endourologists with radiation safety measurement and determine the prevalence of orthopedic complaints.

Recently, the numbers of endourological procedures are substantially increasing in daily urology practice and most often rely on fluoroscopy. Therefore, endourologists are becoming an important occupational group exposing to radiation and therefore, they should undertake protective measures because of well-known harmful effects of radiation. The first part of the study demonstrates very interesting results about radiation protection, especially lack of the use of protective gears except lead aprons. Accordingly, we have observed insufficient care and awareness about radiation protection measures among endourologists in our practical life [2, 3]. To investigate this issue in detail, we have prepared two surveys in our country. One of them

was about the habits and awareness of urologists about radiation protection [2]. It was an internet-based survey in which 363 urologists responded. According to our results, despite the common use of lead aprons (75.24%), most of the urologists did not use dosimeters (73.94%), eyeglasses (76.95%), or gloves (66.67%). Less than half of them were always using thyroid shields during fluoroscopy (46.44%). Our second survey was about the use of radioprotective testes shields during diagnostic and therapeutic procedures which require fluoroscopy [3]. Results of this study were not satisfactory as expected, in addition to the findings of the present study, our findings also demonstrate the need for the new scientific researches and publications about radiation safety which is aiming to increase the awareness among the urologists.

Another technical point which requires better elucidation is the relationship between heavy radiation protection gears and orthopedic problems among urologists. In the present study, compared with the previous reports, the prevalence of orthopedic complaints was found higher among endourologists than interventional cardiologists and radiologists. This may be related to two reasons. Authors' hypothesis is that endourologists frequently have to change their body position to accommodate the course of the urinary system and this is especially exaggerated with the lack of video cameras and the use of rigid instrumentation. The other one is that the heavy radiation protection gears may cause orthopedic problems. Keeping this fact in mind, results of the current study shows high prevalence of orthopedic problems among endourologists. However, the reason still remains unclear, whether accompanied with endourological procedures itself or using protective gears. Therefore, I believe that age-matched controlled studies with endourologists about using of heavy protective gears will provide further insights into this issue.

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