

Comparison of Norepinephrine and Terlipressin vs Norepinephrine Alone for Management of Septic Shock: Few Concerns

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Dear Editor,

We read with interest the recently published research paper titled "Comparison of Norepinephrine and Terlipressin vs Norepinephrine Alone for Management of Septic Shock: A Randomized Control Study" by Sahoo P et al.¹ It is a very well-done study and well-written as well. However, we have a few concerns which we have listed below:

- The route of administration of vasopressors was not mentioned in the article. We assume that vasopressors would have been given through the central venous line as is recommended, however, in our opinion, it should have been mentioned in the materials and methods section.²
- As you have mentioned in the discussion section Terlipressin enhances myocardial contractility, it would have been good if the cardiac index in both the groups at 0 and 12 hours was documented to see any improvement in cardiac index.³
- It would have added value to this study if mixed venous oxygen saturation was also documented at 0 and 12 hours in both groups as it is also one of the therapeutic goals for the management of septic shock.⁴
- It would have been worthwhile to study the duration of intensive care unit (ICU) stay in both groups as one of the secondary outcomes as it is of clinical relevance.
- The power of the study isn't mentioned while calculating sample size in the study.
- The odds ratio (OR) is used for the comparison of adverse events between the two groups as mentioned in Table 4. Instead of OR, risk ratio (RR) should have been computed as the use of OR can markedly exaggerate the effect size in randomized controlled trial (RCT) if misinterpreted as RR and, hence, has the potential to mislead clinicians.⁵

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