



## Letters to the Editor

### Autonomic dysreflexia

In AK Karlsson's recent review of autonomic dysreflexia,<sup>1</sup> she states: '...in recent years further elucidation of...'. This introductory sentence is given as part of the rationale for writing the scientific review. Yet only 31 of the 85 references cited were published during or after 1994 – within the last 5 years. Moreover, 20 references cited were published in *Paraplegia* while only a lonely two were from *Spinal Cord*. Are papers published in 1980 or in 1917 from 'recent years'? Autonomic dysreflexia is a very relevant topic. New information is always welcome – particularly as published in *Spinal Cord*. Is it too much to expect that a scientific review that bills itself as modern should have recently published articles? Thank you for your consideration.

Paul E Kaplan, MD,  
Prof & Vice Chair  
MUSC  
Physical Medicine and Rehabilitation  
150 Ashley Avenue  
Charleston SC 29425

### Reference

- 1 Karlsson AK. Autonomic dysreflexia. *Spinal Cord* 1999; **37**: 383–391.

### In reply to Professor Paul E Kaplan, MD

By a citation taken out of context Professor Kaplan raises some questions that could be discussed. First: As stated in the introduction, the topic of the review was the clinical aspects of autonomic dysreflexia. However it also stated that '*in recent year further elucidation of the pathogenetic mechanisms as well of signs of metabolic effects associated with the reaction have been reported*'. This was mentioned as a rationale for dealing also with some of the pathogenetic aspects, even though this was not the main purpose of the review. Furthermore, based on a numerical estimation of the references, it is stated that the review is not up-to-date. This raises some possibilities that might be discussed. One might be of the view that findings reported more than 5 years ago are now incorporated in the common knowledge, and therefore it is not absolutely necessary to cite them. Another possibility is that there are important references dealing with clinical aspects of AD that are not cited. The discussion would improve if some example of such references would be given. A third possibility is that the review gives a true picture of the current status regarding the issue. The purpose for clinical and scientific work would then be to improve our knowledge by making systematic research into the issue. These points would be more interesting to discuss than a pure numerical estimation of cited references.

Ann-Katrin Karlsson, MD PhD