Response to letter: Comments on “A systematic review of the scalp donor site for split-thickness skin grafting”
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The author appreciates your interest in my paper published in the November 2020 issue of Archives of Plastic Surgery [1]. The scalp skin is the best donor of split-thickness skin grafts and the incidence of hypertrophic scars is less than that of the thigh. The late complication, hypertrophic scar, is extremely rare, especially when the early complications are well treated, even on thick split-thickness skin grafts. Therefore, the incidence of each article was analyzed by distinguishing between early and late complications.

In Table 1, the sum of early 36 complications of the scalp donor site was 123 instead of 117, while that of late complications 37 was 190 instead of 159. Systemic complications of blood transfusion (one case) and death from sepsis (five cases) were excluded from early complications. In addition, forehead scarring (four cases) due to technical errors and hair transfer (27 cases) were excluded from late complications [1].

In the Methods section, when author began the study, the author searched for 290 articles from PubMed (publication date from 01/01/1964 to 12/31/2019) by keyword “Scalp [AND] Skin [AND] Transplant [AND] Donor” and 285 articles were retrieved from 01/01/1977 to 12/31/2019. However, the author recently again searched for the same combination of keywords a PubMed search and found 395 articles published from 01/01/1964 to 12/31/2019 and 354 articles published from 01/01/1977 to 12/31/2019. In the review of all articles, appropriate articles could not be found except those included in the study by the author.

In PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) flowchart, in order to exclude 262 articles, the arrow direction must be displayed outward, but there was an error in the arrow direction in the author’s chart.

Notes

Conflict of interest
No potential conflict of interest relevant to this article was reported.

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Reference