No Benefit When Placing Drains After Kidney Transplant: 
A Complex Statistical Analysis

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Dear Editor:

We read the interesting article by Dr. Sidebottom and associates published in your journal. There is controversy in the literature about the necessity and duration of drains after transplant. Drains can act as a gateway for entry of organisms. In contrast, drains can give early warning of bleeding, urine leakage, or lymphatic leakage. Drains can decrease the incidence of deep vein thrombosis and lymphocele formation and treatment. The study attempted to determine the association between drains and wound complications. There were some important limitations of this report. The most important limitation was the presence of selection bias. In this study, Patients at greater risk of wound complications had drains, and low-risk patients did not have drains. This important bias is a serious limitation in interpreting the results. We believe that in the high-risk group, early recognition of wound complications can minimize the morbidity of patients and decrease the incidence of complications. In addition, we believe that selective drain placement in high-risk patients can minimize cost and morbidity. Therefore, further investigations must define the selection criteria for drain placement.

References