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Reply:

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REPLY:

I meant no disrespect when I stated that the field of neurointervention was started by "pioneers trying to improvise new therapies." "Pioneers" is a word with very positive connotations, and that is how I intended it to be understood. I was referring to the people who were the first to enter and develop the field, thus opening it up for others, including myself, to have an opportunity to follow. The word "improvise" was not the best choice, but it was not meant to be disparaging in the least. While as a fan of jazz music I greatly respect talented improvisors, I completely agree that "invent" would be a better word to convey the creativity as well as the design that went into the work of those who blazed a trail. It is the work of these pioneers, including Dr Guglielmi, that led to the mature field that I am privileged to work in today. Moreover, that mature field now supports a device industry that produces commodity products in bulk. I am thankful that I have these products and techniques because I doubt that I would have the patience, persistence, and inventiveness of the pioneers.

As far as the comparison between appendectomies and coiling, I leave it to the reader to decide if this comparison is apt. The comparison was meant to indicate that endovascular treatment of cerebral aneurysms has become quite common. We must give much of the credit for this to Dr Guglielmi for what has undeniably been a major revolution in the treatment of cerebral aneurysms. The point of my article was that this revolution has led to procedures being done in large numbers throughout the world, which brings about economic concerns as a major issue to be confronted in the next decade of the evolution of endovascular care of cerebral aneurysms.

H.J. Cloft
Senior Editor

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