

## Comment on: Changes in hand grip strength and associated factors after transradial coronary intervention: A longitudinal study

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I read with interest the article titled “Changes in hand grip strength and associated factors after transradial coronary intervention: A longitudinal study” published recently in the journal of Cardiovascular Surgery and Interventions by Erbay et al.<sup>[1]</sup> The study is an important and timely study in terms of emphasizing the complications that may occur after transradial coronary intervention.

The data presented in the study clearly demonstrate the situations that should be considered during transradial coronary intervention. In this sense, the suggestions presented to increase the success of transradial coronary intervention are quite important. However, I believe there are some points that need to be addressed in this study.

Although it is unlikely that carpal tunnel syndrome (CTS) is solely due to the transradial procedure, it is possible that the functional response to the prolonged application of a radial artery pressure device after the procedure, as well as trauma-induced edema, may have contributed to the development of CTS or worsened preexisting CTS.<sup>[2]</sup> This may affect the median nerve and cause a decrease in hand grip strength. On the other hand, conditions such as trauma-induced hematoma and inflammation-induced wrist swelling may cause a decrease in hand grip strength.<sup>[3]</sup>

Therefore, when the optimal number of specialists is provided according to the population, I believe the reasons for referrals to the wrong department will be better understood.

In conclusion, the study by Erbay et al.<sup>[1]</sup> provides valuable information by addressing an important issue in transradial coronary intervention. I eagerly

await further research in this area and hope that the authors will consider these suggestions in their future studies. Thank you for the opportunity to provide feedback on this important study.

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