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# The endoscopic approach to the neck: a review of the literature and an overview of the various techniques

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We thank Dr. Muenscher and collegues for their review of our article on the underlying pros and cons of endoscopic and video-assisted surgical approaches for neck surgery. In our opinion, some points have not been stressed properly. Since its initiation in 1999, the minimally invasive video-assisted thyroidectomy (MIVAT) approach has been widely used for both benign and malignant thyroid lesions in both adult and pediatric patients [1–3]. Although listed as a disadvantage, the operative time for MIVAT resembles that for conventional thyroidectomy after an adequate learning curve period [3]. Both the operative time and the complications rate for MIVAT equal those for open surgery [1–3].

A major criticism is the author's reported absence of clinical studies investigating the completeness of video-assisted techniques in thyroid cancer. In fact, at least two clinical trials involving patients with low- and intermediate-risk papillary thyroid carcinomas (PTCs) have been reported by our university [4, 5]. We demonstrated that PTC patients who underwent MIVAT had a good outcome during a 5-year follow-up period. The outcome was similar to that for patients treated with conventional thyroidectomy and the same degree of exposure to post-surgical radioactive iodine treatment ($I^{131}$) [5].

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