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CORRESPONDENCE

MINS and postoperative haemoglobin: statistics *versus* reality?

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Editor—Turan and colleagues[1] recently published a retrospective analysis suggesting that the risk of myocardial injury after noncardiac surgery (MINS) may be associated with low postoperative (≤3 days) blood haemoglobin concentration, a relevant hypothesis with limited other data available.[2] However, despite a statistical model adjusting for all potential confounders in Table 1, and where the 'low' haemoglobin group had more hypotension, more colloids, more crystalloids, more bleeding, and more transfusion, the authors did not mention that the different patient groups were not compared according to the actual surgical procedure with regard to the probably more important factor of surgical trauma response (inflammation, etc.). As apparent from Appendix 2, the procedures ranged from non-stressful endoscopy to major abdominal surgery, which pose major differences in not only myocardial function/demand; other organ-specific stress responses are not discussed. Consequently, the relevant topic of postoperative haemoglobin (anaemia) and MINS needs to be studied in more detail under conditions of comparable surgical stress and patients' characteristics.

Declaration of interest

The author declares that they have no conflict of interest.

References

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Reality supported by statistics. Comment on *Br J Anaesth* 2021; 126: e83

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