



## Reply to comment on “Ambiguity about the volume of colloids administration in a clinical study of thoracic esophagectomy precludes conclusion on renal safety of hydroxyethyl starch”

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We thank Dr. C. J. Wiedermann for his interest in our paper [1], which investigated the safety and efficacy of hydroxyethyl starch 6% 130/0.4/9 solution versus 5% human serum albumin in thoracic esophagectomy with three-field lymph-node dissection. The results of our study suggested that hydroxyethyl starch 6% 130/0.4/9 was well tolerated and comparable to human serum albumin in its effect on renal function during thoracic esophagectomy, with no obvious adverse event, particularly, elevation of serum creatinine levels.

We agree with Dr. Wiedermann’s valuable point about our mistake in this manuscript. In our study, 1000 ml of hydroxyethyl starch 6% 130/0.4/9 solution was administered during the thoracic phase of the procedure, at 150–250 ml/h, dependent on the patient’s status and operative duration, in comparison with 1000 ml of human serum albumin administered in the same way.

Dr. Wiedermann’s observation was invaluable for correcting this detail in our paper.

### Compliance with ethical standards

**Conflict of interest** We have no conflicts of interest or financial ties to disclose.

### Reference

1. Wiedermann CJ. Ambiguity about the volume of colloids administration in a clinical study of thoracic esophagectomy precludes conclusion on renal safety of hydroxyethyl starch. *Surg Today*. 2019. <https://doi.org/10.1007/s00595-019-01798-6>.

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