



Letter to the editor regarding “Effectiveness and safety of 0.5% timolol solution in the treatment of pyogenic granuloma: A randomised, double-blind and placebo-controlled study”

Sir,

We read with interest the article “Effectiveness and safety of 0.5% timolol solution in the treatment of pyogenic granuloma,” a randomised, double-blind and placebo-controlled study by Patra *et al.*,¹ in which the use of 0.5% timolol as a topical treatment option for pyogenic granuloma was studied. We appreciate the efforts of the authors to evaluate a topical treatment option for pyogenic granuloma which otherwise needs a surgical intervention. Keeping in mind the clinical utility of the mode of therapy, this article was selected for journal club presentation following which certain discrepancies were noted that we would like to bring to your notice.

In the methodology, the assessment of bleeding tendency which is graded from grade I (excellent) to grade V (no change) should have been mentioned as an assessment of improvement in the bleeding tendency.

Under the ‘results’ section, the authors claimed that most of the pyogenic granuloma patients were males and were from rural areas. However, the clinico-demographic data tabulated [Table 1] is contradictory and depicts most patients of pyogenic granuloma to be females and from urban areas.

There seems to be a disparity in the sizes of images; Figure 2b appears to be of a higher magnification than Figure 2a. Also, the size of pyogenic granuloma in Figure 3b appears to be bigger than Figure 3a. Thus, clinical images are not uniform.

We would also like to bring to your notice that in the section on discussion, it is quoted that four patients had no improvement in the study done by Gupta *et al.*,² whereas the original article by Gupta *et al.* stated that there was no response in three patients.

However, notwithstanding these remarks, we reiterate that the authors have done a commendable job by concentrating on a topic which is not only distressing to the patients but also frustrating to the treating doctors due to recurrences and limited medical management options available.

We, however, conclude that these discrepancies warranted correction in view of the high stature and outreach of our esteemed journal.

Declaration of patient consent

Patient’s consent not required as there are no patients in this study.

Financial support and sponsorship

Nil.

Conflict of interest

There are no conflicts of interest.

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How to cite this article: Monteiro RC, Shetty P, Marne RB, Mysore V, Patil SR. Letter to the editor regarding “Effectiveness and safety of 0.5% timolol solution in the treatment of pyogenic granuloma: A randomised, double-blind and placebo-controlled study”. *Indian J Dermatol Venereol Leprol* 2023;89:76.

Received: August, 2022 Accepted: September, 2022 EPub Ahead of Print: November, 2022 Published: January, 2023

DOI: 10.25259/IJDVL_754_2022 PMID: 36461800

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