

In Response

To THE EDITOR:

We greatly appreciate your comments on our published paper, "Effectiveness and Safety of Hydromorphone Compared to Morphine for Postoperative Analgesia: A Systematic Review and Meta-analysis" (1).

In the letter by Peng et al provided 3 suggestions for future meta-analysis regarding detail subgroup analyses, diversification of data sources and evaluated the long-term outcomes of hydromorphone administration. Although their points are acceptable, we believe they are better suited for a future single trial than meta-analysis research.

The nature of meta-analysis was to combine the findings from each included study (2). However, few original clinical studies have been conducted to compare different doses of hydromorphone to morphine, hydromorphone used in specific patient groups, the metabolism of hydromorphone and morphine in different ethnic backgrounds, or the long-term outcomes of perioperative hydromorphone use versus morphine. As

a result, it is hard to add these to a meta-analysis unless there are enough original studies.

The need for more extensive studies comparing perioperative hydromorphone and morphine in these areas is warranted.

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REFERENCES

1. Li Y, Yue X, Liang S, et al. Effectiveness and safety of hydromorphone compared to morphine for postoperative analgesia: A systematic review and meta-analysis. *Pain Physician* 2024; 27:469-478.
2. Higgins JPT, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA (editors). *Cochrane Handbook for Systematic Reviews of Interventions*. 2nd Edition. Chichester (UK): John Wiley & Sons, 2019.