

## Correspondence

### Simple bone cysts treated by multiple drill-holes

*Sir*—We were surprised to read the recent article by Shinozaki (Shinozaki et al. 1996) particularly the conclusion that a two third failure rate is acceptable in treating simple bone cysts.

We would remind readers of *Acta Orthopaedica* of an even simpler and more successful noninvasive technique. Several authors (Scaglietti et al. 1979, Campanacci et al. 1986) published the results of treatment by intracavity injection with methylprednisolone acetate. These authors reported a 46% complete healing after a single injection and a 96% successful final result. We (Burgers and Taminiau 1995) published comparable results with a recurrence rate of 21%. The treatment with methylprednisolone acetate is in our opinion less invasive and can be done with local anesthesia. No foreign material is left in situ.

Although recently (Kiesler et al. 1994) the percutaneous injection of a mixture of cancellous allograft with autologous red marrow was reported as successful, we are convinced that percutaneous injection of methylprednisolone acetate is the golden standard for noninvasive treatment of simple bone cysts.

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*Sir*—Multiple drill-holes is a treatment for simple bone cysts based on the etiology, as we mentioned in our paper. Some authors have found that venous obstruction in the bone is a case of simple bone cysts (Cohen 1960, 1970, Chigira et al. 1983). We think venous obstruction is not the only etiology of simple bone cysts. Therefore, multiple drill-holes to eliminate the venous obstruction is not the best treatment for all simple bone cysts. However, we think it is worthwhile to report the long-term results of multiple

drill-holes when we consider one of the etiologies of simple bone cysts.

We think the treatment with methylprednisolone acetate is effective in simple bone cysts (Campos 1982). However, no definite reasons are given for the effectiveness of this treatment. Moreover, it is unbelievable that corticosteroid treatment, even local injection, has no side-effects. For these reasons, we disagree about the treatment with methylprednisolone acetate injection.

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