The authors reported no conflicts of interest.

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can safely proceed with it in their own units. Where it pertains to a new surgical technique, it may be very prudent to pay attention when the authors say: "Further studies are required."

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REPLY FROM AUTHORS: BUILDING UP CONSENSUS

Reply to the Editor:

We would like to thank Drs Soumagne and Fortin for their comments regarding transaortic endosonographic needle biopsies.¹ Their experience should be read as a word of caution for all endoscopists performing these complex procedures. In our series, we decided to exclude all patients with severe atherosclerosis or presence of calcifications on the aortic wall on ultrasound, because we believe that the aorta relies on its structural and dynamic properties to heal from the perforation caused by the needle. Certainly there is no practical way to prove this; however, the complication reported by Dr Soumagne in a patient with severe atherosclerotic aortic disease contributes to the growing body of evidence that should guide clinical practice in this relatively new procedure. We completely agree that transvascular biopsy should be contraindicated in patients with vascular disease.

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THE CONTINUED CONDEMNATION OF ROBOTICS—YET ANOTHER CASE OF CONFIRMATION BIAS

To the Editor:

I sit here on the eve of Halloween reading the article by Zhang and colleagues¹ and the associated commentaries, realizing that confirmation bias can be far scarier than any Halloween ghoul or goblin. Song and Flores² note several issues with robotic-assisted lung resection in their commentary before concluding in their final sentence that robotics is "an expensive technology that does not improve clinical care," a definitive statement that I am concerned is based more on opinion and dated literature than an unbiased assessment of the evidence.

Let's start with the condemnation of robotics based on the notion of increased operating room (OR) time and cost. Song and Flores cite a meta-analysis of data from 2002 to 2014 showing increased OR time and similarly dated literature on cost, which upon critical evaluation reveals the