Dear editors,

In his recent paper published in this journal, Matas1 addresses one important and well-studied aspect of post-dural puncture headache prevention, i.e., the use of atraumatic spinal needles. On the other hand, when focusing on standard post-lumbar puncture recommendations, particularly 24 hours bed rest and controlled fluid ingestion, the author refers to four papers in which not only these recommendations are not enforced but, indeed, are explicitly disregarded – as in the case of bed rest – or, at least, considered as unproved, as in the case of fluid ingestion. Although a remark is made about the lack of “experimental support” to the above recommendations, the author does not mention the existence of positive evidence showing the lack of effect of post-lumbar puncture bed rest on the incidence of post-puncture headache, gathered during the last years and analyzed in recent systematic and non systematic reviews2,3. Considering that the inefficacy of these measures had by now been consistently demonstrated by consecutive prospective trials3,4, as already acknowledged by the headache community5, we think that scientific evidence must prevail and the standard bed rest and fluid intake advices following lumbar puncture should be abandoned, instead of reinforced.

Fernando Kowacs

References