Screening History and 7-Year Survival in 32,099 Colorectal Cancer Patients: A Population-Based Cohort Study [Letter]

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Dear editor

We are writing to comment on the article titled “Screening History and 7-Year Survival in 32,099 Colorectal Cancer Patients: A Population-Based Cohort Study” by Bo-Yu Hsiao et al, published in Clinical Epidemiology 2023:15. The study provides valuable insights into the screening history and survival outcomes of colorectal cancer patients. This study used sensitivity analysis to assess the stability of the results, adjusted for various colorectal cancer staging systems, and accounted for common biases in screening impact studies, demonstrating a robust methodology. This study provides important insights into the impact of screening history on the survival of colorectal cancer patients, and contributes to the existing knowledge in this field.

Despite the advantages, we would like to criticize this study for its lack of detailed information regarding patient demographics, comorbidities, and treatment modalities. More detailed information regarding these factors could provide a more comprehensive understanding of the factors affecting colon cancer patient survival. Also, the study did not address the potential impact of lifestyle factors, such as diet and physical activity, on colon cancer survival. Furthermore, the study did not explore potential solutions to overcome barriers such as lack of patient awareness, limited health services, and financial constraints that affect participation in screening and follow-up examinations. Thus, this study has weaknesses in terms of the depth of analysis of factors affecting colon cancer patient survival and the lack of exploration of solutions to overcome related barriers.

To improve the quality of future studies, it is recommended to explore more detailed information regarding patient demographics, comorbidities, and treatment modalities in relation to colon cancer patient survival. In addition, future studies can expand the scope by considering the influence of lifestyle factors, such as diet, physical activity level, and smoking habits, on patient survival. In addition, it is important to explore solutions to overcome barriers identified in this study, such as lack of patient awareness, limited health services, and financial constraints that affect participation in screening and follow-up examinations. Future studies could also expand the analysis by considering the costs and benefits of different screening methods and interventions to overcome these barriers. Thus, future research is expected to provide a more comprehensive understanding and more effective solutions regarding colon cancer management.

In conclusion, the study by Hsiao et al provides valuable insights into the screening history and survival outcomes of colorectal cancer patients. Addressing the identified weaknesses and implementing the recommendations can further enhance the impact of future research in this field.

Disclosure

The authors report no conflicts of interest in this communication.
References

