

Review of: "On The Need For Better Inform Results From Randomized Clinical Trials In Oncology"

Ntokozo Ndlovu¹

1 University of Zimbabwe, Zimbabwe

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This is an article that draws interest to the interpretation of RCTs from a patient management point of view. The authors highlight the importance of reporting HR as well as AR and RR to enhance patient management decisions. Clinical decision-making is, however, much more complex, and many factors that cannot be simply answered by these parameters have a much bigger role to play. These may include the diagnosis (what cancer), setting, costs, and many others.

The authors did not elaborate on the reasons they chose the 5 studies they used as examples. How generalisable are the results to more common cancer diagnoses?

It is stated that patients commonly inquire about the potential for a cure and the likelihood of achieving it, as well as whether the treatment will prolong their life, and, if so, by how much. Quality of life is also very important to patients and should be mentioned in this inquiry. PFS is somewhat a good measure of this, especially if OS is not changed by the intervention. Deliberate inclusion of QOL assessment in RCTs is the best.

The authors should discuss the limitations of reporting HR, AS, and RR in view of the multifaceted nature of discussions on cure and prolonging life in cancer patients.

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