Comorbidities, Treatment and Survival

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The Authors reply — While a minority of men with severe manifestations of certain comorbid diseases will have favorable outcomes, our data suggest that the majority of these men do very poorly. Since there is a spectrum of disease severity within a given disease state — even for the most morbid diseases — men who are preselected for good health (i.e. radical prostatectomy candidates) will inevitably exhibit less severe manifestations of disease. Therefore, the survival estimates associated with comorbidity in a radical prostatectomy cohort will appear inflated compared with those in a broader population of men with newly diagnosed disease. However, we feel that the latter scenario more

accurately models the intended clinical question: How do we quantify the *average* risk of mortality associated with a given comorbidity for a man with newly diagnosed prostate cancer? While we certainly agree that clinical context may alter prognosis estimates associated with a given disease state, we strongly feel that patients (and their doctors) should be well informed of the *typical* prognosis associated with their pre-existing comorbidities, prior to subjective adjustment. These estimates are most accurate when considered in a cohort of men with newly diagnosed disease, rather than those undergoing definitive treatment.

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