LETTER TO THE EDITOR



Comment on article by Christina Puhr Hannah et al.: Clinical characteristics and comparison of the outcome in young versus older patients with upper gastrointestinal carcinoma

Xiao Yang¹ · Chang-sheng Xie²

Received: 16 December 2020 / Accepted: 15 January 2021 / Published online: 27 February 2021 © The Author(s), under exclusive licence to Springer-Verlag GmbH, DE part of Springer Nature 2021

Dear Editor,

We read with great interest the article "Clinical characteristics and comparison of the outcome in young versus older patients with upper gastrointestinal carcinoma" by Christina Puhr Hannah et al. [(1)]. In addition to appreciating the author's efforts, we also point out some problems, which we consider will contribute to the validity of this research.

- 1. As the literature says: these 58 young patients were then matched with the elderly patients based on the gender, tumor stage, histology and tumor location. However, in the "initial tumor stage" of Table 1, the number of the patients in the old group from stage I was 55, while the number of the young group was 58. Is it because the initial tumor stage of the three patients was unknown or were they suffering carcinoma in situ? The author did not analyze this point in this article. Therefore, what we are concerned about is why the other 3 patients were not included in the study.
- 2. The study reported that tumor stage is associated statistical significantly with the OS in young cohort, which is consistent with the results of many studies. However, these young patients of stage I had a median OS of 731 days, which is inconsistent with our clinical observation. Is it because the number of the samples was too small? Or do other reasons account for this?

Chang-sheng Xie xiecslq@126.com

Xiao Yang yangxrgw@126.com

¹ The First Clinical Medical College, Zhejiang Chinese Medical University, Hangzhou 310006, China

² Department of Oncology, The First Affiliated Hospital of Zhejiang Chinese Medical University, 54 Youdian Road, Shangcheng District, Hangzhou 310006, Zhejiang, China

- 3. It would be better to label the units of the axes in Fig. A–D
- 4. Alcohol consumption is a high risk factor for GET (2, 3), which might be included in the study for further analysis.

Compliance with ethical standards

Conflict of interest All authors declare that they have no conflict of interest.

References

- Christina PH, Alexander K, Hossein T, Gerd J, SS Friedrich, P Matthias, I-M Aysegül. Clinical characteristics and comparison of the outcome in young versus older patients with upper gastrointestinal carcinoma. J Cancer Res Clin Oncol 2020.
- Li X, Yu C, Guo Y, et al. (2019) Association between tea consumption and risk of cancer: a prospective cohort study of 0.5 million Chinese adults. Euro J Epidemiol 34(8).
- Odera JO, Xiong Z, Huang C, Gu N, Yang W, Githang'a J, Odera, Paiboonrungruang C, Chen X (2020) NRF2/ACSS2 axis mediates the metabolic effect of alcohol drinking on esophageal squamous cell carcinoma. Biochem J 477(16).

Publisher's Note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.