

## LETTER TO THE EDITOR

## Hepatocellular carcinoma screening among hepatitis B-infected Asian Americans

To the Editor:

Sarkar *et al.* concluded from a retrospective series of 1870 HBsAg-positive Asians living in California that hepatocellular carcinoma (HCC) screening improved survival [1].

However, the results from the two randomized controlled trials in the hepatitis B-infected population are conflicting, and the beneficial effects of HCC screening remains a matter of debate [2,3]. Moreover, previous observational studies also concluded that screening improved survival despite raw data showed that screened patients died younger than nonscreened patients (lead time bias) [4].

Accordingly, the authors must provide: a) the Kaplan–Meier curves for mortality from all causes and for mortality

from HCC in the 1646 active patients (Fig. 3 only provided survival curve in the 51 patients with HCC) comparing screened and unscreened patients; b) the mean age at death and patients' characteristics for both groups.

Last, screening is a complex issue which necessitates a national programme with well-defined surveillance tests and quality controls. Screening advocates must understand that patients deserve evidence-based medicine and that poor evidence is a leading cause of poor compliance, as observed in this retrospective series, a situation precluding efficiency.

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## REFERENCES

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- 3 Braillon A. Hepatocellular carcinoma. *Lancet* 2012; 9840: 469.
- 4 Braillon A. Screening for hepatocellular carcinoma: from lack of evidence to common sense. *Hepatology* 2010; 52(5): 1863–1864.