

Editorial Comment

Prostate cancer is an important public health problem and among the leading causes of cancer mortality worldwide, with an estimated 1.4 million new cases and 375,000 deaths in 2020. The incidence rates in South-east Asia are lower than the other parts of the world (13.5/100,000 age-standardized rate), but mortality remains much higher than in Europe and the Americas.^[1]

Population-based cancer registries exist across India; however, the quality of coverage and limited information published on incidence and survival are important limitations. Furthermore, as highlighted by Budukh *et al.* in this article, the majority of registries are urban, with even deeper lacunae regarding rural statistics.^[2] This article presents prostate cancer data from a predominantly rural population from 2013 to 2016, and being the first such reported population-based study, represents an important contribution to the existing epidemiological literature. It highlights the challenges faced by registry workers who have to hunt down information regarding every patient from multiple sources and then enter and code the data. The authors determined that the age-standardized incidence rate in their population was low (2.3–3.3/100,000), but the majority were diagnosed in an advanced stage. They determined the 5-year observed survival of prostate cancer to be 25% and age-standardized relative survival to be 30.3%.

This is an observational study with significant gaps in the data, making definite conclusions difficult to reach. Its results should be carefully interpreted in light of the limitations in data capture and recording and may not fully

reflect the status of prostate cancer in India. The survival figures reported in this article are low in comparison to global outcomes and are likely related to both the advanced stage at the diagnosis and limited healthcare access in the rural population. Disparities in healthcare access, available treatments and health infrastructure both, between different countries, and within one country, contribute significantly to prostate cancer outcomes.^[3,4]

Given India's progressively increasing life expectancy and aging population, urologists are likely encounter an explosion in prostate cancer in the coming decades. A national policy on screening, diagnosis, and referral for appropriate care is critical and the role of population-based registries in providing accurate and wide-ranging data will become ever more crucial. It is imperative that India uses her physical resources and technological know-how to strengthen these registries and upgrade the existing health infrastructure to provide comprehensive cancer care across the country.

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