

breast cancer screening has been “get your mammogram” rather than “discuss with your primary care provider.” Dr Elizabeth Del Giudice, I note you are from Sunnybrook Hospital in Toronto, Ont, and there was just a full-page advertisement in *The Globe and Mail* from the Louise Temerty Breast Cancer Centre in Sunnybrook Hospital entitled, “Are you walking around with undetected cancer?”

I know how challenging it is to change the narrative here, but I would really like to see Cancer Care Ontario’s messaging changed at the very least. Any thoughts on this?

In addition, the “conditional recommendation” is not explained and we do not come across it that often in the Grading of Recommendations Assessment, Development and Evaluation system.

Finally, the recommendation to screen high-risk patients with colonoscopy is certainly what everyone is doing, but it is not what the Canadian Task Force on Preventive Health Care recommends<sup>2</sup>; they state, “We recommend not using colonoscopy as a screening test for colorectal cancer. (Weak recommendation; low-quality evidence).”

Thanks for this summary; it highlights the key issues!

—Jennifer P. Young MD FCFP(EM)  
Collingwood, Ont

#### Competing interests

None declared

#### References

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## Use of Roth score in virtual assessments

In response to the commentary in the January issue of *Canadian Family Physician*,<sup>1</sup> I note that virtual assessments have limitations but that the indiscriminate use of in-person examinations and imaging risks overusing resources that are already critically limited during the pandemic. We urgently need research to help identify mild cases of coronavirus disease 2019 (COVID-19) in community contexts and need to know how to manage low-risk patients presenting with dyspnea through virtual assessment.

The Roth score was suggested as a potential tool to assist in the virtual evaluation of patients with dyspnea.<sup>2</sup> There has been substantial controversy surrounding the Roth score. It was the topic of multiple expert reviews.<sup>3-5</sup> In essence, the Roth score is not validated and should not be used in isolation or at all.

While it is essential for clinicians not to be swayed by an unvalidated tool, we are disheartened that

there has not been additional research into the Roth score. We are only aware of 1 study that further investigated the correlation between Roth score and saturation of oxygen.<sup>6</sup> Further research needs to be conducted on clinical assessment tools of this kind if any validated methods of virtual evaluation are to be established.

We are currently undertaking a research study, “Assessing dyspnea using virtual care during COVID pandemic (ADViC2),” which aims to investigate any correlation between the Roth score, saturation of oxygen, and other patient-oriented outcomes (eg, hospital admission and additional clinical visits). Additional information is available at <http://advicstudy.ca>.

—Tung Siu MD CCFP

—Bobbi Bennett RN

Vancouver, BC

—Kaitlyn Ramsay

Victoria, BC

**Competing interests**

Dr Siu and Ms Bennett are investigators and Ms Ramsay is Research Coordinator of the “Assessing dyspnea using virtual care during COVID Pandemic (ADViC2)” research project.

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