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## ***Racial Designations in Registries***

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I read with interest the recent study by Navarro et al. (1) Investigations looking into ethnicity as a possible factor affecting treatment outcome not only help practicing clinicians better tailor intervention recommendations for individual patients, they can also help determine how applicable the results of research done on a particular population may be to completely different populations. In the spirit of disclosure, I know the lead author personally, have great admiration for him, and congratulate this group on yet another well-done investigation using the power of their institution's large and no doubt diverse patient registry. I'm writing to get clarification on some details not in the published paper regarding the issue of racial assignment in that registry, as ethnicity is the central focus of this study of the need for revision following anterior cruciate ligament reconstruction. The missing details raise two questions in my mind.

The first question is: How was race/ethnicity determined? Was it self-selected by the patient/family? Or, was it assigned based upon impressions by the surgeon, primary care physician, other healthcare worker, or even non-healthcare personnel? One might assume it was self-selected, but stating if that was in fact the case would remove any doubt.

The second, and perhaps thornier, question is: What is meant by the word "Asian" in this investigation? Is it referring to anyone with ancestry from the continent of Asia? Or, is it referring only to East Asian ancestry? Though the latter is often how this term is used in common parlance in some circles, it is neither universally so used, nor is such usage commensurate with the spirit of being inclusive or scientifically valid. Indeed, to use the term "Asian" to mean only those from the eastern part of the world's largest and most diverse continent is to exclude (and thereby not take into account) more than 2 billion people – roughly half the continent's population! (2) As I have pointed out in a previous eLetter to this Journal, it is for both the sense of inclusivity, as well as accuracy/scientific validity, that more specific terminology such as "East Asian", "South Asian", "Central Asian", etc., be employed, unless one is truly referring to the vast majority of the population of that continent, for which the term "Asian" would then be both appropriate and valid. (3)

If the registry used in the investigation by Navarro et al. does not contain such granularity about Asian ethnicity, this would be a study limitation, and I would encourage the authors to work towards improving specificity regarding the term “Asian” in their institution’s registry going forward. (1) I also encourage other such databases to do likewise; and again implore this Journal, and others, to specifically consider that prior to publishing submitted work touching on the topic of Asian ethnicity. I look forward to the authors’ response, as well as future excellent investigations by them furthering our knowledge and understanding of the field of orthopaedic surgery.

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## References

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Conflict of Interest: None Declared