

## Wilson's disease—An early diagnosis to improve outcomes

### To the Editor

We read with interest the article by Aberg, et al.<sup>1</sup> on mortality and co-morbidities in patients with Wilson's disease (WD). Previously, well-designed epidemiological studies employing appropriate control groups and adjusting for co-morbidities were lacking.<sup>1-4</sup> Considering co-morbidities in studies on mortality in WD is important because WD affects many organ and systems, including also an increased risk for cardiovascular disorders such as atrial fibrillation.<sup>1,5</sup> WD is treatable, with outcomes depending primarily on an early diagnosis and adherence to anti-copper treatment.<sup>5</sup> To date, several factors have been associated with reduced survival in WD, such as liver cirrhosis or a considerable neurological deficit.<sup>2-5</sup> Similarly, Aberg, et al.<sup>1</sup> found a substantially increased risk of death among patients with neuropsychiatric symptoms of WD.<sup>2</sup> Long-term results from our registry of WD showed that, especially between 1960 and 1999, the diagnostic delay had systematically decreased.<sup>2</sup> This process remains similar over the last 3 decades, however, with greater variability (from 5 to 60 months), which resulted in fewer patients displaying neuropsychiatric symptoms at diagnosis.<sup>2</sup> Our results from the last decades show that there are still WD patients waiting for a long time for appropriate diagnosis, which should be reformed to improve the WD patients outcome. We are convinced that diagnosing WD in pre-symptomatic patients or in those with mild hepatic symptoms will only extend survival.<sup>2,4</sup> Our goal should be to diagnose WD early and to treat it effectively so that patients with WD have a similar life expectancy as observed in the general population.

### AUTHOR CONTRIBUTIONS

**Tomasz Litwin:** Conceptualization; project administration; supervision; writing - original draft; writing - editing and review. **Agnieszka Antos:** Conceptualization; writing - original draft; writing - editing and review. **Lukasz Smolinski:** Conceptualization; writing - original draft; writing - editing and review.

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### CONFLICT OF INTEREST STATEMENT

The authors declare no conflict of interest. All financial involvement (e.g., employment, consultancies, honoraria, stock ownership or options, grants, patents received or pending, royalties) with any organization or entity with a financial interest in, or financial conflict with, the subject matter or materials discussed in the submitted publication have been completely disclosed. We have no financial interests relevant to the submitted publication.

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### DATA AVAILABILITY STATEMENT

Data sharing is not applicable to this article as no new data were created or analyzed in this study.

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