



The Groningen Defecation and Fecal Continence Questionnaire: the long way of an organized and methodical translation of Dutch to English, English to Chinese, and back to English and Dutch versions

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Functional constipation is the worldwide most prevalent bowel disorder, with prevalence rates of 11.7% (95% CI, 11.4–12.0%) (1). Recently, Bajaj *et al.* (in 2023), in an Editorial exploring gastrointestinal diseases across the lifespan, characterized constipation as a “vexing issue that, unfortunately, has the potential to impair health-related quality of life” (2). Accordingly, evaluating constipation is challenging, and the development and validation of questionnaires could be beneficial. Indeed, scores have been widely used in medical practice and support to standardize demographics, clinics, laboratories, imaging, and other information. Scores may assist in diagnosis, management, prognosis, and therapeutic decision.

Based on these assumptions, Meinds *et al.* (3) developed a Dutch instrument to contribute to these questions, including information on Constipation and Fecal incontinence. The questionnaire is based on the adult Rome IV criteria (4,5) and stool consistency according to the Bristol stool form scale (6). Posteriorly, the DeFeC questionnaire was translated from Dutch to English and

established that the contents of the English versions were the same as the original in the Dutch language (3). The questionnaire was appropriate and with good validity, reproducibility, and feasibility. Finally, the authors declared that the Groningen DeFeC questionnaire is of good quality for clinical and research studies and also emphasized that minimal cross-cultural adaptation is required before extending the questionnaire to other countries.

Based on these potentials, Sun *et al.* proposed translating and validating The Groningen DeFeC questionnaire to a Chinese version, according to the international Consensus (COSMIN) (7). Their manuscript, “*Validation of the Chinese DeFeC questionnaire: A comprehensive screening tool for symptoms and causes of constipation and incontinence*”, was submitted to the *Annals of Palliative Medicine* (8).

So, as expected, a few items, such as demographic, geographical, and educational level, were adjusted. Also, considering the Chinese population’s different eating habits, cereals replaced bread. Additionally, following the same reasoning, a spicy food intake was added. Surprisingly, it is

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essential to remember that four questions on dietary habits were adapted from the Dutch to the English version (3). The adjusted Chinese version of the questionnaire demonstrated reproducibility and feasibility, indicating good comprehension among an adequate sample of respondents. So, The Groningen DeFeC questionnaire can be applied to the Chinese population. Although the questionnaire consisted of 88 questions, on average, it only required 20 min to complete the adult version, longer than the Dutch version, with a median time of 15 min.

In this study, the authors put a tiny grain of sand in the theory of globalization, transferring an instrument to assess Constipation and Fecal incontinence in an organized, systematic way. Originally from the Dutch language, moving to the English language to finally make a successful adaptation to the Chinese language.

In globalization, people's lives and destinies are increasingly economically, politically, and culturally linked. Thus, we are getting closer to each other. In McLuhan's theory, instant communication allows sharing the same experience almost simultaneously as if no distance separated us. Indeed, McLuhan proposed that we live in a "global village" where each person becomes part of everyone else's stories and experiences. Indeed, globalization informs every aspect of life, and health would inevitably not be excluded from this globalization. Medicine can give them the best for their physical, moral, and social well-being. So, translation of Dutch to English, English to Chinese, and back to English and Dutch versions are part of this process.

Undoubtedly, the authors are to be congratulated for carrying out this study. Subsequently, future translation of the Pediatrics version (9) may be helpful for clinical and research studies in Chinese children and adolescents.

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