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Supplement Articles

Editorial: the cancer screening controversy

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CONTENT NOT FOR REUSE

Editorial S1

Editorial: the cancer screening controversy

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Cancer screening can lead to important benefits, but it can also lead to important harms.

It is generally agreed that a cancer-screening test should be offered to an entire population if the test reduces mortality due to that type of cancer.

However, controversies regularly erupt about which tests are most beneficial, how often they should be performed, and at what age screening can be discontinued. This supplement reviews evidence about screening for colon, prostate, and breast cancer. Although several cancer-screening strategies are clearly established, new controversies arise regularly regarding what physicians should be doing to screen their patients for cancer.

Cancer Societies are changing their guidance on cancer screening to emphasize the risk of overtreatment. Selling screening can be easy: induce fear by exaggerating the risk, offer hope by exaggerating the benefit of screening, and avoid mentioning the potential risk. It is especially easy with cancer. Many of the messages use familiar tactics, highlighting large numbers (the figure of 30,000 deaths) rather than the much smaller 10-year risk of dying from prostate cancer (<1% until the age of 70).

Several researchers, reviewing messages disseminated by government mammography screening programmes in seven European countries, showed that even nations sell screening. Three-quarters of the leaflets failed to quantify the benefit of screening; none mentioned the most important harm of screening, i.e., overdiagnosis (the detection of cancers never destined to cause symptoms or death).

Unfortunately, promoting informed decision-making is far more difficult than selling screening. Informed decision-making requires credible information about the benefits and harms of screening. To understand the true effect of screening, people need the numbers. Fortunately, there is a growing evidence that people can understand the numbers if they are presented clearly.

By understanding the limitations of screening, researchers can develop better tests. Cancer is a complex disease. Governments strive to provide clear messages about cancer screening, but simple messages are not always possible, and can do a disservice to the people they serve.

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