

Opinion: Stop misleading women on breast screening

By Dr. László Tabár, AuntMinnieEurope.com contributing writer



July 6, 2018 -- I feel I must respond to the article about the cost-effectiveness of breast screening, published yesterday by *JAMA Oncology* and [reported on](#) by *AuntMinnieEurope.com*.

In my view, everything the authors write about is totally wrong. The article is based on the worst kind of modeling, not reality. It is simply another example of the type of "nonscience" published by a leading tabloid journal.



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The Dutch government has conducted extensive research on this topic and has estimated that the cost of one year of life saved is 1600 euros, so it's a mystery how the *JAMA Oncology* authors arrive at a figure more than 10 times higher. Also, evidence shows the so-called overdiagnosis rate is between 1% and 5% in the hands of professionals, and many articles can be cited to prove this.

In addition, it is a well-known fact that 64% of breast cancer patients do not have any so-called risk factors. Women need to know about these facts before some decision-maker withdraws the offer of screening for them. Women deserve the correct and honest information. Decision-makers must not be misled.

People should know about the recent article published in the [*New England Journal of Medicine*](#) (Sparano et al, "Adjuvant Chemotherapy Guided by a 21-Gene Expression Assay in Breast Cancer," 3 June 2018). This states that the majority of chemotherapy given today does not result in better survival. People should be made aware of the enormous overtreatment, and, as these authors suggested, if one wants to save money, we should save on overtreatment.

Women should be informed about the overtreatment issue -- as we wrote about 26 years ago, but nobody listened to us:

"Screening has made possible the detection of a large proportion of non-negative tumours less than 15 mm (i.e., before the development of viable metastases), and there is substantial evidence that local-regional therapy is effective in these cases and that adjuvant systemic therapy has negligible scope to improve the survival of patients with these tumours; also, the notion of "early" breast cancer for tumours up to 50 mm is clearly outmoded" (Tabár et al, *Lancet*, May 1992, Vol. 339:8801, p. 1108).

Women and decision-makers must not be misled in this way by articles like the new one in *JAMA Oncology*. It is simply unethical. The tabloid journals continue to publish one poor-science article after the other. These articles are populist, not scientific.

Enough is enough! Those who talk about "harms of screening" never talk about the harm of not being screened.

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