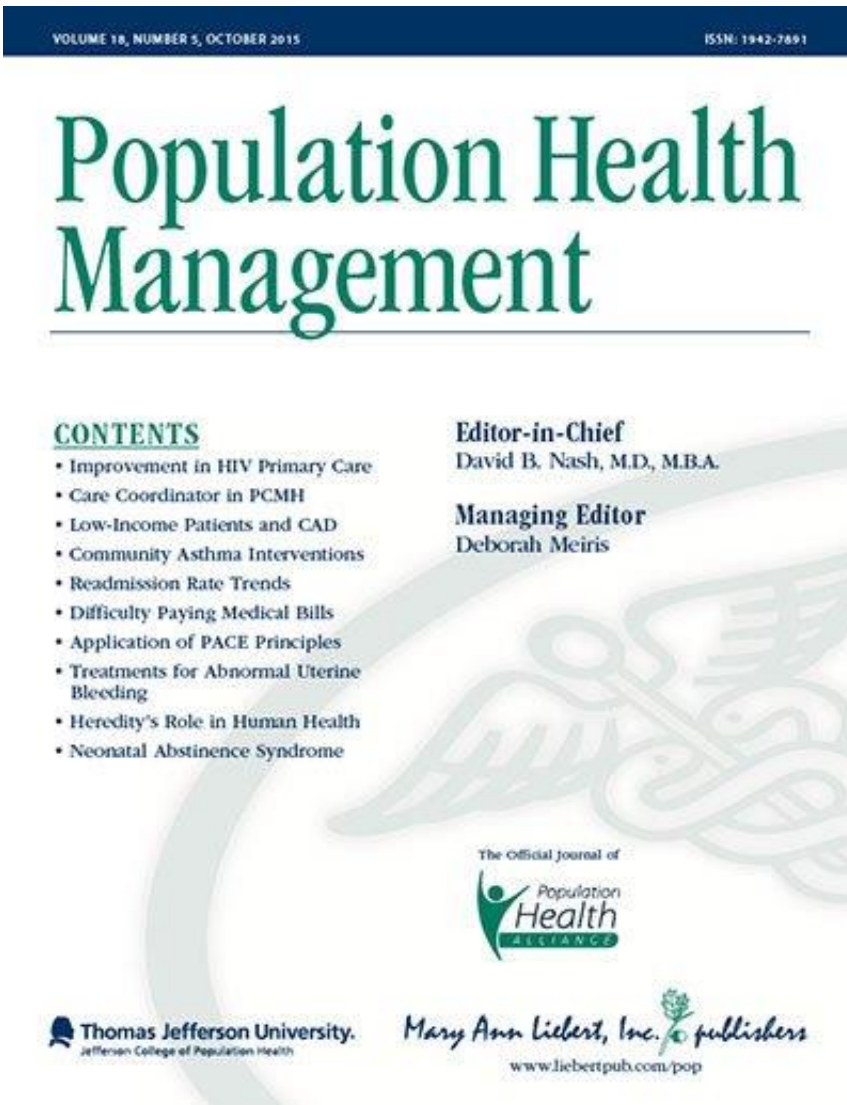


# Underdetection, not overdiagnosis, is the real problem in breast cancer screening

September 29 2015



VOLUME 18, NUMBER 5, OCTOBER 2015 ISSN: 1942-7891


## Population Health Management


**CONTENTS**


- Improvement in HIV Primary Care
- Care Coordinator in PCMH
- Low-Income Patients and CAD
- Community Asthma Interventions
- Readmission Rate Trends
- Difficulty Paying Medical Bills
- Application of PACE Principles
- Treatments for Abnormal Uterine Bleeding
- Heredity's Role in Human Health
- Neonatal Abstinence Syndrome

**Editor-in-Chief**  
David B. Nash, M.D., M.B.A.

**Managing Editor**  
Deborah Meiris

The Official Journal of  
  
Population Health ALLIANCE

 **Thomas Jefferson University.**  
Jefferson College of Population Health

*Mary Ann Liebert, Inc.*  publishers  
[www.liebertpub.com/pop](http://www.liebertpub.com/pop)

Credit: Mary Ann Liebert, Inc., publishers

While screening mammography has a well-established history of reducing death from breast cancer and enabling earlier detection of breast disease, questions regarding overtreatment and overdiagnosis have entered the screening debate. A new review article discusses the topics of overdiagnosis and overtreatment and the role of providers and technology to address the issues in the context of population health. The article appears in a new supplement to *Population Health Management*.

["Implications of Overdiagnosis: Impact on Screening Mammography Practices"](#) provides a detailed review of the benefits and limitations of current [screening mammography](#) practices, and outlines the complexities of the issues from both clinical and methodological perspectives. Coauthors Elizabeth Morris, MD, Memorial Sloan-Kettering Cancer Center and Weill Cornell Medical College (New York, NY), Stephen Feig, MD, University of California Irvine Medical Center and School of Medicine, Madeline Drexler, Harvard T.H. Chan School of Public Health (Boston, MA), and Constance Lehman, MD, Massachusetts General Hospital (Boston, MA) state that "the key goal should not be less diagnosis but better information and improved treatment decision tools." They describe the results of large-scale studies with a new imaging technology, breast tomosynthesis, which provides a digital, 3-dimensional, high resolution view of the breast that has been shown to reduce false recall (or false positive) rates by 15-30%, while at the same time increasing the overall cancer detection rate by about 29%.

"This supplement contains a well-researched, balanced discussion of the evidence on a controversial topic—[overdiagnosis](#) as it relates to mammography screening practices—and presents a strong case for considering newer screening technologies as important tools for reducing the likelihood of overdiagnosis of [breast cancer](#)," says Editor-in-Chief David B. Nash, MD, MBA, Dean and Dr. Raymond C. and Doris N. Grandon Professor, Jefferson School of Population Health (Philadelphia, PA), in his Editorial ["Evidence in the Age of Social Media"](#).

The supplement was funded by an educational grant from Hologic, Inc.

**More information:** The supplement is available free on the [\*Population Health Management\*](#) website.

Provided by Mary Ann Liebert, Inc

Citation: Underdetection, not overdiagnosis, is the real problem in breast cancer screening (2015, September 29) retrieved 19 April 2024 from <https://medicalxpress.com/news/2015-09-underdetection-overdiagnosis-real-problem-breast.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.