

# Drop the C-word to reduce anxiety and overtreatment, say experts

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Medical researchers are calling for the word 'cancer' to be dropped from some doctor-patient conversations in a bid to reduce patient anxiety and harm from over treatment. The appeal in today's *BMJ* follows mounting

evidence that patients who are told they have 'cancer' for low risk conditions more often choose surgery than those whose condition is described with terms such as 'lesions' or 'abnormal cells'.

"There is a growing body of evidence that describing a condition using more medicalised labels, including the use of the term '[cancer](#)', can lead to an increased preference for more invasive treatments," says Professor Kirsten McCaffery of the University of Sydney who co-authored the *BMJ* analysis with colleagues from Bond University and the Mayo Clinic in the US.

"This supports calls to remove the cancer label, where it is appropriate."

"A prime example of this is low risk [papillary thyroid cancer](#)," says Brooke Nickel of the University of Sydney who led the analysis.

"Studies show that progression to clinical disease and tumour growth in patients with small papillary thyroid cancer who choose surgery are comparable to those who monitor their condition."

Similarly, in localised prostate cancer where [active surveillance](#) has been a recommended management option for many years, studies show that internationally most men still prefer radical prostatectomy or radiation therapy.

Active surveillance involves closely watching a patient's condition but avoiding [treatment](#) unless there are changes in test results that show the condition is getting worse.

"While active surveillance is increasingly being recognised as a safe management option for some patients with cancer, there is still a strong belief that aggressive treatments are always needed," says Professor McCaffery.

The authors say cancer types that could be considered for re-naming include intrathyroidal papillary thyroid cancer (

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