Letter to the editor, Re Focusing on overdiagnosis as a driver of too much medicine, 9 September 2018.

https://www.bmj.com/content/362/bmj.k3494/rapid-responses

Those currently voicing concerns about overdiagnosis will be interested to learn that discerning doctors raised similar concerns more than half a century ago. In 1967 Dr John Stallworthy, Professor of Obstetrics and Gynaecology at Oxford, praised a new book by Australian doctors Malcolm Coppleson and Bevan Reid as ‘remarkable’ and ‘a great achievement by two young scholars’.

In their book on ‘preclinical carcinoma of the cervix uteri’, Coppleson and Reid wrote, ‘We believe the ease of diagnostic methods and the vigour and skill of those employing them have presently outstripped the availability of basic knowledge or their assimilation and correct interpretation.’ They considered there was much ‘room for doubt of many of the more serious interpretations placed on cells or tissues removed from the cervix’ by cone biopsy, and explained, ‘These thoughts have become the basis of our conservative approach’.

These viewpoints were closely echoed in Professor Brodersen and colleagues’ comment in this contribution to the BMJ, where they wrote: ‘Our ability to diagnose often outpaces our understanding of prognosis, making some degree of overdiagnosis inevitable… Technological advances… aggravate the problem, helping us find less severe abnormalities earlier, long before we know what they mean or whether they need to be treated.’

Stallworthy considered Coppleson and Reid’s approach ‘opportune and challenging at a time when community-screening programmes are not only identifying increasing numbers of women with “doubtful” cervices, but are submitting many of them to the danger of unnecessary mutilating surgery’. However, these views were then, and are still now, often silenced by what Brodersen et al. call the ‘popularity paradox’.


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