I've Opted Out of Mammography: Informed Decision-Making from A Patient's Perspective

Christie Aschwanden
***Washington Post* Health Columnist**
Christie@nasw.org
@CragCrest
ChristieAschwanden.com

The “doctor knows best” approach

Photo by NCI, via Wikimedia Commons

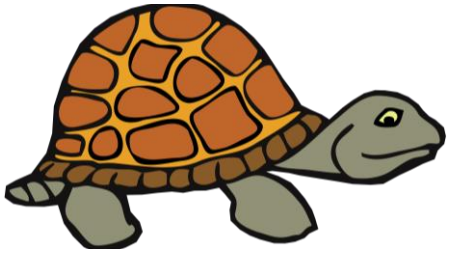
WAIT! I want to make an informed decision:

- Why are you recommending this for ME?
- What do you expect will happen if I get this test?
- What's the best case scenario? Worst case? And what are the other possible outcomes?
- What will happen if I DON'T get the test?

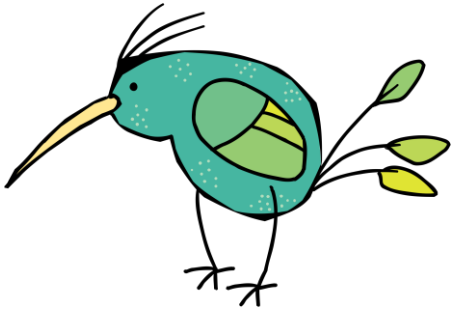
The "Early Detection is Your Best Protection" fable.

Three common patterns

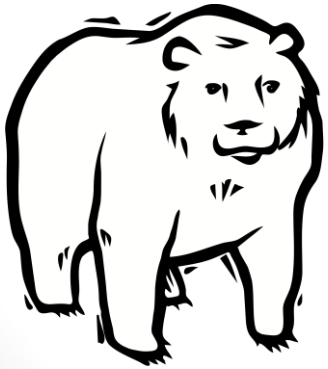
(Barry Kramer, ***Director, Division of Cancer Prevention, NCI***)



Turtles move so slowly that they'll never hurt you.



Birds fly away so quickly that they've escaped the breast before you can spot them.

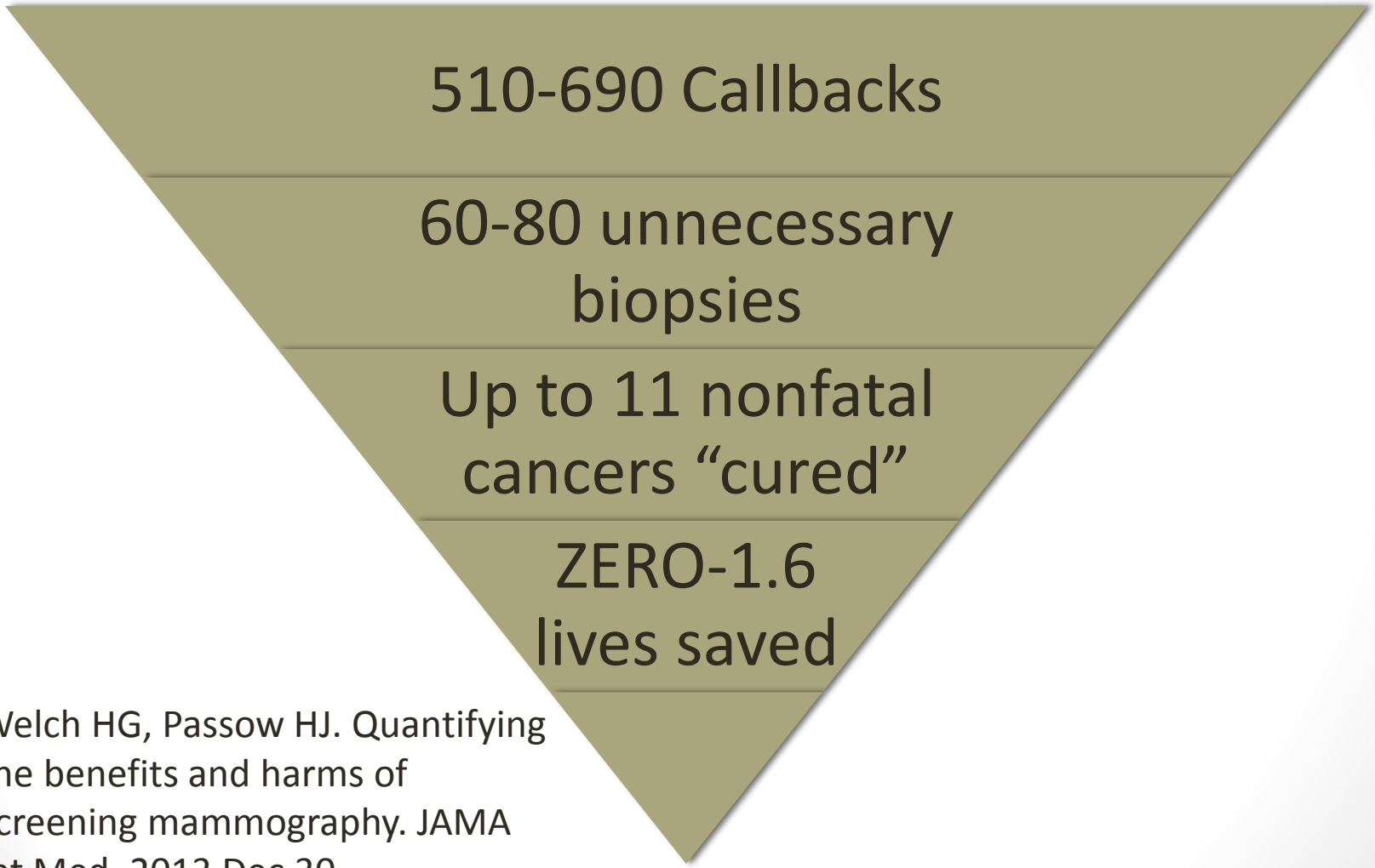


Bears can escape if given enough time, but you can capture them if you find them before then.

5 Possible outcomes of mammogram:

- **No cancer found.**
- **Callback (false positive).**
- **Indolent “turtle” cancer “cured.”**
- **Fatal “bird” cancer is found sooner. Die anyway.**
- **Life is saved.**

If 1,000 40-year-old women get annual mammograms for 10 years:



Welch HG, Passow HJ. Quantifying the benefits and harms of screening mammography. JAMA Int Med. 2013 Dec 30.

1,000 women screened annually for 10 years:

Age 40-49	Age 50-59	60-69
510-690 false positives	490-670 false positives	390-540 false positives
60-80 unnecessary biopsies	70-100 unnecessary biopsies	50-70 unnecessary biopsies
Up to 11 indolent cancers “cured” (overdiagnosis)	3-14 indolent cancers “cured”	6-20 indolent cancers “cured”
0.1-1.6 lives saved	0.3-3.2 lives saved	0.5-4.9 lives saved

We've overstated mammography's benefits and too often failed to disclose its potential harms.

IF mammography ↓ breast cancer deaths 35% (most optimistic estimate), THEN 65% destined to die of breast cancer will STILL die, even with mammograms.

Chances that a woman with screening-detected breast cancer had her life saved is 13% or less.

Canadian study finds NO benefit, ONLY harms.

The overdiagnosis dilemma:

Canadian study: 22% overdiagnosis
If DCIS is included then **1 in 3 cancers** detected by mammogram is overdiagnosis

Other studies: overdiagnosis =5% - 54%.

In every age group, the number of indolent cancers "cured" exceeds the number of lives saved.

So what should I do?

How I made an informed decision:

Why for ME? → No compelling answer.

What will happen? → 50% chance false positive

Best case? → My life is saved. (Evidence weak, but the stakes are high.)

Worst case? → Die of cancer, but spend more of my life undergoing ultimately futile treatment.

Other possibilities? → Lose breast, get treatment for harmless cancer.

What if I DON'T? → Risk of dying from breast cancer increased by less than 1%.

My decision → NO

Christie Aschwanden

Washington Post columnist
Independent Journalist
ChristieAschwanden.com
christie@nasw.org
@CragCrest