These two recent European studies provide information regarding estimates of overdiagnosis attributed to mammographic screening. Both show overdiagnosis rates far less than estimates of Drs Bleyer and Welch (N Engl J Med. 2012 Nov 22;367(21)).

Puliti et al of the EUROSCREEN Working Group (Journal of Medical Screening 2012; 19 suppl: 42-56)) reviewed 13 primary studies. They show the importance of accurate adjustments for lead time and breast cancer incidence changes. The most “plausible estimates of overdiagnosis” were 1%-10%. Figure 1 shows the difference in over diagnosis estimates of adequately adjusted and not adequately adjusted estimates. Read the full Puliti et al article here.

Gunsoy et al (Breast Cancer Res. 2012 Nov 29;14(6)) provides information important for screened women age 40-49. They estimate overdiagnosis based upon randomized trial data (“Age Trial”) of annually screened United Kingdom women age 40-49. Using actual data from the trial and mathematical simulation models, overdiagnosis rate was estimated as 0.7% (range 0.3% -2.2%). They conclude annual screening to be most suitable due to short cancer sojourn time in women age 40-49. Read the full Gunsoy et al article here.