

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](#).*