

Factors behind the epidemic of breast cancer diagnoses in France

Cancer is a constantly changing pathological process. In order to decide if cancer is present or not, the pathologist applies histological criteria to a sample at a given point in time. Comparing the frequency of breast cancer diagnosis in a group that has been screened many times against a group screened only at the end of a similar study period shows that overdiagnosis does take place. The more you look, the more you find. The smaller the tumour, the less valid the diagnosis. The purpose of this study is to show the link between the promotion of screening in France and the epidemic of breast cancer diagnoses.

Breast cancer frequency was estimated by studying breast cancer mortality, registered breast cancer diagnoses and surgical interventions on breast cancer performed over time in France. Appraisal of screening practices was based on the increase over time of mammography facilities.

There was no significant change in breast cancer mortality, whereas incidence of cancer diagnoses increased in France between 1980 and 2000. In 1980, there were 8362 breast cancer deaths and 21 211 new diagnoses. The corresponding numbers for 2000 were 10 950 deaths and 41 845 new diagnoses. Over the same period, mammography facilities in operation in France increased from 308 to 2511. Between 2000 and 2003, the annual number of surgical interventions for breast cancer increased from 53 411 to 63 628.

A meta-analysis questioning the effectiveness of mammography screening was published in January 2000. Soon afterwards, a professional who had done drug marketing work in the United States was appointed in France to produce an official report setting aside the conclusions of this meta-analysis. Since then, France's breast cancer screening policy has grown ever stronger. The trend in breast cancer mortality does not support the hypothesis of an increase in the occurrence of breast cancer. Treatment of false positives is harmful. Breast cancer screening is a key component of the spread of oncological treatment. It helps to explain why cancer drugs are now among the top-selling medicines in the world.

Collective authorship: ©FORMINDEP

Manuscript prepared by Bernard Junod, MD, MPH

Conflicts of interest : none declared; read also Formindep's ethics charter, attached