

LETTERS



NHS HEALTH CHECKS

NHS health checks are a waste of resources

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News that the government defends NHS health checks for 40-74 year olds but promises evaluation deserves more attention.¹ General health checks have been evaluated: they neither reduce morbidity nor mortality, overall, for cardiovascular disease, or for cancer.²⁻⁴

The government was warned. In 2008, the prime minister announced "everyone in England will have access to the right preventative health check-up." The president of the Faculty of Public Health stated "We are not convinced about the evidence base. There is a danger of medicalising social inequalities . . . We should be focusing on disadvantaged communities—not finding more worried well." History repeatedly shows that good intentions and "common sense" kill in the name of prevention (for example, prone sleeping recommendation for infants). We should always demand evidence rather than succumb to delusion.

The government response to the Science and Technology Committee (whose MPs recognised health checks as screening) continues to fly in the face of evidence.⁵ The claim that health checks are not screening is ludicrous and would be laughable if so much money (£6bn (€8.1bn; \$9.2bn) over a decade) and people's wellbeing were not at stake. Theoretical literature on the purported distinction between screening and "risk assessment/risk management" has not been supplied despite repeated requests to those implementing the programme locally and nationally (S Bewley, personal communication). Medically qualified officials working for the government who are required to provide health checks must be uncomfortable with

pseudoscience. Our concerns are not only for their cognitive dissonance but for frontline NHS professionals who are forced to waste resources prioritising the well over the sick. Willingness to invest their effort, sense of importance, enthusiasm, and pride is below average in NHS employees.⁶ Is this surprising?

Competing interests: We have read and understood BMJ policy on declaration of interests and declare the following interests: SB has not had a health check as her invitation leaflet did not quantify the risks or benefits and they are not recommended by the National Screening Committee. Her DOIs can be found at <http://whopaysthisdoctor.org/doctor/58>. CP is the principal investigator of the Inter-99 study.

Full response at: www.bmj.com/content/350/bmj.h581/rr-0.

- O'Dowd A. Government defends NHS health checks for people aged 40-74 but promises evaluation. *BMJ* 2015;350:h581. (2 February.)
- Krogsbøll LT, Jørgensen KJ, Grønhoj Larsen C, Gotzsche PC. General health checks in adults for reducing morbidity and mortality from disease: Cochrane systematic review and meta-analysis. *BMJ* 2012;345:e7191.
- Saquist N, Saquist J, Ioannidis JP. Does screening for disease save lives in asymptomatic adults? Systematic review of meta-analyses and randomized trials. *Int J Epidemiol* 2015; published online 15 Jan; doi:10.1093/ije/dyu140.
- Jørgensen T, Jacobsen RK, Toft U, Aadahl M, Glümer C, Pisinger C. Effect of screening and lifestyle counselling on incidence of ischaemic heart disease in general population: Inter99 randomised trial. *BMJ* 2014;348:g3617.
- Department of Health. National health screening: government response. 2015. www.gov.uk/government/publications/national-health-screening-government-response.
- Jeve YB, Oppenheimer C, Konje J. Employee engagement within the NHS: a cross-sectional study. *Int J Health Policy Manag* 2015;4:85-90.

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