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Letter to the Editor

Screening for prostate cancer: a public campaign, evidence-based-medicine and conflicting interests

Participation is a key process for the efficacy of cancer screening programs. However, concern for the assessment of the effectiveness of mass publicity campaigns seems to be lacking. Indeed, if you do a query on Pubmed with the following key words <'public campaign'+screening+cancer+evaluation> fewer than three dozen papers come up.

In 2005, in France, the number of men who underwent prostate cancer screening was higher than the number of those who had colorectal cancer screening. And yet, the benefit from the former screening has not been proven despite numerous attempts over the past 15 years; additionally, it is not organized by the French national health service, whereas the colorectal screening has proven beneficial over mortality and is publicly organized.

We have studied the impact of the annual public campaign of the Association of Urologists which promotes annual screening for prostate cancer, since September 2005 (Fig. 1). Data were obtained from the main regional health insurance system (URCAM, Union Régionale des Caisses d'Assurance-Maladie) which covers 90% of the population of the Picardy region (1.9 million inhabitants).

From June to September 2006, 6.0 Prostate Specific Antigen assays were performed monthly per 100 general practitioner examinations of men over 40 years. After the September 2006 public campaign, the figures went up to 7.1 from October to December.

From June to September 2007, 6.6 PSA assays were performed monthly indicating that the effect of the 2006 public campaign was sustained. After

the September 2007 public campaign, the rate rose to 6.9 from October to December. The effect of the 2007 public campaign may have been blunted by the controversy arising from two scientific papers which were discussed in major newspapers (i.e. *Le Monde* July 11 and September 18 and *Le Figaro* 14 and 15 October).

The effect of public campaigns based upon hope or fear seems greater than scientific evidence for participation in screening cancer programs.

September 2008 has seen the fourth campaign of the French Association of Urologists. Indeed, national agencies such as the National Cancer Institute and HAS (Haute Autorité de Santé, i.e. the Health Authority Watchdog) have

The marketing slogan used by the urologists! « Don't bargain with your prostate"



Figure 1 The marketing slogan used by the urologists! "Don't bargain with your prostate"

remained almost silent, except for the Parliament Public Health Assessment Committee (OPEPS, Office Parlementaire d'Evaluation des Politiques de Santé). The Committee has designated a working group to evaluate the issue of prostate cancer screening issue. The working group is chaired by a French Member of Parliament, who is an urologist. They have mandated the French Association of Urologists.

In France, the burden of prostate cancer screening is estimated at 8400 cases of septicaemia and haemorrhages due to biopsies and 33 000 complications (impotence, incontinence, ...) due to treatment. This should suffice to prevent conflicts of interest!

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