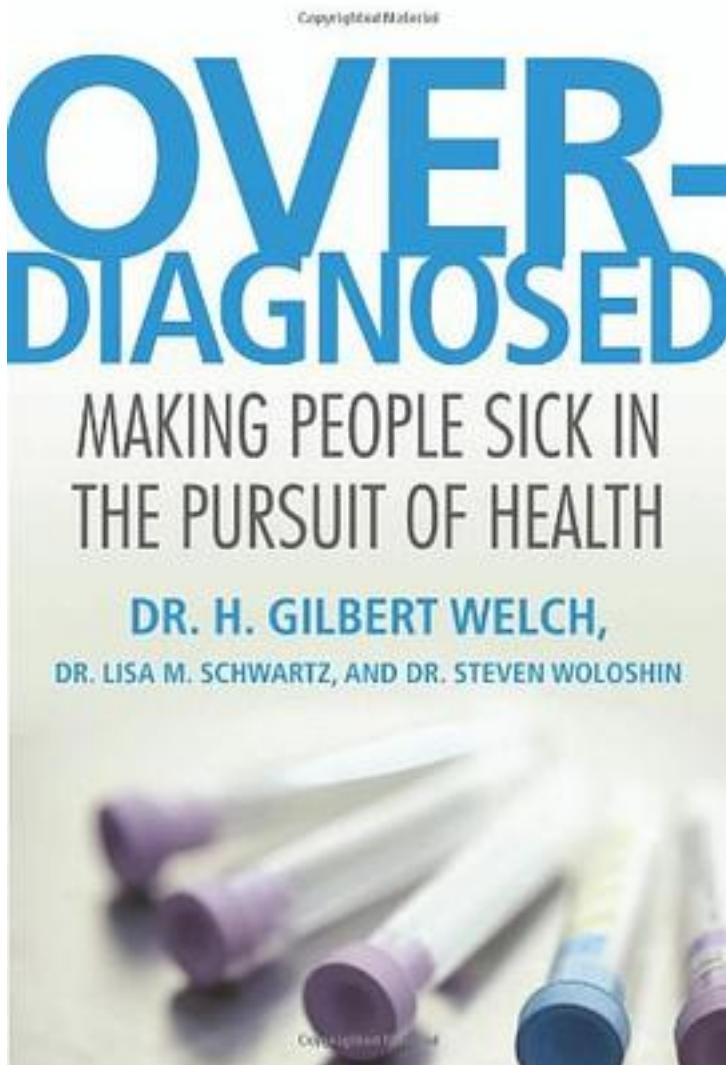


Overdiagnosed



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著者: Welch, H. Gilbert

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From a nationally recognized expert, an exposé of the worst excesses of our zeal for medical testing

After the criteria used to define osteoporosis were altered, seven million American women were turned into patients—literally overnight. The proliferation of fetal monitoring in the 1970s was associated with a 66 percent increase in the number of women told they needed emergency C-sections, but it did not affect how often babies needed intensive care—or the frequency of infant death. The introduction of prostate cancer screening resulted in over a million additional American men being told they have prostate cancer, and while studies disagree on the question of whether a few have been helped—there’s no disagreement that most have been treated for a disease that was never going to bother them. As a society consumed by technological advances and scientific breakthroughs, we have narrowed the definition of normal and increasingly are turning more and more people into patients. Diagnoses of a great many conditions, including high blood pressure, osteoporosis, diabetes, and even cancer, have skyrocketed over the last few decades, while the number of deaths from those diseases has been largely unaffected.

Drawing on twenty-five years of medical practice and research, Dr. H. Gilbert Welch and his colleagues, Dr. Lisa M. Schwartz and Dr. Steven Woloshin, have studied the effects of screenings and presumed preventative measures for disease and “pre-disease.” Welch argues that while many Americans believe that more diagnosis is always better, the medical, social, and economic ramifications of unnecessary diagnoses are in fact seriously detrimental. Unnecessary surgeries, medication side effects, debilitating anxiety, and the overwhelming price tag on health care are only a few of the potential harms of overdiagnosis.

Through the stories of his patients and colleagues, and drawing from popular media, Dr. Welch illustrates how overdiagnosis occurs and the pitfalls of routine tests in healthy individuals. We are introduced to patients such as Michael, who had a slight pain in his back. Despite soon feeling fine, a questionable abnormal chest X-ray led to a sophisticated scan that detected a tiny clot in his lung. Because it could not be explained, his doctors suggested that it could be a sign of cancer. Michael did not have cancer, but he now sees a psychiatrist to deal with his anxiety about cancer.

According to Dr. Welch, a complex web of factors has created the phenomenon of overdiagnosis: the popular media promotes fear of disease and perpetuates the myth that early, aggressive treatment is always best; in an attempt to avoid lawsuits, doctors have begun to leave no test undone, no abnormality—no matter how incidental—overlooked; and, inevitably, profits are being made from screenings, a wide array of medical procedures, and, of course, pharmaceuticals. Examining the social, medical, and economic ramifications of a health care system that unnecessarily diagnoses and treats patients, Welch makes a reasoned call for change that would save us from countless unneeded surgeries, debilitating anxiety, and exorbitant costs.

作者介绍:

H.吉尔伯特·韦尔奇博士，达特茅斯医学院的资深教授，他的研究领域主要是探索医学界提倡尽早发现疾病所带来的问题。他的研究著作大部分围绕癌症筛查，特别是黑色素瘤、甲状腺瘤、肺癌、乳腺癌和前列腺癌。他在《洛杉矶时报》、《华盛顿邮报》、《华尔街日报》、《美国医学联合会期刊》、《新英格兰医学期刊》等主流媒体和顶级学术期刊上发表多篇文章，并曾经接受多家主流电视台的采访。韦尔奇博士同样热衷于教育，他在达特茅斯卫生政策和临床实践研究所教授流行病学和生物统计学课程，并在达

特茅斯学院教授卫生政策和临床研究。2004年，他作为访问科学家在世界卫生组织驻法国里昂的国际癌症研究所工作。2009年，他出版的第一本学术著作《我该做癌症检查吗？也许不该，这就是为什么》被评为“天赐良书”。

丽莎·M.施瓦茨博士、史蒂芬·沃洛辛博士达特茅斯医学院的助理教授，研究领域包括如何提高与公众、病患、医生和政策制定者的沟通质量。

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标签

英文原版

Science

Medicine

非虚构

科学

健康

评论

最初得知这位作者是他在JAMA上一篇有关甲状腺癌症被过度诊断的文献。

Audible

上听完了这本书，核心在讨论过度医疗。过度医疗在体检和健康筛查中尤为突出，这里面也是陷阱重重。比如前列腺癌的筛查就有大量的over-diagnosis. 真像副标题中说的一样：make people sick in the pursuit of health.

Widely covering both the patients' side and the doctors'. Overdiagnosed may be interpreted over-rely-on-device/lab reports. Being a doctor, it's necessary to stick to the basic physical examination and a diagnose upon symptoms besides the lab reports. Being a patient, it deserves a reconsideration of the screening and a trade-off accordingly.

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书评

基本的Ture

Belief: 更早地诊断带来更有效地治疗，从而带来健康和幸福。作者从医生及数据分析的角度，试图反驳以上常识，说明早期诊断和有效治疗并非两个等价概念。在作者看来，“越早越好的诊断”，没有症状时的筛查其实给个人和社会都带来了一些不可忽视的问题。过度诊断的...

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