

CANCER SCREENING

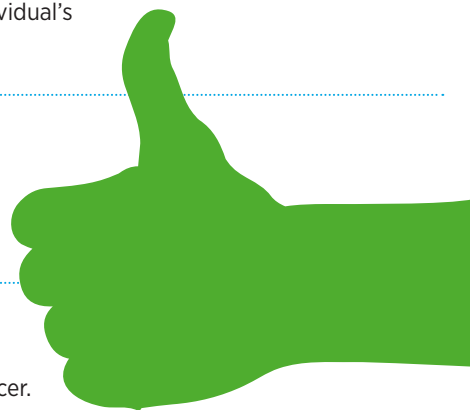
Benefits of Screening

Reduced cancer incidence. Some screening tests can detect precancerous lesions. Removal of the precancerous lesions can reduce, or even eliminate, an individual's risk of developing the screened cancer at that site (see **Figure 7**).

Reduced incidence of advanced disease. Screening tests that detect cancers at an early stage of development can reduce the individual's risk of being diagnosed with the screened cancer at a stage when it has spread to other parts of the body (see **Figure 7**).

Reduced cancer mortality. Diagnosis at an early stage of disease can increase the likelihood that a patient can be successfully treated, which thereby reduces the individual's risk of dying from the screened cancer.

Reduced cancer treatment needs. Diagnosis at an early stage often can increase the likelihood that a patient can be successfully treated with less treatment.



Potential Risks of Screening

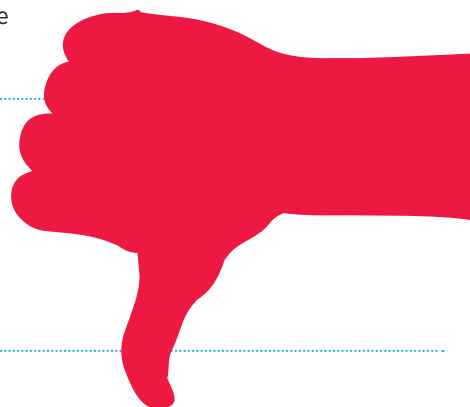
Adverse events. Screening tests are medical procedures; thus, they carry some risk. However, the chance that an adverse event will occur during a screening test recommended by the U.S. Preventive Services Task Force or a professional society is low.

Anxiety. Screening individuals who are not at high risk of disease can cause unnecessary anxiety during the waiting period for the test results.

False-positive test results. Not all individuals who have a positive screening test result have the screened cancer; follow-up tests (such as biopsy procedures) are necessary to confirm or disprove a cancer diagnosis. The rates of false-positive test results vary depending on the test but are generally low; a false-positive test result can result in additional unnecessary medical procedures, treatments, and anxiety.

False-negative test results. Not all individuals who have a negative screening test result are free from the screened cancer. The rates of false-negative test results are generally low, but a false-negative test result can lead to missed opportunities for early intervention.

Overdiagnosis and overtreatment. Not all precancerous lesions or cancers detected by screening will go on to cause symptoms and threaten life. Overdiagnosis, as this is called, can lead to overtreatment, which may carry its own risks and costs. The rates of overdiagnosis and overtreatment vary among screening tests and will require more longitudinal studies to elucidate and quantify.



Adapted from (1)