

## The Swedish mammography screening trials

### Check up on your sources

**The Danish-language »Medicinsk kommentar» by Ole Olsen and Peter Gøtzsche (Läkartidningen 2000: 97: 286-7) gives the false impression that this report, as well as their article in The Lancet (2000; 355: 131-6), is an official report of the Cochrane Collaboration.**

Several authors in Läkartidningen have accepted this as fact. Jerzy Einhorn refers to »Cochrane-institutet» (twice) and »Cochrane-rapport» (Läkartidningen 2000: 97: 1366-7). Lars Ståhle and Göran Sjönell refer to »Cochrane-institutets granskningar» (Läkartidningen 2000: 97: 742-3), Inger Atterstam refers to »Cochrane-rapport» (three times), »Cochrane-rörelsen» (twice) and »Cochrane-institut» (once) in her two letters (Läkartidningen 2000: 97: 752 and 1466).

#### A letter from Cochrane

Since Gøtzsche's and Olsen's conclusions are in such serious disagreement with the previously published and extensively reviewed studies, which provide convincing evidence that mammography screening significantly reduces mortality from breast cancer, I contacted Dr Andy Oxman, Chair of the Cochrane Collaboration Steering Group. He sent me the follow letter:

Dear Dr Dean:

Although Peter Gøtzsche and Ole Olsen have a Cochrane protocol in The Cochrane Library, they have not yet submitted a Cochrane review to the Cochrane Breast Cancer Group. What they published in the Lancet is not a Cochrane review and has no Cochrane status other than arising from two people who work in a Cochrane Centre. The Cochrane Collaboration had no control

(editorial or otherwise) over this review.

Sincerely,  
Andy Oxman  
Chair, Cochrane Collaboration Steering Group, Health Services Research Unit, National Institute of Public Health, Torshov, Oslo, Norway

The debate in Läkartidning has been founded on a false assumption, which should be corrected. Gøtzsche and Olsen's heavily criticized reports give us no reason to doubt the results published from the highly respected Swedish mammography screening trials. Instead, it teaches us that when hastily written reviews come up with odd results, it is best to check up on the sources.●

#### Author's reply

### Openness about the Swedish breast cancer screening trials is needed

**A scientific paper should be judged solely by its scientific merit, not by the status of its authors or their institution. Whether or not it represents »an official report» of some organisation is irrelevant.**

Contrary to the accusation put forward by Peter Dean, we have not given any »false impression» that our papers in The Lancet [1] and Läkartidningen [2] should represent »an official report of the Cochrane Collaboration».

The fact that other correspondents have referred to our Lancet paper as a Cochrane report or as a paper originating from a Cochrane Institute is understandable as we are both directors of a Cochrane centre.

The Cochrane Collaboration is well known for its critical systematic reviews of the evidence from randomised trials (see [www.cochrane.dk](http://www.cochrane.dk)). What we published in The Lancet was not a Cochrane review – and has never been called a Cochrane review by anyone as far as we know – but we of course used Cochrane principles when we were asked to review the eight mammography screening trials by the Danish Institute for Health Technology Assessment.

#### Three sources of bias

We focussed on the three most important sources of bias in randomised

trials: suboptimal randomisation methods, lack of blinding in outcome assessment and exclusions after randomisation [1]. We were surprised by the serious problems we identified in most of the trials and by the fact that the two high-quality trials failed to find an effect of screening on breast cancer mortality. We therefore questioned the value of screening with mammography and we feel this conclusion was strengthened in the subsequent correspondence in The Lancet [3] where we and others provided new data.

#### Good reason to doubt

In contrast to the opinion of Peter Dean, our analysis has given good reasons to doubt the results from those mammography screening trials which have found a marked positive effect of screening. Our paper has made many researchers and people involved in screening programmes all over the world doubt about the value of screening.

Probably for political reasons, this has mainly been communicated to us personally but there are also examples

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