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Host: They're the words every woman dreads hearing. The screening has produced positive results—the breast tumor has been found. What follows may be months of chemotherapy or even radical surgery, and the fear that something yet worse happening and may all have been unnecessary. The latest research shows that about 4000 women every year endure unpleasant or even disfiguring treatment for cancers that may not threaten their lives at all. I'm joined in the studio by two women who have had similar experiences but reacted rather differently to it. Miriam Pryke and, um, Diane Dally.

Um, and, uh, Miriam Pryke, you had surgery after screening and you discovered later that your type of cancer did not always lead to serious symptoms. So, what was your reaction?

00:00:48:09 - 00:01:00:10

Miriam: Um... I discovered at the time of my diagnosis that, um, I may or may not ever develop cancer, but I haven't been informed of this possibility before I went to screening.

00:01:00:12 - 00:01:01:01

Host: Oh.

00:01:01:13 - 00:01:37:08

Miriam: However, one thing led to another and I was treated and because my suspicions had been raised by this strange diagnosis, I investigated further and discovered that no screen diagnosed woman can know that she would definitely have died but for her treatment when it was given because, uh, they can't tell who needed it or who didn't.

So, at best, any screen diagnosed woman can only say she may have had her life saved. But in view of the numbers, it's actually highly improbable.

00:01:37:23 - 00:01:50:16

Host: So you had your screening. It was found. Something was found. And they said to you what exactly? And presumably this was a doctor, or was it a nurse? Who said what...

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Miriam: It was the consultant breast surgeon [who said], "What you have is non-invasive cancer which may never harm you."

00:01:52:02 - 00:01:52:10

Host: [Right.]

00:01:56:18 - 00:02:02:05

Host: Ah, so there was... it was perfectly clear that—that you... might not have been at serious risk.

00:02:01:17 - 00:02:04:10

Miriam: And I said in that case, I'll wait and see.

00:02:04:11 - 00:02:04:21

Host: Right.

00:02:04:22 - 00:02:15:23

Miriam: But he was not going to give me any chance of doing that. [And then], uh, I was told various other things. Uh, and they were absolutely silent on the issue of overdiagnosis.

00:02:07:19 - 00:02:08:10

Host: [Oh.]

00:02:15:18 - 00:02:24:22

Host: So, in other words, it was a-a man that you say, [that the—the consultant...] um. He was... determined that you should have an operation, or that you should have treatment.

00:02:18:21 - 00:02:19:08

Miriam: [Yes.]

00:02:24:22 - 00:02:26:02

Miriam: Absolutely. Yes.

00:02:26:03 - 00:02:26:20

Host: An operation.

00:02:26:20 - 00:02:27:05

Miriam: Yes.

00:02:28:01 - 00:02:31:03

Host: And you were... reluctant, or...

00:02:31:06 - 00:02:33:03

Miriam: Uh, I was very reluctant, yes.

00:02:33:04 - 00:02:33:20

Host: But you agreed?

00:02:34:05 - 00:02:57:11

Miriam: Because he told me that after all the testing that I'd had, uh, and they couldn't tell whether I had cancer or not, there might be further cancer that was undiscovered by the tests. Again, another eventuality that I had not been informed about by the information before I went to screening, and I would never have undertaken it had I known I could be in that situation.

00:02:57:16 - 00:02:59:21

Host: You'd have never had the screening at all, do you mean?

00:02:59:16 - 00:03:07:02

Miriam: No. If I had known I could face the possibility of mutilating surgery, only to discover that I didn't have cancer at all.

00:03:07:14 - 00:03:09:10

Host: But you could have used your own judgement?

00:03:09:12 - 00:04:15:21

Miriam: I-I couldn't possibly know whether or not at that time, I had further cancer beyond what the tests had already revealed and whether indeed the non-invasive cancer that had been diagnosed would progress or not. But it's done under duress.

When you're under a diagnosis, they tell you that they can't tell the extent of your disease or how quickly it would progress.

So you are under threat of death at this point, in spite of the fact that they're also telling you it may never progress, so you don't know one way or the other.

And it takes a very strong woman at that point to say, uh, I'm-I'm not going to do anything. And there are reasons why, in my particular case, and, uh, which is typical, I'm told, uh, my feet didn't touch the ground.

I was... made... It was made very clear to me that I wasn't gonna get any more of that consultant's time; he'd said all he needed to say. And I had to make my mind up.