



PHILOSOPHY

## **An "Epidemic of Diagnosis" and the "Commercializing" of Preventive Health Services**

Editorial Staff

An essay published on Jan. 2, 2007 on the *New York Times* Web site<sup>1</sup> makes the observation that Americans are besieged with more diagnosis than ever before. Titled "What's Making Us Sick Is an Epidemic of Diagnosis," the authors make the initial statement that:

"The larger threat posed by American medicine is that more and more of us are being drawn into the system not because of an epidemic of disease, but because of an epidemic of diagnoses."

The essay continues on to discuss two areas that are contributing to the diagnosis epidemic: the "medicalization of everyday life" and the "medicalization of childhood." The authors note that:



"Everyday experiences like insomnia, sadness, twitchy legs and impaired sex drive now become diagnoses: sleep disorder, depression, restless leg syndrome and sexual dysfunction."

Their concerns are heightened for the "medicalization of childhood":

"If children cough after exercising, they have asthma; if they have trouble reading, they are dyslexic; if they are unhappy, they are depressed; and if they alternate between unhappiness and liveliness, they have bipolar disorder."

The authors cite another source of potentially unnecessary diagnosis and treatment, the "at risk" diagnosis:

"While diagnoses used to be reserved for serious illness, we now diagnose illness in people who have no symptoms at all, those with so-called pre-disease or those 'at risk.' Two developments accelerate this process. First, advanced technology allows doctors to look really hard for things to be wrong. Second, the rules are changing. Expert panels constantly expand what constitutes disease; thresholds for diagnosing diabetes, hypertension, osteoporosis and obesity have all fallen in the last few years. The criterion for normal cholesterol has dropped multiple times. With these changes, disease can now be diagnosed in more than half the population. If more than half of us are sick, what does it mean to be normal? Many more of us harbor 'pre-disease' than will ever get disease, and all of us are 'at risk.'"

At this point, one has to ask what's behind this "epidemic of diagnosis"? As it usually does, the answer probably comes down to money:

"The epidemic of diagnoses has many causes. More diagnoses mean more money for drug manufacturers, hospitals, physicians and disease advocacy groups."

Coincidentally enough, nine days after the essay was published, a for-profit company calling itself U.S. Preventive Medicine, sent "A letter to the American Public" to *The Wall Street Journal* (it also appeared in *USA Today*). In its letter, the company describes itself as "a new company dedicated entirely to prevention." This letter focuses on the benefits of prevention by saying that:

"The prevention model of healthcare holds enormous promise for individuals, employers, healthcare providers and policy makers."

A review of its Web site ([www.uspreventivemedicine.com](http://www.uspreventivemedicine.com)) provides a unique approach to the business of health.

"U.S. Preventive Medicine, a privately owned company, is organizing and commercializing the market for proactive preventive health services in partnership with established hospitals and physician groups. The Company licenses its proprietary methodology, technology and branding assets to a health provider, which operates a local point-of-care - The Center for Preventive Medicine - in a geographic territory on

an exclusive basis."

Simply stated, this company is going to sell hospitals and physicians groups on the advantages of opening a "Center for Preventive Medicine" in their area using its methods. It is so convinced of the profit potential this approach will yield that it will only license these businesses on "an exclusive basis."

Health care in the United States has now become the business of medicine. This business has all of the same demands of every other business: growth of at least 25-30 percent every year. This means that for the hospitals, physicians groups, managed care organizations and drug companies to be considered successful, they must earn more every year. The best way to earn more money is to sell more services. But who's to say which health services are needed and which are not? Does good health really mean that you take drugs to avoid illnesses you might get?

Clearly, there has to be a conflict of interest within a system whereby those recommending the services and those selling the services are making money off of people who are less than able to debate if the services are truly required. This situation is even more complicated by the fact that many of the drugs prescribed are later shown to have serious adverse consequences. The most recent of which is the reduction of the incidence of breast cancer coinciding with the reduction in the application of hormone replacement therapy. As was noted by the authors of the *Times* essay:

"But the real problem with the epidemic of diagnoses is that it leads to an epidemic of treatments. Not all treatments have important benefits, but almost all can have harms. Sometimes the harms are known, but often the harms of new therapies take years to emerge - after many have been exposed."

The focus seems to be to convince the American public that they can't truly be healthy unless they constantly are being assessed for illnesses and conditions for which they may be "at risk" and taking the currently recommended drug to reduce that risk. Is this the goal of the health care industry... to have every person, regardless of age, taking regular prescription drugs for a minimum of 3-6 conditions they might get?

It would appear that the health care industry is seriously confused about the definition of health. As the authors of the *Times* essay suggest:

"Perhaps someone should start monitoring a new health metric: the proportion of the population not requiring medical care."

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