The Protestant Reformation in Health Information

How To Make Certain that

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The 1st International Symposium on Understanding Health Benefits and Risks: Empowering Patients and Citizens

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Leukemia following chemotherapy for ovarian cancer

JM Kaldor, NE Day, F Pettersson, EA Clarke, D Pedersen, W Mehnert, J Bell, H Host, P Prior, S Karjalainen

An international collaborative group of cancer registries and hospitals identified 114 cases of leukemia following ovarian cancer. We investigated the possible etiologic role of chemotherapy, radiotherapy, and other factors, using a case-control study design, with three controls matched to each case of leukemia. Chemotherapy alone was associated with a relative risk of 12 (95 percent confidence interval, 4.4 to 32), as compared with surgery alone, and patients treated with both chemotherapy and radiotherapy had a relative risk of 10 (95 percent confidence interval, 3.4 to 28). Radiotherapy alone did not produce a significant increase in risk as compared with surgery alone. The risk of leukemia was greatest four or five years after chemotherapy began, and the risk was elevated for at least eight years after the cessation of chemotherapy. The drugs cyclophosphamide, chlorambucil, melphalan, thiopeta, and treosulfan were independently associated with significantly increased risks of leukemia, as was the combination of doxorubicin hydrochloride and cisplatin. Chlorambucil and melphalan were the most leukemogenic drugs, followed by thiopeta; cyclophosphamide and treosulfan were the weakest leukemogens, and the effect per gram was substantially lower at high doses than at lower doses. The extent to which the relative risks of leukemia are offset by differences in chemotherapeutic effectiveness is not known.
It's simple. You have diabetes, triglyceridemia, and fibromyalgia.
It’s Not Kansas Anymore

- In 2008 the Pew Internet and American Life Project found that three-quarters of Internet users search for health information online.
- 75 per cent of people with chronic health problems are managing their care, at least to some degree, in accordance with the material they find there.

WHICH LEADS TO…
“More and more patients are going to the Internet for medical advice. To keep my practice going, I changed my name to Dr. Google.”
"I need some medicine for an infection I'm going to get next week."
I don't care what it said when you looked up your symptoms on the internet... you are not anorexic.
What this Means

• This is not just a joke as 2006 British Medical Association Journal article reported that only 15 of 28 cases published in the New England Journal of Medicine were diagnosed correctly on the Internet.

• Similar findings emerged last year from AIDS patients.
A Dizzying Display
I CAN GIVE YOU MY 93.4% ASSURANCE THAT THERE IS LESS THAN A 65.6% POSSIBILITY THAT THIS EXERCISE WILL SIMPLY GENERATE 34.8% MORE MEANINGLESS STATISTICS.
He then drew a number of smaller pie charts behind the bigger chart. That helped to put it into perspective.
Is There A Solution?

ONE POSSIBILITY IS...
Illustrating Risks: Mammograms

The single darkened seat represents the 1 woman out of 1,000 who is likely to benefit from mammogram screening when compared to 1,000 women who did not have mammograms.
Illustrating Risks: Radon

The darkened seats represent the number of individuals out of 1,000 who will get lung cancer at a standardized level of radon exposure:

A. for non-smokers
B. for smokers
But There May Be More

• Consider the possibilities of Web 2.0.

• Maybe we should conduct a kind of internet contest in which patients decide which graphics best capture their feelings and needs in this matter.
Thank you…but wait, what is *pravda vitezi*?