For years doctors practiced bloodletting therapy, based on faulty assumptions and bad observations about its apparent benefits. Today medical science is more advanced or is it?

Writing in the *New York Times* [1], emergency room physician Dr. David Newman says society and much of the medical establishment still systematically ignore studies about treatment that doesn’t fit their ingrained beliefs or ideology, such as the value of mammograms. Last week’s study in the New England Journal of Medicine that questioned their worth, Dr. Newman writes, threatened a mammogram economy, a marketplace sustained by invasive therapies to vanquish microscopic clumps of questionable threat, and by an endless parade of procedures and pictures to investigate the falsely positive results that more than half of women endure. And inexplicably, since the publication of these trial results challenging the value of screening mammograms, hundreds of millions of public dollars have been dedicated to ensuring mammogram access, and the test has become a war cry for cancer advocacy. Why? Because experience deludes: radiologists diagnose, surgeons cut, pathologists examine, oncologists treat, and women survive.

The problems go far beyond mammograms, Dr. Newman writes. In a system drowning in costs, and at enormous expense, we have systematically ignored virtually identical data challenging the effectiveness of cardiac stents, robot surgeries, prostate cancer screening, back operations, countless prescription medicines, and more.

Doctors and patients keep on doing fruitless and expensive tests and procedures just because we’ve always been doing it, agrees ACSH’s Dr. Gilbert Ross. How do we reverse the course? There’s an entrenched belief-system and economy here that it will be extremely hard to counter; doing so will take years.