Jane Brody’s NY Times column warns against fear-induced health decisions

By ACSH Staff — November 4, 2014

In today’s Science section, NYTimes Jane E. Brody’s Personal Health column has a headline that sums up much of what ACSH has been telling our readers over our 36-year history: *Emotion is not the best medicine* [1]. Ms. Brody begins by using the widespread hysteria bordering on panic induced by the exactly two severe cases of Ebola virus (one fatal) diagnosed on our shores during the recent...outbreak?

There is indeed a serious outbreak of ebola hemorrhagic fever in West Africa, the worst since the virus was characterized in 1976; the stories of its depredations are scary enough to send chills down our spines. But let’s keep it real, if we may summarize the message of the Brody column. It is true that factors outside of our control such as contagions without known treatment or even prevention strike much more fear into us than far more common and dangerous risks: smoking, texting on the highway, obesity, hypertension, are just a few that come to mind. On the other hand, when faced with potentially dangerous conditions over which we do have some control see the above ailments, plus other infections for which we have preventive vaccines, such as the flu often we take no action, allowing inertia to hold sway.

Ms. Brody’s words speak volumes: The news is replete with seemingly endless tales of health threats. I once wrote that there are as many cancer-causing mutagens in two raw mushrooms as in a serving of peanut butter. It was supposed to be reassuring | This exact message is illustrated most clearly in ACSH’s *Holiday Dinner Menu* [2], which explains that all of the food we eat daily is full of so-called carcinogens, but at levels that cannot possibly harm us. She also dismisses the fear of GMO foods and artificial sweeteners. She points out, sadly, that supplying fearful parents who refuse to vaccinate their kids with evidence showing the harm they are doing only cements their unscientific, superstitious beliefs. She cites Dr. Lisa Rosenbaum, national correspondent for the New England Journal of Medicine, thusly: We don’t process negative events, only positive ones. Anyone who doesn’t get Ebola falls beneath the radar. No one wants to hear, Calm down.
Another oft-heard ACSH message, but one hard to establish, given the media's devotion to sensationalism.

ACSH's Dr. Gil Ross had this comment: If more Americans listened to such advice, the many, many 'consumer advocacy' groups that depend on scaring people would go out of business, and we'd all be the better for it. Ms. Brody should be commended for even taking on one of the more controversial issues in the public-health arena: cancer screening: But all screening tests have benefits and risks that should be considered before deciding to undergo them. The most serious risks are overdiagnosis of a condition that turns out not to exist, and overtreatment for conditions that would never have compromised the patient's survival. Yet even knowing this, many perhaps most people still opt for screening. Given the recent studies showing that neither PSA tests for prostate cancer nor routine screening mammograms actually yield a net population health benefit, I am glad that Ms. Brody decided to take this on too, and I cannot wait for the next installment, Screening for Breast Cancer.