Reflections on a meta-synthesis of research about lay understandings of overtesting and Overdiagnosis
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Tomas Rozbroj & Romi Haas

Abstract

Examining how lay people understand overtesting and overdiagnosis matters. These concepts are counter-intuitive and often misunderstood. Yet communicating about them to patients and the public is important, to enable shared medical decision-making and informed consent, and to drive patient-centred strategies for improving care.

We synthesised published qualitative studies about how patients and the public understand overtesting and overdiagnosis. Using descriptive and interpretative analyses, we identified important psychosocial, conceptual, and practical barriers to the acceptance of some messages about overdiagnosis and overtesting by lay people. However, our findings also highlighted opportunities for overcoming these barriers, underpinned by a broad desire among lay people for information regarding overtesting and overdiagnosis. Our findings will inform the development of new strategies to communicate about overtesting and overdiagnosis with patients and the public.

In this session, we will first present the findings of our meta-synthesis, and situate them within broader research. We will then explore why overtesting and overdiagnosis concepts tend to resonate poorly with patients and the public, focusing on psychosocial, conceptual, and practical factors. Finally, we will discuss potential strategies to overcome these barriers to the acceptance of messages about overtesting and overdiagnosis, to communicate better with patients and the public about low value care. This session will incorporate didactic presentations and interactive discussions to engage, stimulate and challenge our audience to creatively consider how best to communicate about overtesting and overdiagnosis to different groups of lay people.

Learning objectives

1. Discuss the ways in which patients and the public understand messages about overtesting and overdiagnosis.
2. Consider psychosocial, conceptual, and practical factors that may influence the interpretation of messages about overtesting and overdiagnosis.
3. Consider strategies for communicating about overtesting and overdiagnosis with patients and the public that account for known barriers and broader factors.