

# Discussion 5

Literature, Russian Literature



Screening Programs of Screening Programs Screening programs are essentially meant to prevent premature deaths, disabilities and to improve the quality of life. The activities undertaken in these programs include the measurement of weight, height, blood pressure, anemia, and vision. Oral screenings, blood chemistry, hearing tests, podiatry exams, and glaucoma screenings are also conducted (Issel, 2013). However, these programs come with the risk of exposing participants to harm, a condition known as screeningitis (Issel, 2013). It has not been easy to identify worthwhile screening programs, develop correct strategies, and implement the programs effectively, a situation that has made many people prone to screeningitis (Peckham and Dezateux, 1998).

Individuals may find it hard to take part in screening programs due to several reasons. To begin with, the programs use arbitrary threshold values in their laboratory tests to determine whether someone is “diseased” or “normal” (Issel, 2013). Training manuals do include follow-up guidelines of abnormal test results, some of which have greater threshold values than what a physician would normally use to determine the need for treatment. For instance, most manuals recommend follow-up for levels of cholesterol 360mg/dL or higher, whereas most physicians would recommend patients to be treated for levels far below this threshold (Issel, 2013).

Screening programs also tend to attract unqualified screeners. This trend is potentially harmful as the screeners, most of whom are still students in various medical learning institutions, may not be using reliable information or be well trained (Issel, 2013). Certain studies have revealed that most screeners used the internet to search for information instead of statistics

from health departments. Moreover, most screeners consult previous screeners to get information about how the exercise was conducted (Issel, 2013). This trend could pose problems because health needs change very fast (Patient, 2010).

There is the need to develop a more critical approach to the screening programs, which incorporates effective and equitable implementation mechanisms (Issel, 2013). This step will make the programs beneficial and acceptable to the public. There should be a complete assessment of potential harm and benefits associated with all the stages of screening (that is, screening, diagnosis and treatment) before screening can be conducted and the information should be available to individuals before screening them (Peckham and Dezateux, 1998). Moreover, professional medics should carry out the exercise.

#### References

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