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Associate Professor Catherine de Fontenay  
Productivity Commission

Dear A/Professor de Fontenay,

**Re. Productivity Commission 2024, *Advances in measuring healthcare productivity*, Research paper, Canberra**

I am writing on behalf Wiser Healthcare, an Australian research collaboration that aims to support Better Value care for all Australians. Congratulations on undertaking this research on the important but complex area of healthcare quality.

Several issues make measuring healthcare productivity a complex area to research, one of which is “overdiagnosis”, when asymptomatic people are screened to detect early forms of a disease (e.g. cancer screening), but the “disease” would never have developed to cause any symptoms.

<https://www.wiserhealthcare.org.au/what-is-overdiagnosis/>

Overdiagnosis means that case-based metrics that use people diagnosed as the denominator will often be misleading. A common example is 5-year survival for specific types of disease (e.g. cancer). Early detection, even if ineffective, will “improve” apparent 5-year survival simply because (i) years are added prior to usual detection and (ii) more indolent “disease” is included – artefactually improving apparent quality of care when actually the only thing that has changed is the number of people diagnosed. Footnote 7 on page 15 of the Research Paper notes that “changes in survival rates (are) the main contributor to overall productivity growth”. By measuring changes in health outcomes per case (such as survival rates) rather than per capita, your suggested metric will be susceptible to bias due to overdiagnosis (and “lead time” and “length time” biases). <https://theconversation.com/when-talking-about-cancer-screening-survival-rates-mislead-30395>

One of the broad groups of diseases examined in the Research Paper is Cancer. According to our recent analysis, about 24% of all cancers diagnosed in Australia in 2012 may have been overdiagnosed. <https://theconversation.com/29-000-cancers-overdiagnosed-in-australia-in-a-single-year-127791> If the proportion of overdiagnosed cancers increased over your study period 2011-2018, then this will result in apparent improvements in QALYs and YLDs per case even if there was no actual extension of life or improvement in healthcare quality.

We would be happy to provide further information on this issue, or to meet to discuss further.

Kind Regards,

Katy Bell



On behalf of Wiser Healthcare <https://www.wiserhealthcare.org.au/>