

ment strategies, and real-life health service conditions. This is distinct from the issue of whether “conditional listing” on the Pharmaceutical Benefits Scheme should be implemented for drugs that are yet to be proven cost-effective.

1. Liew D, McNeil JJ, Peeters A, et al. Epidemiological modelling (including economic modelling) and its role in preventive drug therapy. *Med J Aust* 2002; 177: 364-367. □

## Screening mammography and mortality

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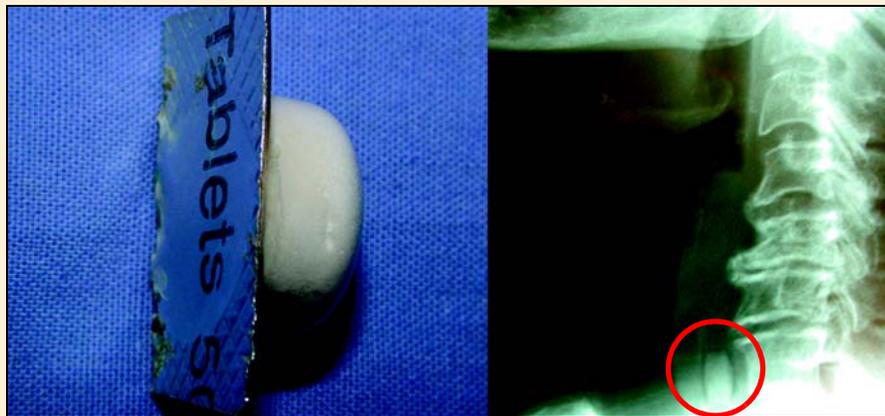
**TO THE EDITOR:** In a recent letter in the Journal,<sup>1</sup> Rodger writes that breast screening is unlikely to affect overall mortality and notes that this “gives the lie to the conclusions of Olsen and Gøtzsche’s overview, which are based only on overall mortality”.

English is not my first language, but according to my English–English dictionary “give the lie to” means either “to disprove” or “to accuse of lying”, and a related adjective is “mendacious”. In actual fact, however, in our Cochrane Review,<sup>2</sup> we carefully analysed both breast cancer mortality and all-cancer

## snapshot

### A bitter pill to swallow

AN ELDERLY PATIENT with diabetes presented with oesophageal obstruction after taking a regular dose of metformin. A lateral neck radiograph confirmed the presence of an obstruction in the upper oesophagus. The patient underwent rigid oesophagoscopy, at which time the tablet, complete with packaging, was removed (see Box). The patient went on to make a full recovery.



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