Anticipation and Medicine: 'The offer we can't refuse'

Owen Dempsey

SUMMARY: Psychoanalytic ideas about subjectivity can help us understand how even just receiving the *offer* of a particular type of healthcare can exploit desire and impose itself upon a person's sense of themselves, their beliefs and their behaviour.

KEY WORDS: Subjectivity, capitalism, breast-screening, anticipation, overdiagnosis

The overall argument in *Anticipation and Medicine: A Critical Analysis of the Science, Praxis and Perversion of Evidence Based Healthcare* (Dempsey, 2018) refers to the kind of healthcare programmes that try to anticipate illness, in advance, in asymptomatic people, in order to cure or prevent later symptoms. They include, for example, the well-known cancer screening programmes. My argument is, in general, first that this kind of care is anti-democratic because it exploits desire and relies on a false promise of benefit, as well as, second, being bad for healthcare and health itself because of the collateral harms it causes directly, and the indirect harms it causes by the diversion of resources of money, time and compassion away from caring from people who are suffering illness in the present, today.

My background is as a General Practitioner, and my interest in this topic stems from my experience as a GP. I have become aware, over the past thirty odd years, that more and more of GP practice efforts are taken up with screening activities, associated with persuasive target payments for things like vaccinations and cervical cancer screening uptakes, as well as a generalised increasing tendency

Owen Dempsey is a General Practitioner and author of *Anticipation and Medicine: A Critical Analysis of the Science, Praxis and Perversion of Evidence Based Healthcare*. (Routledge: 2018)

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