

MEDICINE AND THE MEDIA Margaret McCartney

Does Movember mislead men?

The men's health campaign has caught the public imagination, but, asks **Margaret McCartney**, how sound is its advice?

Movember is a global campaign that asks men to grow moustaches in the 11th month of the year "with the aim of raising vital funds and awareness of men's health issues." The campaign launched in the United Kingdom in 2007 (<http://uk.movember.com>), with funds going to Prostate Cancer UK. In 2010 funds started going also to the Institute of Cancer Research to fund research into testicular cancer. Movember's (punning) claim was that it was "changing the face of men's health."

But is it useful? The campaign says, "Knowledge is power. Moustache is king," and that men "effectively become walking, talking billboards for the 30 days of November and through their actions and words raise awareness by promoting private and public conversation around the often ignored issue of men's health."

Its website says "men don't get regular health checks" and reports that as a measure of the success of its campaign a fifth of participants in Movember last year went to their doctor as a direct result, though without giving any baseline figures. Yet much health information given by the organisation is at odds with NHS recommendations. Some information is evidence based, such as advice to not smoke and to drink alcohol moderately,¹ but this is sandwiched between calls for men to undergo non-NHS screening. Until mid-November advice on the website was for men aged 50 or above to seek a "baseline PSA [prostate specific antigen] test" from their general practitioner but did not explain why this advice was contentious.

After I challenged this advice, the organisation changed its information to "discuss your situation with your doctor to decide if PSA testing is right for you." It also uploaded a short leaflet written specifically for Movember by the Société Internationale d'Urologie, an international membership educational organisation, which included the assertion that "early treatment can delay the spread of the disease, and improve your chances of a cure and a longer life," without mentioning the type or side effects of treatment being offered or the proportion of false positive results.² And Movember gives no reference to NHS backed resources, such as the Prosdex website, that have greater detail and that have been trialled appropriately.³ Another page on Movember's website says that there is "no unanimous

opinion in the medical community regarding the benefits of prostate cancer screening. Advocates of regular screening believe that finding and treating prostate cancer early offers men more treatment options with potentially fewer side effects." But it doesn't explain why the UK consensus is not to offer a screening programme or what the hazards are. Instead, Movember concludes that "starting (to screen) at age 40-45 is reasonable."⁴

This is not the only advice on screening to give cause for concern. Movember suggests an annual screening test for colon cancer and an annual haemoglobin A_{1c} check, with blood pressure readings twice a year from age 20. It also states that aortic aneurysm screening is "only relevant for men aged 65-75 who have smoked,"⁵ which is at variance with NHS screening advice.⁶ Under the heading "Male mental health," the only diagnosis discussed is depression. Further advice is given about prostate and testicular cancer through a linked document written by Bupa,⁷ and this in turn links to the company's website, which advertises many health checks that the NHS doesn't recommend.



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Peter Baker, an independent consultant and campaigner on men's health, thinks that although the enthusiasm of Movember is laudable the range of beneficiaries is too narrow. "I do have a concern that, while it claims it is changing the face of men's health, it is actually concerned only with prostate cancer." He thinks Movember should "start distributing its funds more widely in the UK, perhaps to other men's health charities, and to address problems like mental health, diabetes, and heart disease in men as well as the full range of cancers affecting men."

Last year a GP colleague and I, after raising concerns with Movember, were invited by the organisation to discuss its screening and medical advice. We explained why evidence

based advice was important, but this year's advice differs little from last year's. Movember donated more than £15m to Prostate Cancer UK in 2011⁸ and £6.5m to the Institute of Cancer Research (personal communication). Movember's European accounts show that it raised £22m last year in the UK, with staff costs in 2012 of £968 922, and £267 826 spent on website development and management. It also says its administration to fundraising ratio is lower than average, at 7.6%.⁹ Its advisory board has experts in prostate cancer but none in public health, general practice, or psychiatry.

When asked why Movember's health advice differed from NHS advice, it told the *BMJ* that "we did consult with a medical expert . . . data is sourced from Cancer Research UK." But Cancer Research UK does explain why PSA screening is not recommended,¹⁰ and its discussion of the NHS bowel screening programme gives no recommendation to act outside the programme's suggestion of screening every two years, whereas Movember recommends annual screening.¹¹ Movember declined to name its expert but said that "as a global men's health organisation, Movember has developed universally consistent health messaging" and had taken advice from the World Health Organization and the Union for International Cancer Control. This second group is a campaigning organisation with many "partners" in the drug industry, while WHO and the US Preventive Services Task Force have made it clear that PSA screening is ineffective.^{12 13}

Movember does not just seek to raise money but also to "significantly increase the understanding of the health risks that men face and will encourage men to act upon on that increased understanding." To do this, men need fair and accurate information.

Movember's emphasis on screening tests, its recommendation of a frequency of screening that is not based on evidence, and its failure to provide good supporting information place well intentioned men in unhelpful conflict with their doctors. Meanwhile, the far more pressing concerns of mental illness, alcohol and substance misuse, smoking, and obesity are pressed into near silence. Is this the best we can do for men's health?

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References are in the version on bmj.com.

Cite this as: *BMJ* 2012;345:e8046