In the science communication business, we call them “weasel words.” Why? Because weasels have a reputation for being sneaky and tricky. We are talking about words like “may,” “suggest,” “possible” and “potential” that can trick the reader into forming a positive impression without making a specific commitment.

What we would like to see in a scientific study are statements like “has been shown to,” “has been proven to” or “evidence demonstrates,” but these are elusive when it comes to the claimed benefits”

Cutting Through Media Hype on Clinical Studies

1. **Read the Source**: Skip headlines—go to the study abstract or full paper. Check funding (industry bias?) and sample size (n<100? Weak).
2. **Spot Red Flags**: Absolute vs. relative risk (e.g., "50% reduction" might mean 1% to 0.5% actual drop). Correlation ≠ causation. Ignore "breakthrough" without replication.
3. **Rate Validity with Evidence Levels** (using AACN/USPSTF as guides):
    - **A (Top Tier)**: Meta-analysis of RCTs—strong, consistent benefits. Trust if media matches.
    - **B**: Single well-designed RCT—good, but verify consistency.
    - **C**: Observational/cohort studies—suggestive, not causal; hype-prone.
    - **D/E**: Expert opinion/case reports—lowest; dismiss bold claims.
    - USPSTF **I**: Insufficient evidence—treat as preliminary, not proven.

Bottom line: Demand Level A/B data for life-changing advice. Cross-check PubMed or Cochrane.

Levels of Evidence in Clinical Studies (Oxford Hierarchy)

Level	Type	Strength
1a	Systematic review of RCTs	Highest
1b	Individual RCT (well-designed)	High
2a	Systematic review of cohort studies	Moderate
2b	Individual cohort study	Moderate
3a	Systematic review of case-control	Low-moderate
3b	Individual case-control	Low
4	Case series	Low
5	Expert opinion	Lowest

GRADE Evidence System

Quality of Evidence	Description
High	RCTs; confident effect estimate; further research unlikely to change.
Moderate	Downgraded RCTs or upgraded observational; further research may change.
Low	Further research likely to change estimate.
Very Low	Very uncertain; major limitations.

Strength of Recommendation	Implication
Strong	Benefits clearly outweigh risks; do it.
Weak/Conditional	Trade-offs; consider individual factors.

Media Hype vs. Real Data Examples

Hype Claim	Real Data	Evidence Level
Coffee prevents cancer	Correlation in observational studies; no causation proven.	C (suggestive, not causal)
Red wine elixir for long life	Associations only; ignores limitations like confounders.	C (hype-prone)
New drug ends MS	Preliminary trial effects; no cure evidence.	B/C (early RCT, overstated)