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**Diagnosis: an impossible but essential task**

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With around 11,000 disease entities, diagnosis is an essential, but near impossible, task for the GP. Research in the 1970s observed that diagnostic hypotheses are made early in the consultation, then guide subsequent history and examination.

This process can be further split into three stages (1) initiation of diagnostic hypotheses ('Spot' diagnosis', Self labeling; presenting complaint); (2) refinement (including rule outs; stepwise refinement; pattern fit; prediction rules); and (3) final diagnosis (including tests of treatment or time).

Our drive for improved diagnosis has improved our tools, but lead to overdiagnosis including overdetection and 'incidentalomas'. In addition, changed definition of the dividing line between normal and abnormal - such as hypertension, diabetes, osteopenia, and obesity, small changes - have greatly expanded the proportion of the population with those disorders.