CRA Survey Results: Choosing Wisely

hoosing Wisely Canada is a national initiative to reduce unnecessary tests and treatments in health care using evidence-based data to support its recommendations. Started in 2012 in the U.S., it has grown into a global movement that seeks to empower health-care providers and patients to make wise choices in an effort to curb unnecessary testing and waste. This mandate is accomplished through partnerships with professional societies representing different specialties, medical associations and patient organizations.

For this issue's Joint Count survey, we asked CRA members for their thoughts on Choosing Wisely as it relates to rheumatology. Many respondents were already familiar with this initiative via the CRA Annual Scientific Meeting (ASM), word of mouth, and through the *CRAJ* and CRA emails.

When asked whether they were aware of the CRA list of 5 rheumatology recommendations to help physicians and patients choose wisely (availabe at *choosingwiselycanada*. org/rheumatology/), 66% of patients responded that they were already aware of these.

Queried as to whether they think the list of 5 rheumatology recommendations has changed their practice or will in the future, only a fifth responded affirmatively. While this may seem relatively low, many respondents noted that they already followed these guidelines and, therefore, had no changes to make.

Indeed, one commenter remarked that "the Choosing Wisely rheumatology list is probably more impactful for trainees and primary care physicians. The questions asking if I've re-evaluated do not reflect my feelings about The Choosing Wisely Campaign – I think it is great. But, I would suggest that most rheumatologists should already be doing those things in the list. The intended audience is important to consider in this survey." For those whose practices had changed, this reflected being more careful about ordering ANA tests, as discussed in the article by Drs. Averns and Zeiadin in this issue (see page 26).

According to survey takers, barriers to implementation could include fear of missing a diagnosis and patient demands, though most commented that they already implemented the Choosing Wisely recommendations and that there were no barriers for them.

With that being said, nearly 80% of survey respondents weren't aware of patient information resources from Choosing Wisely Canada, and almost one-third were interested in learning more about this initiative. These patient resources can be found at *choosingwiselycanada.org/resources/* and focus mainly on when to order a bone mineral density test and when to order biologic therapy.

Choosing Wisely in Rheumatology: 5 Things Physicians and Patients Should Question

- **1.** Don't order ANA as a screening test in patients without specific signs of systemic lupus erythematosus (SLE) or another connective tissue disease.
- **2.** Don't order an HLA-B27 unless spondyloarthritis is suspected based on specific signs or symptoms.
- **3.** Don't repeat dual energy X-ray absorptiometry (DEXA) scans more often than every 2 years.
- **4.** Don't prescribe bisphosphonates for patients at low risk of fracture.
- **5.** Don't perform whole body bone scans (*e.g.,* scintigraphy) for diagnostic screening for peripheral and axial arthritis in the adults.

For more information on Choosing Wisely and the 5 recommendations, visit *rheum.ca/resources/choosing-wisely/*.





