

INTRODUCTION

The American Geriatrics Society (AGS) is committed to improving health, independence, and quality of life for us all as we age by implementing and advancing programs in clinical care, geriatrics research, professional and public education, and public policy. Our partnership with the American Board of Internal Medicine (ABIM) Foundation for its *Choosing Wisely®* campaign represents an important extension of that mission. Since 2012, AGS's *Choosing Wisely* lists have raised professional and public awareness about treatments and tests to question and discuss because they may lack efficacy or cause potential harm.



Our first list of five *Choosing Wisely* recommendations—released in 2013—has since expanded to 10 suggestions addressing agitation, certain types of cancer, delirium, dementia, diabetes, insomnia, unintended weight loss, and other health concerns that may

warrant deeper discussion based on new insights and information on appropriate healthcare choices. Our work promoting high-quality, person-centered care has helped synthesize these pressing updates in a format that is easy to understand—and apply—in everyday practice. Our work *raising public and professional awareness* of these insights has helped to ensure they can move from theory to practice as we work to support the health, safety, and independence of all older adults.

METHODS

In developing the *Choosing Wisely* platform, ABIM encouraged specialty societies like the AGS to

- Develop recommendations based on our unique expertise.
- Address tests and procedures frequently used in care.
- Promote suggestions for tests and treatments warranting further discussion based on sound, sufficient, and scientific evidence.

For the AGS's initial *Choosing Wisely* list (released in 2013 and inclusive of five recommendations), we:

- Convened a workgroup led by our Clinical Practice and Models of Care (CPMC) Committee Chair and including representatives from our CPMC, Ethics, Ethnogeriatrics, and Quality and Performance Measurement Committees.
- Surveyed AGS members, representatives from the Association of Directors of Geriatrics Academic Programs (ADGAP), and other select stakeholders on tests and procedures to consider for our list.

Survey results were compiled and organized by AGS staff, with our *Choosing Wisely* Workgroup reviewing summary data and narrowing our field of tests and procedures to a short-list of 10. Literature searches and consultation with member experts further culled the list to a total of five tests and treatments to consider with caution for older men and women (see *Recommendations 1-5* in Figure 1).

In 2014, the AGS developed an additional set of *Choosing Wisely* suggestions using a similar process. Both AGS lists have since been consolidated and re-reviewed (most recently in 2015, with an additional update initiated in early 2017).

- 1 Don't recommend percutaneous feeding tubes in patients with advanced dementia; instead offer oral assisted feeding.
- 2 Don't use antipsychotics as the first choice to treat behavioral and psychological symptoms of dementia.
- 3 Avoid using medications other than metformin to achieve hemoglobin A1c <7.5% in most older adults; moderate control is generally better.
- 4 Don't use benzodiazepines or other sedative-hypnotics in older adults as first choice for insomnia, agitation, or delirium.
- 5 Don't use antimicrobials to treat bacteriuria in older adults unless specific urinary tract symptoms are present.
- 6 Don't prescribe cholinesterase inhibitors for dementia without periodic assessment for perceived cognitive benefits and adverse gastrointestinal effects.
- 7 Don't recommend screening for breast, colorectal, prostate, or lung cancer without considering life expectancy and the risks of testing, overdiagnosis, and overtreatment.
- 8 Avoid using prescription appetite stimulants or high-calorie supplements for treatment of anorexia or cachexia in older adults; instead, optimize social supports, discontinue medications that may interfere with eating, provide appealing food and feeding assistance, and clarify patient goals and expectations.
- 9 Don't prescribe a medication without conducting a drug regimen review.
- 10 Don't use physical restraints to manage behavioral symptoms of hospitalized older adults with delirium.

Figure 1: AGS *Choosing Wisely* Recommendations (as of 2015)

The *Choosing Wisely* Champions program has helped expand the *Choosing Wisely* campaign by highlighting stories of individual clinicians whose leadership in choosing tests and treatments wisely has inspired others to promote high-quality, person-centered care.

Heidi-Ann Courtney, PA-C, and **Ariel Green, MD, MPH**, were the AGS's inaugural *Choosing Wisely* Champions, recognized at the AGS Annual Scientific Meeting in 2016.

- A physician assistant at Baystate Medical Center in Springfield, MA, Ms. Courtney has participated in regular treatment reviews that have resulted in more than a thousand recommendations for medication adjustments. She has championed delirium prevention for her institution's patients, and has contributed to the virtual elimination of physical restraint use among the same without the addition of anti-psychotics and/or constant companions.
- As a member of the AGS *Choosing Wisely* Expert Panel, Dr. Green was instrumental not only in developing our recommendations but also in ensuring that they continue to reach the breadth of our member community. Dr. Green's efforts to promote *Choosing Wisely* have informed her own research interests, which look at patient-physician communication, shared decision-making, and the use of potentially inappropriate therapies in vulnerable older adults, among other topics.

At the 2017 AGS Annual Scientific Meeting, the AGS congratulated **Eric Anthony Lee, MD**, on being named our newest champion thanks to his important work at Kaiser Permanente West Los Angeles.

- As co-chair of the High Risk Drugs in the Elderly Committee for Kaiser Permanente, Southern California, Dr. Lee is a recognized authority on appropriate prescribing for older men and women. Dr. Lee helped update his institution's diabetes testing reference range and also developed delirium prevention protocols, among several noteworthy contributions to Kaiser Permanente representing the depth and breadth of *Choosing Wisely* guidance from the AGS.

Fast Facts About the Impact of *Choosing Wisely*

- More than 100 media outlets have offered coverage of AGS *Choosing Wisely* efforts since 2013.
- The AGS *Choosing Wisely* lists have been accessed by more than 3,500 AGS members and geriatrics healthcare professionals through GeriatricsCareOnline.org alone.
- AGS *Choosing Wisely* topics addressed by *Consumer Reports* and the AGS Health in Aging Foundation have been accessed by millions of older adults and caregivers annually (via HealthinAging.org).
- Three AGS suggestions made the list of *Choosing Wisely's* international top-10 recommendations.

DISSEMINATION

The first AGS *Choosing Wisely* list was released at a national press event in Washington, D.C., on February 21, 2013. In support of *Choosing Wisely's* launch, the AGS:

- Engaged in media relations efforts reaching more than 100 print, broadcast, and online outlets, including AGS-specific coverage by the *Boston Globe*, *Denver Post*, *Kansas City Star*, and *San Diego Union Tribune*, as well as broader ABIM Foundation coverage by AARP, the Associated Press, *New York Times*, NPR, Reuters, *Washington Post*, and *USA Today*.
- Worked with sister organizations across healthcare and medical education to ensure broader awareness for and dissemination of *Choosing Wisely* insights through impactful organizations like the American College of Physicians, the Centers for Medicare and Medicaid Services, and Wiley/Blackwell Publishing.
- Connected geriatrics healthcare professionals—including our more than 5,000 members—to *Choosing Wisely* insights by adding our list to a compendium of resources available for free through GeriatricsCareOnline.org, the online home for AGS resources and publications.

Since developing our second *Choosing Wisely* list and ensuring timely updates for our consolidated recommendations, the AGS has continued to work with peer groups, healthcare professionals, healthcare advocates, and members of the media and general public to ensure a broader understanding of tests and treatments that may cause more harm than good for older men and women.

- *Choosing Wisely* list updates have included extensive education campaigns leveraging the reach

of trade and popular media. These opportunities for connecting journalists to content experts on emerging insights have led to several in-depth explorations of research on efficient health care from outlets as diverse as *Consumer Reports* and Medpage Today.

- To ensure professional awareness of *Choosing Wisely* insights, the AGS continues to make our lists available for free to members and other geriatrics healthcare professionals via GeriatricsCareOnline.org. *Choosing Wisely* insights also now inform other important tools for the geriatrics community, with references embedded throughout board-certification materials for geriatricians and advanced practice nurses and in *Geriatrics At Your Fingertips*, our annually updated reference text for the latest information on clinical care.
- Through an ABIM Foundation partnership with *Consumer Reports*, the AGS has translated healthcare professional recommendations into public awareness tip sheets on particularly important topics for older adults (see Figure 2). These accessible summaries for older adults and caregivers have been made available to millions of men and women through the support of ABIM, *Consumer Reports*, and the AGS Health in Aging Foundation (our non-profit committed to connecting older adults and caregivers to geriatrics expertise).
- *Choosing Wisely* continues to inform AGS communications campaigns for our more than 5,000 members, with regular features at AGS Annual Scientific Meetings and in AGS print newsletters, member email alerts, and social media posts targeting geriatrics healthcare professionals, older adults, and caregivers.

Figure 2



For information about the AGS *Choosing Wisely* campaign, contact Mary Jordan Samuel at mjsamuel@americangeriatrics.org