



SOCIETÀ ITALIANA
DI GERONTOLOGIA
E GERIATRIA

Simposio:

**PROCEDURE E METODI NELLA CLINICA
E NELLA FORMAZIONE GERIATRICA:
"CHOOSING WISELY" È LA SOLUZIONE?**

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American Geriatrics Society Identifies Five Things That Healthcare Providers and Patients Should Question

AGS Choosing Wisely Workgroup

Given the American Geriatrics Society's (AGS) commitment to improving health care for older adults by, among other means, educating older people and their caregivers about their health and healthcare choices, the AGS was delighted when, in late 2011, the American Board of Internal Medicine Foundation invited the Society to join its "Choosing Wisely[®]" campaign. Choosing Wisely is designed to engage patients, healthcare professionals, and family caregivers in discussions about the safety and appropriateness of medical tests, medications, and procedures. Ideally, these discussions should examine whether the tests and procedures are evidence-based, whether any risks they pose might overshadow their potential benefits, whether they are redundant, and whether they are truly necessary. In addition to improving the quality of care, the initiative aims to rein in unneeded healthcare spending. According to a 2008 Congressional Budget Office report, as much as 30% of healthcare spending in the United States may be unnecessary. *J Am Geriatr Soc* 61:622–631, 2013.

Key words: geriatrics; special article; patient-centered care

Table 1. AGS Choosing Wisely—Five Things Physicians and Patients Should Question

Recommendation	Rationale	Citations
<p>Don't recommend percutaneous feeding tubes in patients with advanced dementia; instead offer oral assisted feeding.</p>	<p>Careful hand feeding for patients with severe dementia is at least as good as tube feeding for the outcomes of death, aspiration pneumonia, functional status, and patient comfort. Food is the preferred nutrient. Tube feeding is associated with agitation, increased use of physical and chemical restraints, and worsening pressure ulcers.</p>	<p>Finucane TE, Christmas C, Travis K. Tube feeding in patients with advanced dementia: A review of the evidence. <i>JAMA</i> 1999;282:1365–1370. Gabriel SE, Normand ST. Getting the methods right—the foundation of patient-centered outcomes research. <i>N Engl J Med</i> 2012;367:787–790. Teno JM, Feng Z, Mitchell SL et al. Do financial incentives of introducing case mix reimbursement increase feeding tube use in nursing home residents? <i>J Am Geriatr Soc</i> 2008;56:887–890. Teno JM, Mitchell SL, Kuo SK et al. Decision-making and outcomes of feeding tube insertion: A five-state study. <i>J Am Geriatr Soc</i> 2011;59:881–886. Palecek EJ, Teno JM, Casarett DJ et al. Comfort feeding only: A proposal to bring clarity to decision-making regarding difficulty with eating for persons with advanced dementia. <i>J Am Geriatr Soc</i> 2010;58:580–584. Hanson LC, Carey TS, Caprio AJ et al. Improving decision-making for feeding options in advanced dementia: A randomized, controlled trial. <i>J Am Geriatr Soc</i> 2011;59:2009–2016.</p>