

# How to Improve the Quality of Medical Decisions



The 11<sup>th</sup> Population Health and Care Coordination Colloquium

March 15, 2011

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Foundation President

# Foundation Mission

- ***Mission***
  - The mission of the Foundation is to inform and amplify the patient's voice in health care decisions



# ABOUT US

## We Believe Patients Should Be



***Supported & encouraged to participate in their health care decisions***



***Fully informed with accurate, unbiased & understandable information***



***Respected by having their goals & concerns honored***



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# Is Informed Consent “Real”?

- **In a survey of consecutive patients scheduled for an elective coronary revascularization procedure at Yale New Haven Hospital in 1997-1998**
  - **75% believed PCI would help prevent an MI**
  - **71% believed PCI would help them live longer**
  - **Less than half could name even one possible complication of PCI**
  - **85% were “consented” just before the procedure (by a fellow or an NP)**

*(Holmboe ES. JGIM 2000; 15:632)*



# Is Informed Consent “Real”?

- **While even through the latest meta-analysis in 2009 (61 trials, 25,388 patients):**
  - **“Sequential innovations in catheter-based treatment for non-acute coronary artery disease showed no evidence of an effect on death or myocardial infarction when compared to medical therapy.”**

*(Trikalinos TA. Lancet 2009; 373:911)*

# Is Informed Consent “Real”...10 years later?

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- **In a survey of consecutive patients consented for an elective coronary angiogram and possible percutaneous coronary intervention at Baystate Medical Center in 2007-2008**
  - **88% believed PCI would help prevent an MI**
  - **76% believed PCI would help them live longer**

*(Rothberg MB. Annals Intern Med 2010; 153:307)*



# DECISIONS Survey



- **Conducted by University of Michigan.**
- **Nationwide random-digit dial telephone survey**
- **Probability sample of 2575 English speaking Americans age 40+**
- **Reported a discussion of 1 of 9 medical decisions with a health care provider within the past 2 years**
- **Response rate 51%**

*(The Decisions Study. Medical Decision Making 2010; 30 supplement 1)*





# DECISIONS Survey: Decisions Addressed

- **Surgery**
  - Back surgery,
  - Knee/hip replacement
  - Cataract extraction
- **Cancer screening**
  - Prostate,
  - Colorectal
  - Breast
- **Medications**
  - Hypertension,
  - Hyperlipidemia,
  - Depression

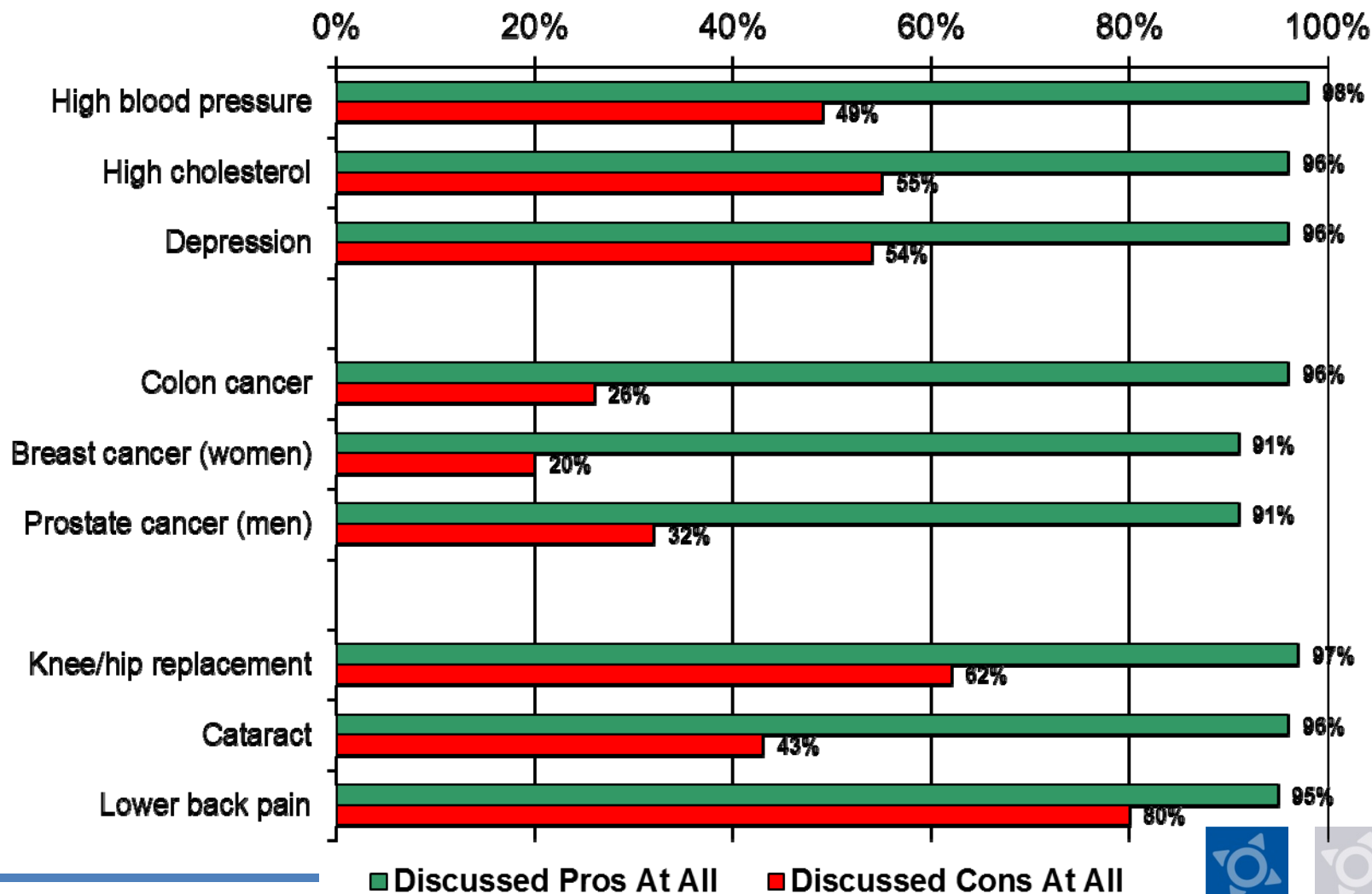


# Epidemiology of Medical Decisions in US

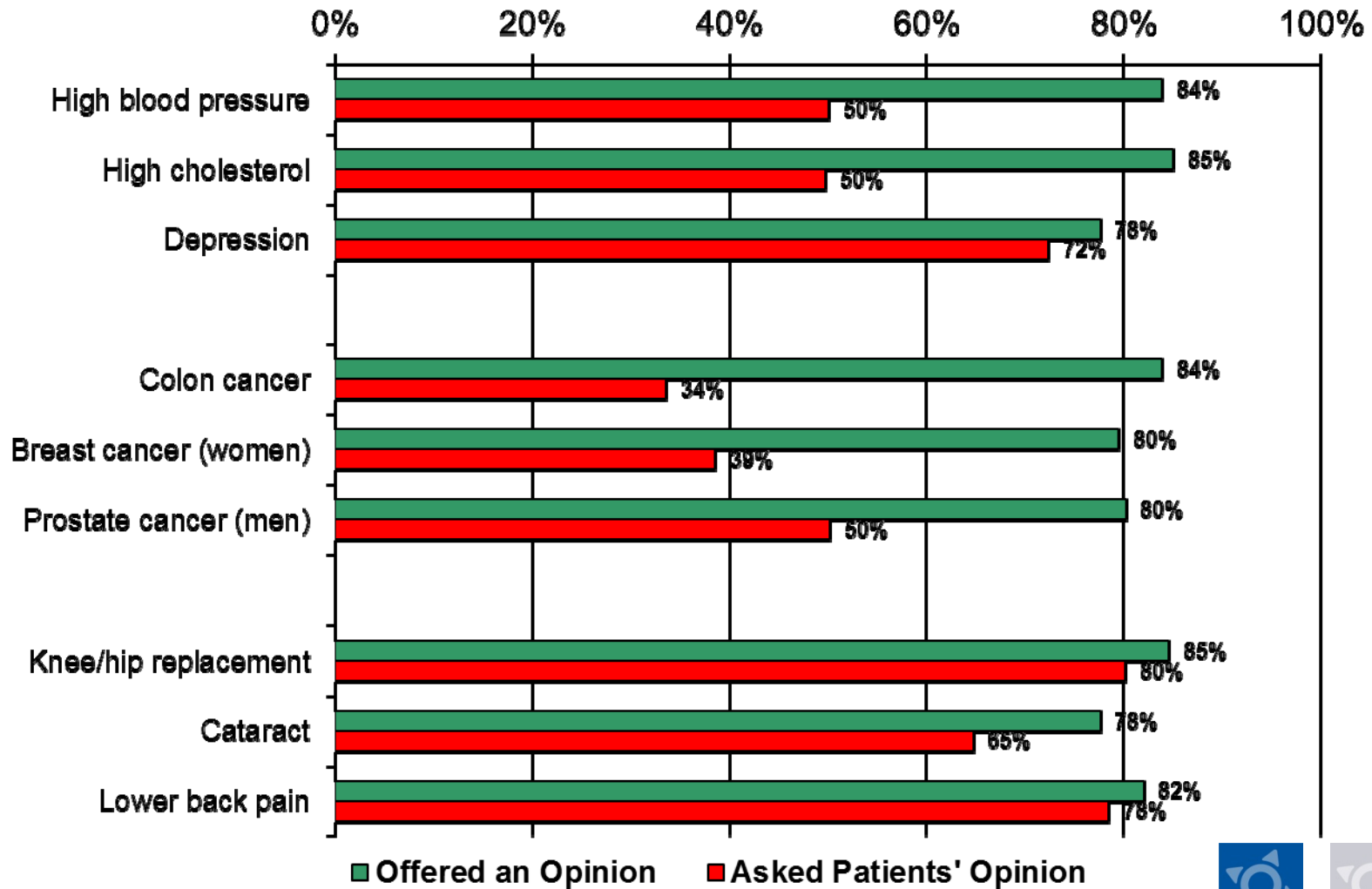
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- **In the past 2 years:**
  - **56% discussed starting or stopping meds for hypertension, hyperlipidemia or depression**
  - **72% discussed a screening test for cancer**
  - **16% discussed one of the 4 operations**

# Discussion of Pros versus Cons



# Clinician Opinions versus Asking Patient

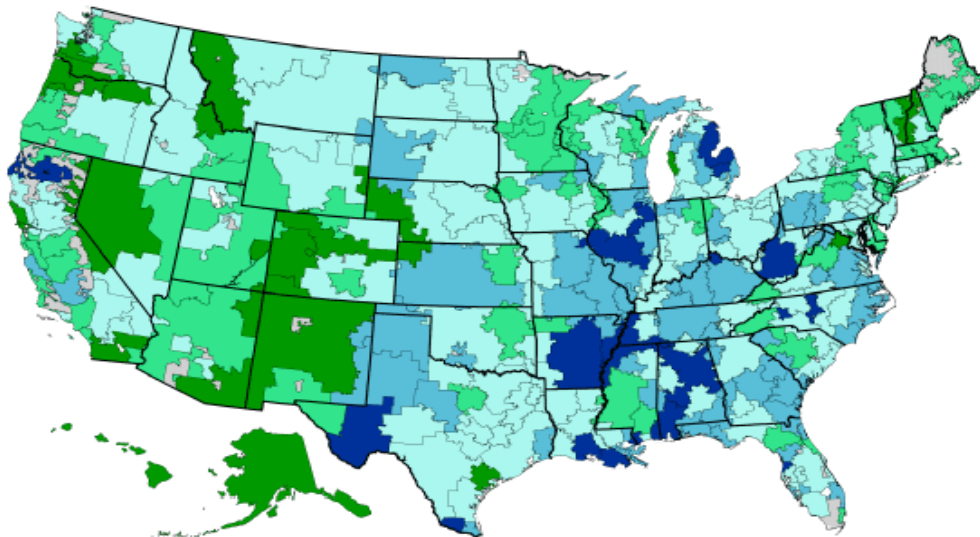


# How Much did Patients Know ?



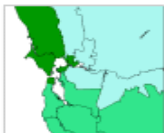
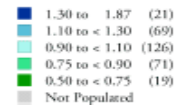
- **Clinical experts identified 4-5 facts a person should know, for example, common side effects of medications or surgery**
- **Respondents were asked the knowledge questions related to their decision**
- **For 8 out of 10 decisions, fewer than half of respondents could get more than one knowledge question right.**

# U.S. CABG rates

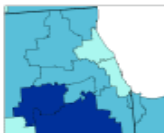


Ratio of Rates of Coronary Artery  
Bypass Grafting Procedures to  
the U.S. Average

by Hospital Referral Region (1995-96)



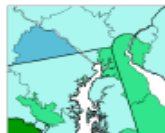
San Francisco



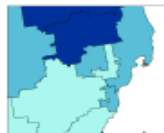
Chicago



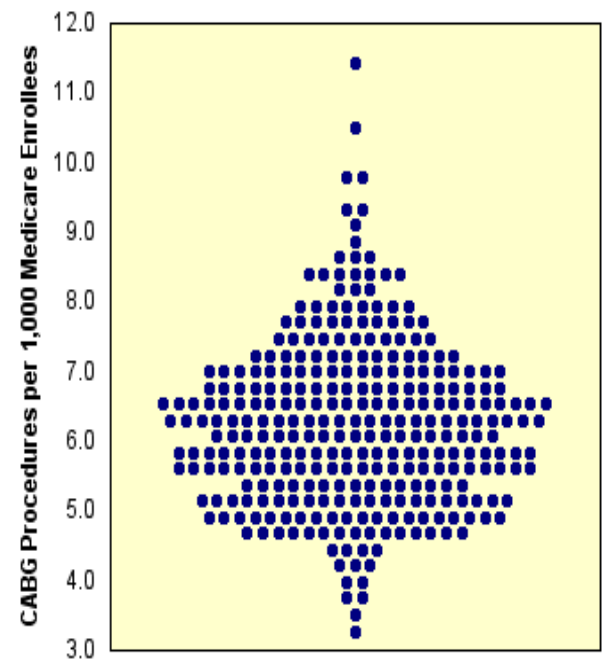
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Washington-Baltimore

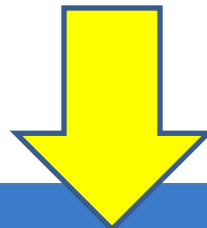


Detroit



**Patients:**  
Making Decisions in the  
Face of Avoidable  
Ignorance

**Clinicians:**  
Poorly “Diagnosing”  
Patients’ Preferences



**Poor Decision Quality**





# Decision Quality: Key Constructs

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- **Patient knows there is a decision to be made**
- **Patient knows the reasonable options**
- **Patient learns about pros and cons of each option**
- **Patient goals and concerns are part of the decision process**



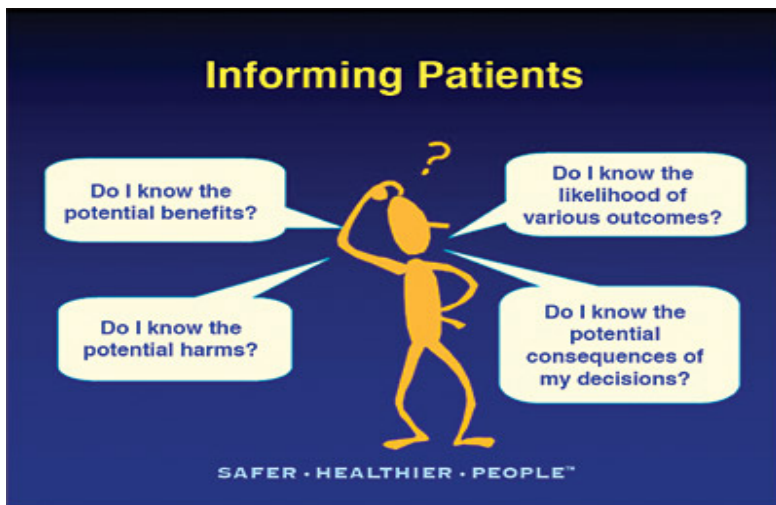
# What is Good Medical Care?

- It is not just about doing things right
- It is also about doing the right thing



# Shared Decision-Making Model

- **Key characteristics:**
  - At least two participants – [clinician] and patient – are involved
  - Both parties share information
  - Both parties take steps to build a consensus about the preferred treatment
  - An agreement is reached on the treatment to implement



*(Charles C, Soc Sci Med 1997; 44:681)*

# Patient Decision Aids Can Help!



- Tools designed to help people participate in decision making about health care options.
- Provide information on the options
- Help patients clarify and communicate the personal value they associate with different features of the options.

# Patient Decision Aids Can Help!



- Do not advise people to choose one option over another
- Not meant to replace practitioner consultation
- Prepare patients to make informed, values-based decisions with their practitioner

# The Evidence Strengthens

- **SDM supported by patient decision aids improves decision quality**
- **Both patients and physicians support SDM**
- **Implementation models are demonstrating that SDM can work “in the trenches”**



O'Connor et al.  
Cochrane Database of  
Systematic Reviews, 2009

## LAKE RESEARCH





# Cochrane Review of Decision Aids

- In 55 trials of 23 different decision aids, use has led to:
  - Greater knowledge
  - More accurate risk perceptions
  - Greater comfort with decisions
  - Greater participation in decision-making
  - Fewer people remaining undecided
  - Fewer patients choosing major surgery, PSA tests



*(O'Connor et al. Cochrane  
Database of Systematic  
Reviews 2009, Issue 3. Art.  
No.: CD001431)*

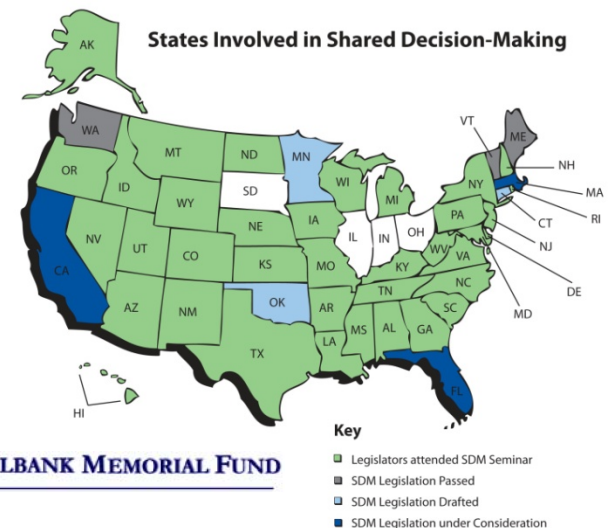




Funded Demonstration Sites	Primary Care	Specialty Care
Massachusetts General Hospital	X	
University of North Carolina	X	
Maine Health	X	
Mercy Clinics Inc.	X	
Stillwater Medical Group	X	
Oregon Rural Practice Based Research Network	X	
Palo Alto Medical Research Foundation	X	
Group Health Cooperative	X	X
University of Washington	X	X
Allegheny General Hospital - Breast Center		X
University of California San Francisco - Breast Center		X
Dartmouth Hitchcock Medical Center (DHMC) - Breast Center		X
DHMC - Urology		X
DHMC - Orthopedics		X
DHMC - Spine Center		X
DHMC - Cardiology		X



# Shared Decision Making Policy Adoption Trends



MILBANK MEMORIAL FUND

# SDM: Implementation Needs

- Patients interested in being informed and activated
- Practical systems for routine use of decision support tools
- Measures of “decision quality”
- Incentives to reward good “decision quality” rather than simply “more is better”
- Clinicians and hospitals truly receptive to patient participation



**Thank You!**

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