

AAFP ADDS 5 NEW "CHOOSING WISELY" RECOMMENDATIONS

The American Academy of Family Physicians (AAFP) has added 5 new recommendations to its Choosing Wisely list, <http://www.choosingwisely.org/societies/american-academy-of-family-physicians/>, which highlights medical tests, treatments, and procedures that may be unnecessary and should prompt discussion between patients and their physicians.

The additions cover pelvic exams, home glucose monitoring, screening for genital herpes simplex virus (HSV) infection, testicular cancer screening, and blood transfusion.

New Recommendation Specifics

AAFP Commission on Health of the Public and Science member James Stevermer, MD, of Fulton, Missouri, told *AAFP News* the commission vetted multiple possible recommendations, working from current AAFP clinical policies and reviewing Choosing Wisely recommendations from other organizations.

"We focused on topics that had evidence to support our recommendation, and where we knew the benefits, if any, did not justify the cost, risks, and harms to patients," Stevermer said. "After narrowing our slate, we moved these through 2 subcommittees of the commission, as well as the entire commission. Once finalized there, we moved the recommendations to the Board of Directors for their approval."

The AAFP's 5 recommendations are as follows:

Don't Perform Pelvic Exams on Asymptomatic Nonpregnant Women Unless Necessary for Guideline-Appropriate Screening for Cervical Cancer

"The only exception for screening is appropriate cervical cancer screening procedures (eg, Papanicolaou smears)," Stevermer said. "There is little evidence that the exam itself finds problems that would benefit the patient by finding early. However, studies have shown that pelvic exams can lead to more invasive testing and procedures. Some data also suggest that the prospect of a pelvic exam keeps some women from seeking routine care."

Stevermer said it was important to note that this recommendation does *not* apply to women who have

symptoms, in which case a pelvic exam can help determine appropriate treatment for their condition.

Don't Routinely Recommend Daily Home Glucose Monitoring for Patients Who Have Type 2 Diabetes Mellitus and Are Not Using Insulin

Stevermer said a series of studies the group examined was fairly consistent in showing that daily glucose monitoring in patients not using insulin has little effect on hemoglobin A_{1c} testing or other measures of blood glucose control. Some of these studies noted that when patients monitor their glucose daily, they were more likely to be depressed or anxious, he added.

"Here's a case where we have testing that doesn't improve glucose control, but costs money and stresses patients out—exactly the type of practice that the Choosing Wisely program is trying to reduce," Stevermer said.

Don't Screen for Genital HSV Infection in Asymptomatic Adults, Including Pregnant Women

This recommendation aligns with the US Preventive Services Task Force's (USPSTF's) 2016 final recommendation to not screen serologically for herpes simplex, which the AAFP supports.

"There is relatively little benefit to most people by screening, and at typical prevalence in the United States (15%), one-half of the screening tests will be falsely positive," said Stevermer.

Don't Screen for Testicular Cancer in Asymptomatic Adolescent and Adult Males

This recommendation aligns with the USPSTF's 2011 recommendation to not screen for testicular cancer, which the AAFP supports.

"Relatively little is known about how well screening will work, but even if highly accurate, it's not likely to add that much benefit," Stevermer explained. "Regardless of stage of presentation, testicular cancer treatment is highly effective."

Don't Transfuse More Than the Minimum of Red Blood Cell Units Necessary to Relieve Symptoms of Anemia or to Return a Patient to a Safe Hemoglobin Range (7 to 8 g/dL in Stable Patients)

"This recommendation is consistent with multiple randomized trials that show little benefit to transfusing above the 7 to 8 g/dL range (for most patients)," Stevermer said. "This recommendation also parallels the recommendations from the American Association of Blood Banks."

Value of Choosing Wisely

Stevermer said he thinks the AAFP's Choosing Wisely list will prove to be quite a valuable reference for family physicians.

"It's a reminder that more is not always better, and that by being judicious, we can reduce unnecessary interventions, with no harm coming to our patients," he said.

Stevermer recommended a 2015 *FPM* article titled "How to Help Your Patients Choose Wisely" (<https://www.aafp.org/fpm/2015/0700/p28.html>) as a nice overview of tactics that can help family physicians implement the Choosing Wisely list.

"Once they know what's on the Choosing Wisely list, family physicians can then use their knowledge of their patients and local community to help their patients make well-informed decisions," Stevermer concluded.

The American Board of Internal Medicine Foundation and *Consumer Reports* formally launched Choosing Wisely in 2012. Nine medical specialty organizations—the AAFP among them—joined the initiative at that time; since then, more than 80 such groups have signed on to the initiative.

Chris Crawford
AAFP News

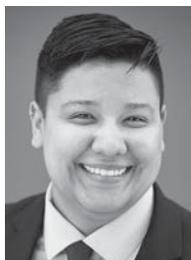


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PISACANO LEADERSHIP FOUNDATION NAMES 2018 PISACANO SCHOLARS

The Pisacano Leadership Foundation—the leadership foundation of the American Board of Family Medicine (ABFM)—recently selected its 2018 Pisacano Scholars. These 6 medical students follow in the footsteps of 118 scholar alumni who are practicing physicians and 17 current scholars who are enrolled in medical schools or family medicine residency programs across the country. The Pisacano Leadership Foundation was created in 1990 by the ABFM in tribute to its founder and first executive director, Nicholas J. Pisacano, MD (1924–1990). Each Pisacano Scholar has demonstrated the highest level of leadership, academic achievement, communication skills, community service, and character and integrity.



Ry Garcia-Sampson is a 4th-year medical student at the Warren Alpert Medical School of Brown University in Providence, Rhode Island. Originally from El Paso, Texas, Ry graduated from Brown University with a Bachelor of Arts in Ethnic Studies and was part of the Program for Liberal Medical

Education. Ry is also currently completing a Master of Public Health at the School of Public Health at Brown University.

Since beginning medical school, Ry has worked on improving health care for community members who are incarcerated or formerly incarcerated with the Center for Prisoner Health and Human Rights and with physicians who work at the Rhode Island Department of Corrections. Ry has also worked with amazing social workers through the House of Hope to do outreach and assist clients experiencing homelessness in navigating the medical system.

Ry is also working with non-cisgender community members on an oral history project around health with the goal of informing medical training and improving care for non-cisgender communities. Ry has also worked with free clinics in Rhode Island and serves as a member of the Student Health Council, which focuses on mental health within the medical school. Ry has received a scholarship from the Kaiser Permanente of Northern California for demonstrated commitment to underserved communities.



Joshua Pepper is in his final year of the Joint Medical Program (JMP)—a 5-year graduate/medical degree program at the University of California, Berkeley and University of California, San Francisco (UCSF).

Josh completed a dual degree undergraduate program at UC Santa Cruz and UC Berkeley, earning degrees in Environmental Studies and Civil and Environmental Engineering, respectively. He then spent several years working at Pesticide Research Institute, where he used geospatial analysis to map pesticide use patterns in rural communities of California. Josh also worked during this time as a website developer, data analyst, database architect, cartographer, and independent consultant.

As a medical student, Josh helped run the Suitcase Clinic, a free health center for the local underserved population. During his second year, he planned and facilitated a weekly seminar for incoming students, where they discussed the unique challenges of provid-