

What do German GPs think about overdiagnosis? - a questionnaire study

This study is part of the research network
Pro Pricare - PReventing Overdiagnosis in PRImary CARE

Susann Schaffer, Maximilian Pausch, Angela Schedlbauer & Thomas Kühlein



Study question & methods

What do German GPs know and think about overdiagnosis?

Methods:

- Online questionnaire study with GPs in northern Bavaria based on the results of a previous qualitative study



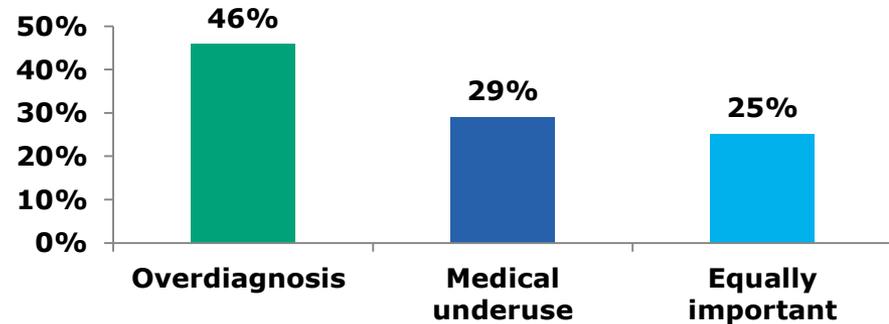
(preliminary) Results:

- N = 135 (response rate: 18%)
- 79% were male
- Mean age: 55 years
- 68% work longer than 15 years as a GP
- 49% working in a rural areas
- 63% with practice volume larger than 1000 patients/quarter



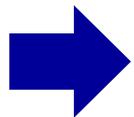
Relevance in practice

Against what do you think it is **more important to take action**?

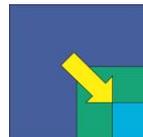


How do you estimate the **amount of medical overuse** in all medical services?

38 %

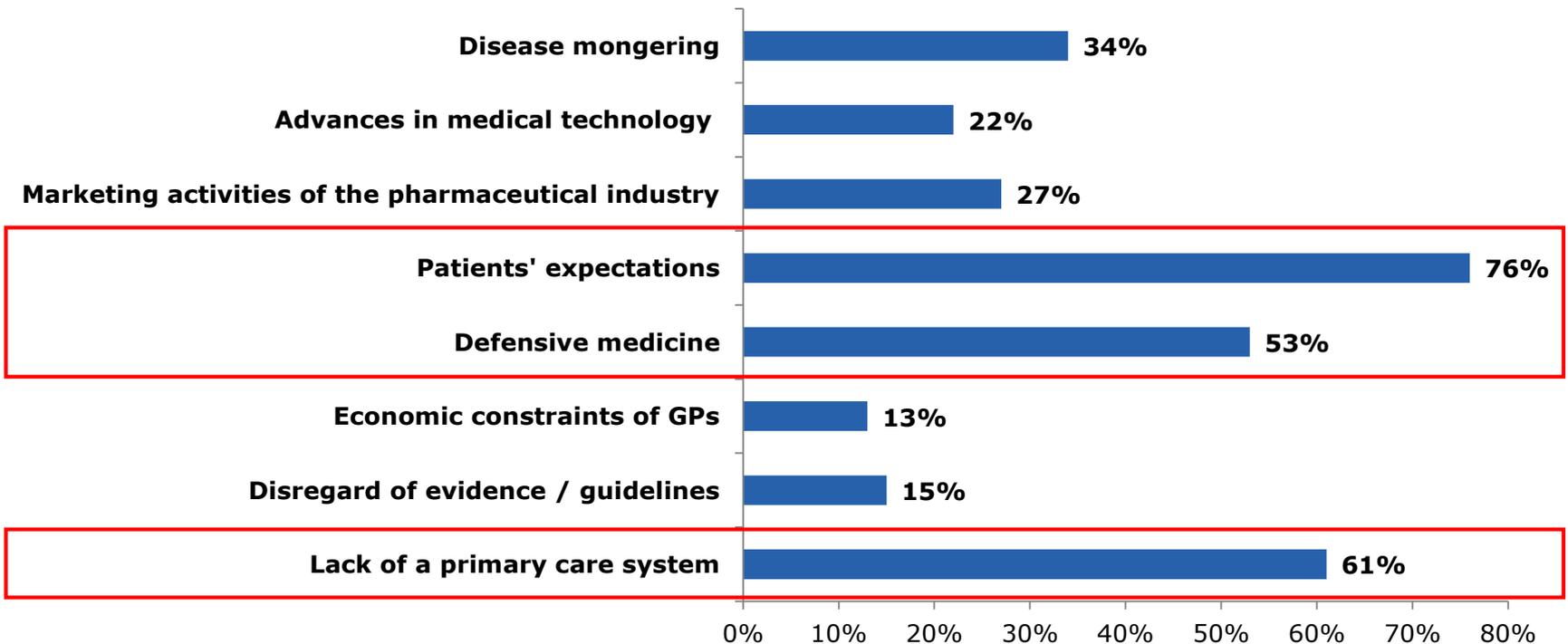


Overdiagnosis is seen as a very relevant problem



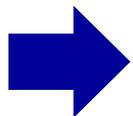
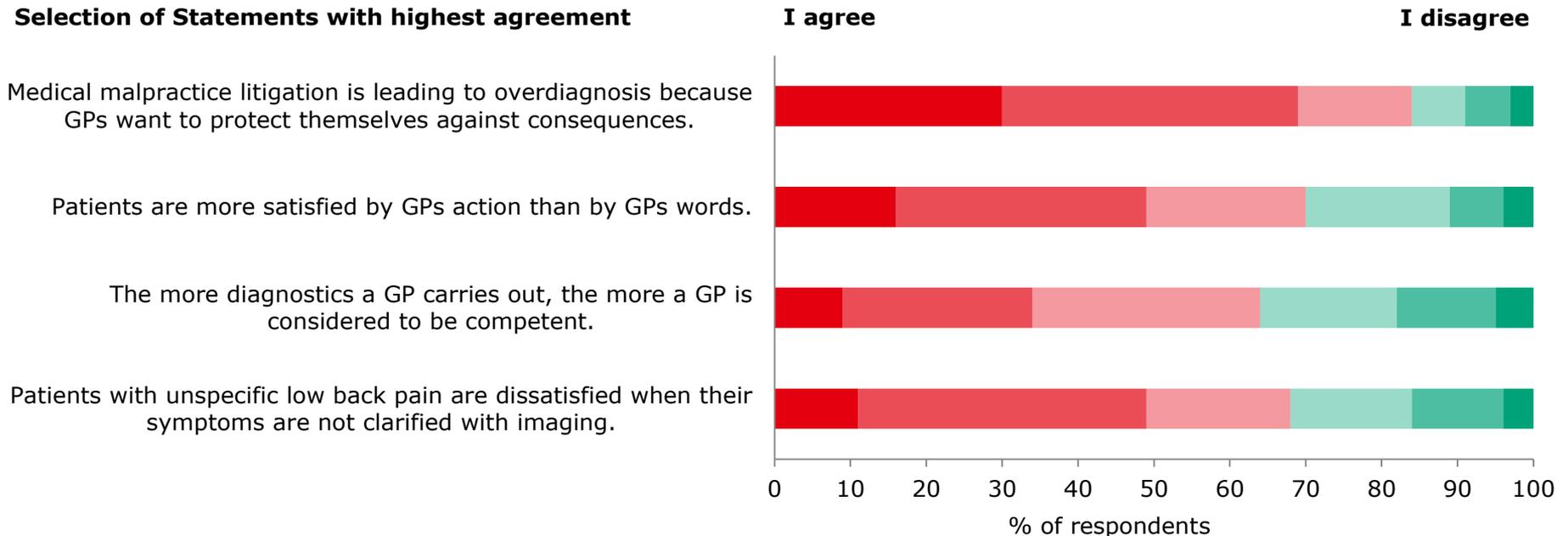
Results: Causes

What do you think are the three main causes leading to overdiagnosis?



Attitudes in favour of/in agreement with overdiagnosis

Selection of Statements with highest agreement



Higher agreement to items related to patients' expectations and defensive medicine.



Solutions:



An initiative of the ABIM Foundation

Prevention levels [4]		Doctor's side	
		absent	present
Patient's side	illness absent	Primary prevention (illness absent, disease absent)	Secondary prevention (illness absent, disease present)
	illness present	Quaternary prevention (illness present, disease absent)	Tertiary prevention (illness present, disease present)



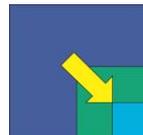
LESS IS MORE
- = + MEDICINE



Klug entscheiden

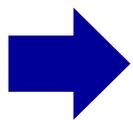
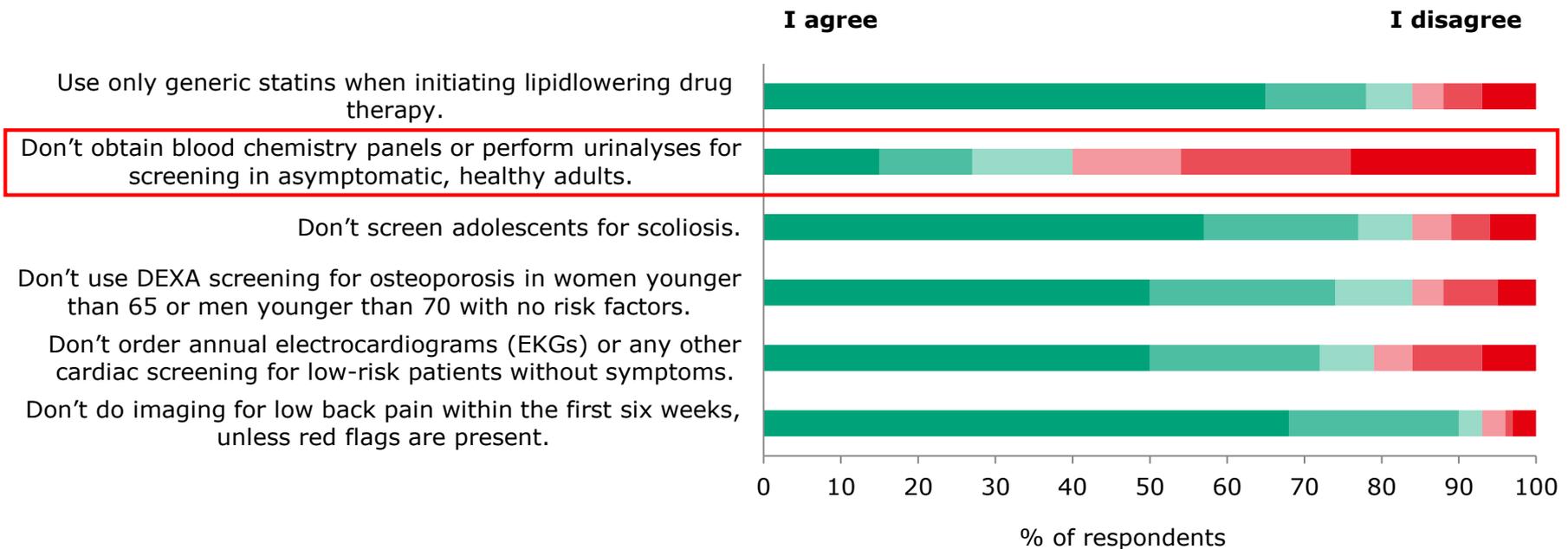
Eine Initiative der Deutschen Gesellschaft für Innere Medizin e.V. (DGIM)

- Most known campaigns: "Choosing Wisely" (32%) and "Klug entscheiden" (30%). Fifty percent took a closer look.
- **Fifty percent never heard of any campaigns.** Those GPs also see medical underuse as a bigger problem compared to overdiagnosis.



Acceptance of recommendations

Do you agree with the following „Choosing wisely“ recommendations?



High agreement, except for screening in asymptomatic patients.

Higher agreement in group of GPs who know the campaigns.



Summary

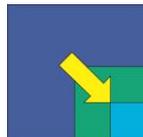
- Overdiagnosis is perceived as relevant
- Patient expectations, defensive medicine and lack of a primary care based health care system are seen as the main drivers (we are innocent)
- Half of GPs don't know about the problem
- „Choosing wisely“ recommendations are widely acceptable, except for laboratory screening tests



Conclusion

- Concerning problem awareness the glass is half full!
How can we get the rest informed and convinced?
- GPs seem to perceive themselves as innocent.
How can we overcome the blind spots?
- That GPs widely disagree with the recommendation not to obtain blood and urine chemistry panels for screening might point to a knowledge deficit of the reason for this recommendation

How can we fill the knowledge gaps?



Thank you for your attention!

