



Choosing Wisely Canada

Choosing Wisely Canada

Interview with Dr Alexander Singer

Family medicine recommendation 2

Do not use antibiotics for upper respiratory infections that are likely viral in origin, such as influenzalike illness, or self-limiting, such as sinus infections of less than 7 days' duration.

How have you implemented this recommendation in your practice?

I work in a clinic that teaches family medicine residents. I have really woven this recommendation into my scholarly work, including teaching, research, and quality improvement. I want to make sure residents always consider the consequences of their actions—not only to their patients but also to the general population. Resource stewardship is a key priority for trainees to learn, and something I work hard to model as a preceptor.

My clinic participates in CPCSSN (Canadian Primary Care Sentinel Surveillance Network).^{*} Our involvement allows us to reflect on the quality of the care we provide by reviewing the regular practice reports we get. One of the early targets we identified was around deprescribing, and I have an interest in antibiotic stewardship. We have also tried to leverage the CPCSSN reports with the quality improvement activities that are a required part of residents' curriculum.

When teaching residents how to make decisions about antibiotic usage, I focus on taking a patient-centred approach and carefully explaining potential benefits as well as harms for that individual.

How have you brought the Choosing Wisely principles to your relationship with patients?

One simple evidence-based strategy we are planning is creating posters with simple tag lines conveying that we do not write unnecessary prescriptions. They will be displayed in the waiting room and include photos of the clinicians in our practice. By "putting ourselves out there," the clinicians have a sense of accountability for being consistent with messaging. We are trying to encourage a conversation so our patients have a deeper understanding of how we are trying to reduce harms.

Sometimes it seems that patients come looking for antibiotics. When you have a person in front of you who wants something, it can be hard to say no because we are in a caring profession. But I believe patients

come seeking the right care. And that's where Choosing Wisely comes in: promoting shared decision making and patient education. The movement encourages physicians and patients to work more effectively together on multiple levels. Particularly with antibiotic overuse, if we build a relationship in which our patients trust us, we can move from a prescription-based relationship to one where we focus on the real health issues.

An individual's risk is what resonates with patients. People do not typically respond to justifications around global or population concerns—they just want to get better. So, if I think antibiotics are unnecessary, I focus on carefully explaining potential harms for that individual. People are much more willing to accept your advice when the message is personalized.

Follow-up is also key to making this work: ensuring that the patient's health improved and reinforcing that the right decision was made nurtures a trusting relationship.

What does Choosing Wisely mean to you as a family physician?

Like many things in my career, I have been in the right place at the right time. I was one of the first in my region to start looking at electronic medical record data as a reflection of practice patterns. I noticed potential overuse and potentially inappropriate prescribing. Then along came Choosing Wisely and provided a good wind to push my sails! A lot of people are serious about quality improvement and about addressing low-value, high-risk interventions. The Choosing Wisely Canada campaign gives us a framework for that, and it motivates and inspires a lot of my work and research. 🌿

Dr Singer is Assistant Professor in the Department of Family Medicine at the University of Manitoba in Winnipeg and Director of the Manitoba Primary Care Research Network.



Choosing Wisely Canada is a campaign to help clinicians and patients engage in conversations about unnecessary tests, treatments, and procedures, and to help physicians and patients make smart and effective choices to ensure high-

quality care. To date there have been 11 family medicine recommendations, but many of the recommendations from other specialties are relevant to family medicine. In each installment of the Choosing Wisely Canada series in *Canadian Family Physician*, a family physician is interviewed about how he or she has implemented one of the recommendations in his or her own practice. The interviews are prepared by Dr Kimberly Wintemute, Primary Care Co-Lead for Choosing Wisely Canada, and Diana Wegner, Project Manager, Choosing Wisely, for the College of Family Physicians of Canada and Choosing Wisely Canada.

^{*}The Choosing Wisely Canada campaign is looking at how its recommendations can become a regular part of CPCSSN reports. To learn how to receive CPCSSN reports that can assist with practice reflection, visit cpcssn.ca.