

Is That MRI Really Necessary?



While <u>Choosing Wisely</u> and similar initiatives around the world target referring physicians to think about whether an imaging test is the appropriate choice, patients also need to talk to their doctors about it, according to neurologist Brian Callaghan, MD, MS. Callaghan, Assistant Professor of Neurology, University of Michigan, and colleagues, recently published further recommendations for neurology tests and services that should be ordered sparingly. The original <u>list of 5</u> was published in 2013.

The update is published in *Neurology Clinical Practice* and added 74 more neurological items for consideration, including items from lists published by the American Academy of Sleep Medicine and the American Academy of Neurological Surgeons.

Callaghan singled out imaging for low back pain and imaging for headaches as areas where much more imaging was done than was necessary. "It's a big problem and it costs a lot of money - we're talking a billion dollars a year on just headache imaging", he said.

The diseases/symptoms that appear most often are:

- Low back pain
- Dementia/delirium
- Headache
- Concussion
- Stroke

Callaghan emphasised that they want to encourage more discussion between patients and their physicians about why an imaging test is necessary, rather than just refusing it.

See Also: Reducing Low-Value Imaging - More Intervention Needed?

"Ordering an MRI for a headache is very quick, and it actually takes longer to describe to the patient why that's not the best route," Callaghan said. "These guidelines are meant for physicians and patients both, to trigger a conversation."

The next step is to get the doctor-patient discussions going, so Callaghan's group is now researching how to make it easier for physicians to follow the guidelines. And the American Academy of Neurology has already published a shared decision-making tool for imaging for headache together with the American Headache Society - <u>Do I Need an Imaging Study for my Headache?</u>

"These are all areas where lots of physicians agree that you're more likely to get harmed by doing the procedures," Callaghan said.

The team also came up with areas that need more recommendations, including movement disorders, neuromuscular disease, epilepsy and multiple sclerosis.

Source: <u>University of Michigan Health System</u> Image credit: Choosing Wisely

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