



## No decision about me, without me



When patients complain about their care or treatment, it usually arises from a lack of information and/or their involvement in the decision-making process. Often, patients feel disenfranchised; their opinions and preferences being relegated and all decisions deferred to healthcare professionals. Consequently, the seeds of unhappiness and potential legal action are sown. The continuing and exponential rise in healthcare litigation is a reflection that patients are increasingly prepared to seek redress for any perceived failures regarding their care or treatment. In particular, this occurs if they feel they are not respected and their opinions or preferences overlooked, or they are denied any input; they are unable to exercise patient autonomy.

“Choosing Wisely” is a global campaign aimed at encouraging decision-making discussions between patients and their healthcare professionals. An initiative that was formally launched in the USA in April 2012 by the American Board of Internal Medicine (ABIM) and the consumers’ interest organisation, Consumer Reports, it has since spread throughout the world. In the UK, Choosing Wisely was officially launched in October 2016 and is co-ordinated by the Academy of Medical Royal Colleges, which represents the 24 medical Royal Colleges and Faculties in the UK and Ireland.

“Shared Decision Making” (SDM) is the collaborative process of constructive discussions between patients and healthcare professionals. SDM may be defined as “a process in which clinicians and patients work together to select tests, treatments, management or support packages, based on clinical evidence and the patient’s informed preferences. It involves the provision of evidence-based information about options, outcomes and uncertainties, together with decision support counselling and a system for recording and implementing patients’ informed preferences”<sup>1</sup>.

SDM is the opposite of the older and now considered outdated paternalistic approach to patients, which assumes that healthcare professionals know best and patients know little. With SDM, there is explicit acknowledgement that there is usually more than one way to treat or manage a health-related problem. This is also in line with the concept of personalised medicine; the emphasis is on targeted management for improved outcome rather than a “one size fits all” approach. After all, we are unique in that our health and well-being are influenced by our inherent differences combined with our lifestyles and the environment, all these elements being inseparable. Hence, as part of the decision-making process, a risk-benefit analysis of the options, including “no treatment”, is necessary. By facilitating the decision-making process, the care pathway ultimately chosen is meant to be:

- supported by evidence
- not duplicative of other tests or procedures already received
- free from harm
- truly necessary
- consistent with patients’ values.

To this end, Choosing Wisely encourages patients to apply the “Bran” test during treatment planning and ask the following questions:

- What are the **B**enefits?
- What are the **R**isks?
- What are the **A**lternatives?
- What if I do **N**othing?

The principles of Choosing Wisely are pertinent regardless of the setting, whether it is primary, secondary or tertiary, and irrespective of speciality. Furthermore, not only must healthcare professionals actively participate in SDM, but also we must

be prepared and should expect patients to apply the “Bran” test to any suggested investigations or interventions.

The general public across the world now expects healthcare professionals to deliver a high standard of service and care. More than ever, there is greater focus on processes and governance at every level. In the digital age, patients are also better informed. Dentistry, including endodontic treatment, is no exception. Patients will not tolerate poor standards, such as out-of-date views or empirical practices. There is increasing public demand for independent, robust scrutiny and accountability of every aspect of healthcare.

Evidence-based practice, “the conscientious, explicit and judicious use of current best evidence in making decisions about the care of the individual patient”<sup>2</sup>, is the cornerstone of healthcare. In order to be in a position to engage patients in SDM and answer all the questions posed by the “Bran” test, we must possess the knowledge and keep up to date with scientific developments and the relevant literature. Continuing professional development is a lifelong commitment and it should encompass all forms of learning, whether it is attending conferences, meetings or hands-on courses, or reading

books and journals. ENDO – Endodontic Practice Today strives to contribute to, and facilitate, continuing professional development.

“No decision about me, without me” is more than a catchy slogan: It is the current standard expected in modern healthcare. Healthcare professionals can no longer act as the sole arbiter in determining the material risks to patients. High-quality care must be patient-centred. Let us all help our patients to choose wisely.



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## ■ References

1. Coulter A, Collins A. Making shared decision-making a reality: no decision about me, without me. 2011. London: The Kings Fund. Available at: [https://www.kingsfund.org.uk/sites/default/files/Making-shared-decision-making-a-reality-paper-Angela-Coulter-Alf-Collins-July-2011\\_0.pdf](https://www.kingsfund.org.uk/sites/default/files/Making-shared-decision-making-a-reality-paper-Angela-Coulter-Alf-Collins-July-2011_0.pdf). Accessed 17 July 2018.
2. Sackett DL, Rosenberg WM, Gray JA, Haynes RB, Richardson WS. Evidence based medicine: what it is and what it isn't. *BMJ* 1996;312:71–72.