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## **WORLD'S LEADING KIDNEY SOCIETY JOINS EFFORT TO REDUCE UNNECESSARY MEDICAL TESTS AND PROCEDURES**

*Choosing Wisely® campaign improves care by targeting wasteful interventions*

**Washington, DC (April 4, 2012)**—The American Society of Nephrology (ASN), the world's leading kidney organization, joins the American Board of Internal Medicine (ABIM) Foundation, eight other leading national medical specialty societies, and Consumer Reports in the new *Choosing Wisely®* campaign that helps health care professionals and patients avoid wasteful and sometimes harmful medical interventions. Unnecessary or redundant tests and procedures account for nearly one third of the medical care delivered in the United States.

ASN President Ronald J. Falk, MD, FASN said, "ASN is honored to participate in ABIM Foundation's *Choosing Wisely* campaign. ASN and its nearly 14,000 members work daily to cure kidney disease."

Each *Choosing Wisely* partner created lists of five common, but not always necessary, tests or procedures in their fields that patients and physicians should question and discuss. "In developing its list, ASN focused on aligning patient care with evidence-based medicine," said Dr. Falk. "ASN's list and the *Choosing Wisely* campaign emphasize the critical partnership of patients, families and kidney professionals in providing optimal patient care," he added.

The following make up the "Five Things" list developed by ASN:

1. Routine cancer screening—including mammography, colonoscopy, PSA testing, and Pap smears—of dialysis patients who have limited life expectancies and no signs or symptoms of cancer is not cost effective and does not improve survival in these patients.
2. Administering erythropoiesis-stimulating agents—drugs that are commonly used to prevent anemia—to chronic kidney disease patients who do not experience symptoms of anemia, even if they have low levels (<10 g/dl) of hemoglobin, does not improve survival or prevent cardiovascular disease and may even be harmful.
3. Non-Steroidal Anti-Inflammatory Drug (NSAID) use in individuals with high blood pressure, heart failure, or chronic kidney disease can raise blood pressure, make antihypertensive drugs less effective, cause fluid retention, and worsen kidney function. Other medications such as acetaminophen, tramadol, or short-term narcotic pain relievers may be better options for these patients.
4. Using a peripherally inserted central catheter (PICC)—which allows access to the blood for prolonged treatments such as long chemotherapy regimens and extended antibiotic therapy—should not be done in patients with stage III to V chronic kidney disease before consulting a kidney specialist. A PICC is typically inserted into a vein in the upper arm and advanced until

its tip reaches a large vein in the chest near the heart. In some cases, it can cause blood vessel complications that destroy the potential to most effectively access patients' blood for dialysis.

5. Long-term dialysis should not be started without ensuring that kidney disease patients, their families, and their physicians all participate in the decision to do so. Patients should express their individual goals and preferences and have full knowledge of their prognosis and the expected benefits and harms of dialysis.

Dr. Falk noted that millions worldwide have kidney disease. "Improving outcomes for these patients requires early involvement of kidney professionals. ASN and its members are committed to treating pain and other medical conditions in ways tailored to the needs of patients and their families. ASN commends ABIM Foundation's efforts to align patient and professional interests with the best medical outcomes."

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***How ASN's list was developed: ASN maintains a Quality and Patient Safety (QPS) task force, chaired by Amy W. Williams, MD. This task force advances ASN's commitment to providing high-quality care to patients and to raising awareness of patient safety issues for all professionals administering care to kidney patients. Each of ASN's 10 advisory groups contributed expertise to the task force to ensure it addresses all areas of nephrology practice, and the society's president, public policy board and council also provided insights. The QPS task force centered its focus on five items most likely to positively impact and influence optimal patient care. The final list of five items was unanimously approved by the ASN public policy board and council. For complete detail on ASN's work on the Choosing Wisely campaign, and future updates, go to [www.asn-online.org/choosingwisely](http://www.asn-online.org/choosingwisely). ASN's disclosure and conflict of interest policy can be found at [www.asn-online.org](http://www.asn-online.org).***

In addition to offering various lists of "Five Things Physicians and Patients Should Question," the ABIM Foundation and its partners will develop tools to help physicians discuss these issues with their patients.

Joining ASN and the ABIM Foundation in *Choosing Wisely* are:

- American Academy of Allergy, Asthma & Immunology
- American Academy of Family Physicians
- American College of Cardiology
- American College of Physicians
- American College of Radiology
- American Gastroenterological Association
- American Society of Clinical Oncology
- American Society of Nuclear Cardiology
- *Consumer Reports*

*About the American Society of Nephrology: Founded in 1966, and with more than 13,500 members, the American Society of Nephrology (ASN) leads the fight against kidney disease by educating health professionals, sharing new knowledge, advancing research, and advocating the highest quality care for patients*

To learn more about *Choosing Wisely*, visit [www.ChoosingWisely.org](http://www.ChoosingWisely.org)