

# Many patients are given unnecessary care. Here's why

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International data suggest that 11% to 30% of all care given is unnecessary.  
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Caregivers want patients to feel cared for. This, according to a new doctoral thesis from Karolinska Institutet, is one reason why they still

give treatments that provide no benefit.

## **What is low-value care?**

Care practices that are ineffective, such as unnecessary examinations or treatments that do nothing to help combat the condition, such as giving antibiotics for a viral infection or an infection of the upper respiratory tract, says Sara Ingvarsson, researcher at the Department of Learning, Informatics, Management and Ethics, Karolinska Institutet, who recently defended her [doctoral thesis](#) about low-value care. It also includes treatments that have a poor risk-benefit balance, like conducting an unwarranted X-ray examination that exposes the patients to unnecessary radiation. There is also a risk of secondary findings that are harmless but nonetheless worrying to the patient.

## **How common is this?**

We don't know. It's hard to study and very little research has been done on this in Sweden. However, international data suggest 11% to 30% of all care given. In one U.S. survey, 72% of doctors say that they give low-value care daily.

## **Why does this happen?**

The studies in my thesis give several reasons. For one, it's a systemic flaw, such as standard orders for samples to be taken when some are not medically justified. Then there's the doctor-patient relationship. My interview studies show that doctors often have a strong desire to help their patients, and doing something feels better than doing nothing. It can also be hard to resist pushy patients who insist on a particular treatment or examination. Financial instruments can complicate matters further: if a GP center, for example, gets paid per registered patient, the doctors

will try to keep their patients happy. We've seen that this causes an increase in low-value care.

## Why is this important to draw attention to?

Its [human nature](#) to want to help, so its easy to understand the doctors' behavior. But we have a limited health care budget and I think its important that our shared resources are put to the best possible use.

## How can the use of low-value care be reduced?

We don't have an evidence-based method yet. But one way is for care units and medical centers to review their routines so that, for instance, only relevant samples are taken. Its also important to continue the efforts to reduce the unnecessary prescription of antibiotics. In my experience, doctors are fully aware of the phenomenon, but they might need to raise the issue collectively to make it easier to break certain habits.

At a system level, health care organizers should bear in mind that [financial incentives](#) can determine the amount of [low-value care](#) given. Individual patients also need a better understanding of medical priorities. I believe that few people would demand care if they understood that it would have no effect. But we know too little about the patients' perspective, and more research is needed.

**More information:** Tipping the scale of resources: de-implementation of low-value care from an operant perspective.

[openarchive.ki.se/xmlui/handle/10616/48459](http://openarchive.ki.se/xmlui/handle/10616/48459)

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