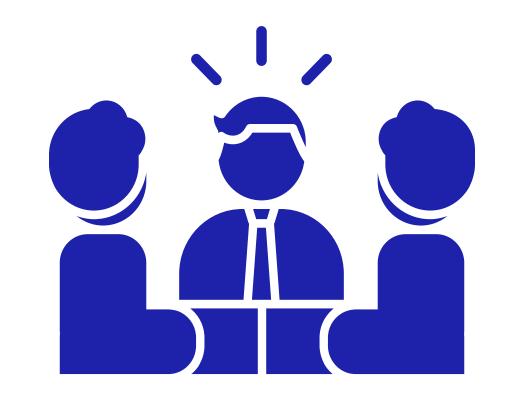


# Barriers to reducing imaging for low back pain in Newfoundland and Labrador

Low back pain is among the top 5 reasons that patients visit their family doctor. By far, most cases don't require investigations beyond a clinical exam. Despite this, over-imaging for low back pain persists.

# What did the research team do?

Interviewed family doctors across the province to identify barriers to following imaging guidelines for low back pain in Newfoundland and Labrador (NL). We asked detailed questions to ensure that we picked up important, but subtle, barriers as well as common issues that readily come to mind (like lack of time).



# What did they find?

## Five key barriers:



## Fear of consequences

Family doctors fear missing a serious diagnosis and view imaging as a "fail-safe" that will expose conditions they might not have discovered on their own.



### Patient demand

Family doctors feel that patients pressure them to image. They believe imaging will reduce patient anxiety/frustration and struggle to convince patients that imaging isn't needed.



## System factors

The current fee-for-service payment model discourages family doctors from spending the time with patients required to counsel them on back pain as it results in a a loss of revenue.

They are also sometimes compelled to image patients when referring to another healthcare provider or because it has been requested by insurance companies, etc.



#### Time

Family doctors don't have time during an average day in clinic to explain to patients why imaging isn't necessary.



#### Access to resources

Sometimes a family doctor will image patients who are unable to access more appropriate venues of care (like physiotherapy).

# Why is it important?

We have a lot of room for improvement. Up to half of all LBP imaging requests are inappropriate. In NL, a recent study found that only 7% of lumbar spine CT scans were clearly appropriate, 16% were clearly inappropriate, and a large majority were questionable.



#### For patients

Unnecessary imaging can delay or detract from appropriate treatments which can lead to a longer recovery or chronic pain



#### For policy makers

Inappropriate imaging creates unnecessary burden on the health system. It is costly and clogs up the system leading to increased wait times



#### For clinicians

Understanding the root causes of unnecessary imaging will help us develop interventions that support clinicians to adopt imaging guidelines

Local factors play an important role in making change happen. The context-specific barriers we identified are the foundational work we will use to build an intervention to reduce unnecessary imaging for low back pain in NL.



#### The De-implenting Wisely Research Group

comprised of researchers, clinicians, and patients from Newfoundland and Labrador, Ontario, and Alberta led by Dr. Jeremy Grimshaw



PRIIME is NL's network for Primary and Integrated Healthcare Innovation (PIHCI) funded under CIHR's Strategy for Patient-oriented Research. The network brings together physicians, patients, researchers and policymakers to support evidence-based primary care reform in our province and create research that is important to patients in NL



The PHRU is a research unit within the Faculty of Medicine at Memorial University that conducts primary care research to inform primary care decision-making in NL

For more information about this study and our future work please contact Dr. Amanda Hall, the local Principal Investigator (amanda.hall@med.mun.ca)







