

International Roundtable on Choosing Wisely
Wednesday, June 11 – Thursday, June 12, 2014
Amsterdam, Netherlands

The Italian project
***“Doing more does not mean
doing better”***

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Coordinator of the project “Doing more does not mean
doing better”

Slow Medicine

Measured

Doing more does not mean doing better

Respectful

People's values, expectations and desires are different and inviolable

Equitable

Appropriate and good quality care for all



Richard Smith: The case for slow medicine

17 Dec, 12 | by BMJ Group



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“I have little doubt that Slow Medicine – like Slow Food and slow lovemaking – is the best kind of medicine for the 21st century”
Bologna, December 14 2012



Measured *Doing more does not mean doing better.*

The dissemination and use of new treatments and new diagnostic procedures is not always accompanied by greater benefits for patients.

Economic interests, as well as cultural and social pressures, encourage both an excessive use of health services and an expansion of people's expectations beyond what is realistic, what the health system is able to deliver. Not enough attention is paid to the environment or the integrity of the ecosystem.

A measured medicine involves the ability to act with moderation, gradually, and essentially, and uses the resources available appropriately and without waste. A measured medicine respects the environment and protects the ecosystem.



Slow Medicine recognizes that doing more does not mean doing better.

Respectful *People's values, expectations and desires are different and inviolable.*

Everyone has the right to be what he/she is, and to express what he/she thinks.

A respectful medicine is able to acknowledge and take into consideration the values, preferences and orientations of a person in every moment of life.

Health professionals act with care, balance and empathy.

Slow Medicine recognizes that people's values, expectations and desires are different and inviolable.



Equitable *Appropriate and good quality care for all.*

An equitable medicine promotes appropriate care, which is both adequate to the person and circumstances, and proven to be effective and acceptable for both patients and health professionals.

An equitable medicine opposes inequality and facilitates access to health and social services. It overcomes the fragmentation of care, and encourages the exchange of information and knowledge among professionals.



Slow Medicine promotes appropriate and good quality care for all.



“Doing more does not mean doing better”

Each Italian specialty society engaged in the project will develop **a list of top 5 tests and treatments** whose necessity should be questioned and discussed as :

- they are **commonly used in Italy**
- they have been shown by the currently available evidence **not to provide any meaningful benefit to at least some major categories of patients** for whom they are commonly ordered
- they may **cause patient harm**

Physician and patient should have **conversations** and **discuss** the use of these tests and treatments, in view of **wise and shared choices**.

PARTNERSHIP between physicians and other health professionals & patients and citizens.





Slow Medicine launched the project in December 2012.
Also promote the project :

- The National Federation of Medical Doctors' and Dentists' Colleges (**FNOMCeO**)
- The National Federation of Nurses' Colleges (**IPASVI**)
- The Italian Society for Quality in Healthcare (**SIQuAS VRQ**)
- **Change** Institut in Turin
- **Partecipa Salute**, established by IRCCS-Mario Negri, Italian Cochrane Centre and Zadig srl.
- **Inversa Onlus**, patients' association
- **Altroconsumo**, consumers' association
- **Slow Food Italy**



1 - Lists of tests and treatments

To date, the following Italian specialty societies and associations are involved in the project and **created their lists of tests and treatments** that should be questioned and discussed in Italy:

- The Italian Society of Medical Radiology – SIRM
- The Italian Association of Radiation Oncology – AIRO
- The Italian Board of Medical Oncology Directors – CIPOMO
- The Cochrane Neurological Field in Italy – CNF
- The Italian Association of Dietetics and Clinical Nutrition – ADI
- The Italian Association of Hospital Cardiologists– ANMCO
- The Italian Society of Pediatric Allergy and Immunology – SIAIP
- The Italian Society of General Practitioners – SIMG
- Italian Specialty Societies of Nurses of: Operating Theater, Stomacare, Skin Ulcers, Hospital Medicine – AICO, AIOSS, AIUC, ANIMO



The following National specialty societies and associations also joined the project and **are creating their lists**:

- The Italian Association of Neuroradiology - AINR
- The Italian Association of Psicogeriatrics - AIP
- The Italian Association of Medical Diabetologists – AMD
- The Italian Association of Hospital Dermatologists – ADOI
- The Italian Federation of Associations of Hospital Internal Medicine – FADOI
- The Italian Society of Human Genetics – SIGU
- The Italian Society of Palliative Care- SICP
- The Italian Society of Allergy, Asthma and Clinical Immunology – SIAAIC
- The Italian Association for the Promotion of appropriate care in Obstetrics, Gynecology and Perinatal Medicine – ANDRIA
- The Italian Association of Nuclear Medicine - AIMN
- The Italian College of Chief Vascular Surgeons
- The Italian Federation of Pediatricians – FIMP
- The Cultural Association of Pediatricians - ACP
- The International Society of Doctors for the Environment (ISDE)
- The Italian Society for Medical Education (SIPeM)
- Other Italian Specialty Societies of Nurses (ANIARTI, AISLEC.....)



2 – Information and dissemination

- **Information of health Professionals** and their **education** about EBM, Medical Humanities and their relationship with patients
- Development of **patient-friendly material** by both physicians and citizens (Altroconsumo)
- The lists will be **disseminated widely**, as well as the concept that *“Doing more does not mean doing better”*



3 – First implementations

A first practical application of the project **in primary care** will be carried out **in Piedmont**, with the collaboration of the local section of the Italian Society of General Practitioners – SIMG.

Starting from the practices already chosen by the SIMG, other actions will follow, namely:

- a specific training of physicians focusing on the acquisition of **communication and of counselling skills**
- the development of patient-friendly material about the overused tests and treatments identified
- a specific communication campaign to patients and citizens
- a quantitative and qualitative assessment of the impact of the initiative.

Some hospitals too started to identify tests and treatments whose necessity should be questioned and discussed.

The first were the hospitals in Cuneo (Italy) and in Locarno (Switzerland)





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un progetto di
Slow Medicine

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Perché una medicina
sobria, rispettosa e giusta
è possibile

Prefazione di CARLO PETRINI

Sperling & Kupfer

Il libro – manifesto della rivoluzione slow nella medicina: un nuovo modo di intendere salute, cura e sanità.

Negli ultimi cinquant'anni il progresso della medicina ha prodotto vantaggi indiscutibili per la nostra salute, ma ha anche contribuito a diffondere false convinzioni e aspettative irreali, che hanno aumentato la richiesta di farmaci ed esami. La verità emerge da una recente ricerca: su 2.500 prestazioni sanitarie solo il 4,6% risulta del tutto appropriato. E non sono i pazienti, contrariamente a quanto si crede, ad avere vantaggi da prescrizioni non necessarie. Al contempo è aumentata la distanza tra medico e paziente – poco tempo a disposizione per le visite, scarso scambio di informazioni, alta conflittualità –, mettendo in serio pericolo la relazione di fiducia fondamentale per la qualità della cura. La Slow Medicine, giovane movimento in sintonia con il più noto Slow Food, nasce dalla considerazione che tutti noi rischiamo di farci irreggimentare, di lasciare ad altri – in particolare a chi ha interessi economici che spingono a «inventare malattie e accrescere il consumo di prestazioni e farmaci» – il potere di orientare le decisioni riguardo alla nostra salute. Perché Slow? Perché sostiene che dialogo, rispetto e giustizia curano più efficacemente, e che fare di più non vuole dire fare meglio. Attraverso l'esperienza di cittadini e di professionisti e con dati scientifici aggiornati, questo libro spiega come ripensare prevenzione, diagnosi e terapia nell'interesse del paziente: più ascolto da

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