**Title**

Implementing Choosing Wisely Australia

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**Background**

The Choosing Wisely Australia (CWA) initiative helps clinicians and patients engage in conversations about unnecessary tests, treatments and procedures.

CWA is led by Australia’s colleges, societies and associations with [NPS MedicineWise](http://www.nps.org.au/) (NPSMW) facilitation. Lists of health practices to question have been developed. Multifaceted implementation strategies are key to reducing problematic practices.

**Aims**

To embed CWA recommendations into multifaceted NPSMW general practice programs to reduce unnecessary tests, treatments and procedures, supporting improved quality use of medicines and medical tests.

**Method**

Literature reviews, environmental scanning and stakeholder interviews informed program design. Potential evidence-practice gaps were mapped to relevant CWA recommendations.

Messaging was developed and tested with expert health professional and consumer working groups. Barriers and enablers for change were explored. Interventions included educational outreach visits, MBS/PBS feedback, clinical audits, case studies and resources.

Program evaluation is ongoing, incorporating participation data, surveys, interviews, and analyses of general practice and PBS/MBS data.

**Results**

CWA recommendations embedded in NPSMW programs from 2016 included: using Ottawa ankle rules (OAR) to discount fracture in acute ankle injury patients (Ankle and knee [AKI] program); avoiding statin therapy without first assessing absolute cardiovascular event risk (Statins program); avoiding gabapentinoids for conditions not fulfilling neuropathic pain criteria (Neuropathic pain program); and avoiding long term proton pump inhibitors in patients with uncomplicated disease without reducing dose or ceasing (Starting, stepping down and stopping medicines program).

Qualitative evaluation to date showed GP AKI program participants reported being more aware (+51%), having increased application (+26%) of the OAR and decreased imaging referrals for ankle injuries (‑59%).

**Conclusion**

GPs reported increased awareness and application of a CWA recommendation following participation in the AKI program. NPSMW programs may be effective for implementing CWA recommendations in general practice.