

Barriers to Diagnostic Excellence

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What We Will Cover

- Atypical presentations/diagnostic uncertainty
- Inaccuracy of diagnostic tests
- Attitudes of providers
- Attitudes of patients
- Prioritization: What's hot and what's not

Atypical presentations

- Commonly cited examples (e.g. acute MI presenting as shortness of breath, hyperthyroidism presenting as weight loss)
- Probably less important with newer diagnostic testing and better information sources readily available
- Common final pathways (e.g., altered mental status, falls)

Diagnostic uncertainty

- Many possible causes of symptoms (e.g., fatigue, apathy)
- Co-morbidity
 - Inability to articulate symptoms
 - The signal-to-noise problem
 - Medication AEs as cause of symptoms
- Delay in diagnosis due to unavailability of tests

Inaccuracy of diagnostic tests

- Age-related normal values (e.g., ESR,
- D-Dimer)
- Age-related physiologic changes that may cause false positives (e.g., decreased kidney function and BNP)
- Age-related performance of diagnostic tests
 - Coronary artery calcium scores
 - Coronary computed tomographic angiography

Attitudes of providers

- Ageism
- The case of the missing Annual Wellness Visit (24% in 2017)
 - Lower rates in non-Hispanic blacks and Hispanics
- Chasing incidentalomas
- “Why bother, it won’t change your treatment approach.”

Attitudes of patients

- Please find a reason for my symptoms
- Find and fix everything
- Don't label me and ruin my life
- I don't want to take another medicine

Prioritization: What's hot and what's not

- “Pre” diseases and non-diseases (e.g., pre-diabetes, CKD G3a)
- Efforts to make earlier diagnoses of asymptomatic diseases that have no effective disease-modifying treatments
 - Advocacy groups
 - Health care systems
 - Pharmaceuticals
 - Governmental agencies
- HCCs and over-diagnosis

Take Home Messages

- Diagnostic excellence in older persons is an imprecise science due to:
 - Patient factors intrinsic to aging
 - Comorbidity
 - Atypical presentations
 - Inaccuracy of diagnostic tests
 - Provider and patient attitudes
 - Priorities