

Advancing Diagnostic Excellence for Older Adults

Frame Diagnostic Excellence & Shared Decision-Making for Older Adults

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Mrs. B, 78 y.o.

- DM, depression, upper GI bleeds, hypertension, recent blood clot, heart failure with reduced ejection fraction, sleep apnea, osteoarthritis.
- Widowed, doesn't drive, takes 2 buses to get to daughter's house to babysit; can't afford taxi, Uber, & some medications
- Main concerns: fatigue, dyspnea, urinary frequency, pain



Considerations in diagnosis & shared decision-making with older adults

- 80+% of older adults have multiple chronic conditions; variable life circumstances
- With multiple conditions & life circumstances:
 - **Uncertainty**
 - Symptoms, exam, lab (cornerstones of diagnosis) don't always align with individual diseases
 - Evidence-based treatments of isolated diseases often of uncertain benefit, potential harm and burden
 - **Competition/conflict** – addressing one condition worsens another
 - **Heterogeneity**
 - Unique combinations of life circumstances & conditions
 - Variable outcome priorities in face of tradeoffs

Usual definition of high quality diagnosis

Process of identifying disease, condition, or injury from its signs and symptoms (history, physical exam, tests, imaging, biopsies)

Explicit & implicit assumptions:

- ✓ discrete isolatable condition that can be managed in isolation
- ✓ discrete set of symptoms, test results for each condition
- ✓ diagnosis leads to beneficial treatment with little or no harm to coexisting conditions or to overall health and functioning

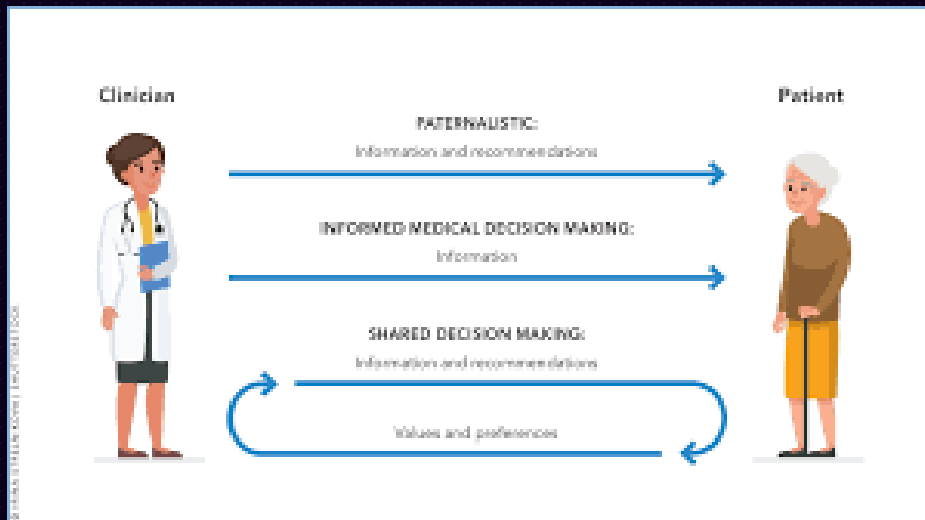
Diagnostic excellence for older adults involves identifying:

- ✓ specific health priorities (health outcome goals most desired given healthcare willing & able to receive)
- ✓ medical, psychological, environmental, socioeconomic, & other life factors impeding these health outcome goals



Shared decision making*

- Clinician(s) shares information about options, including severity and probability of potential harms and benefits of each option
- Patients shares their preferences regarding these harms, benefits, & potential outcomes
- Through interactive process, clinician(s) & patient reach mutual decision

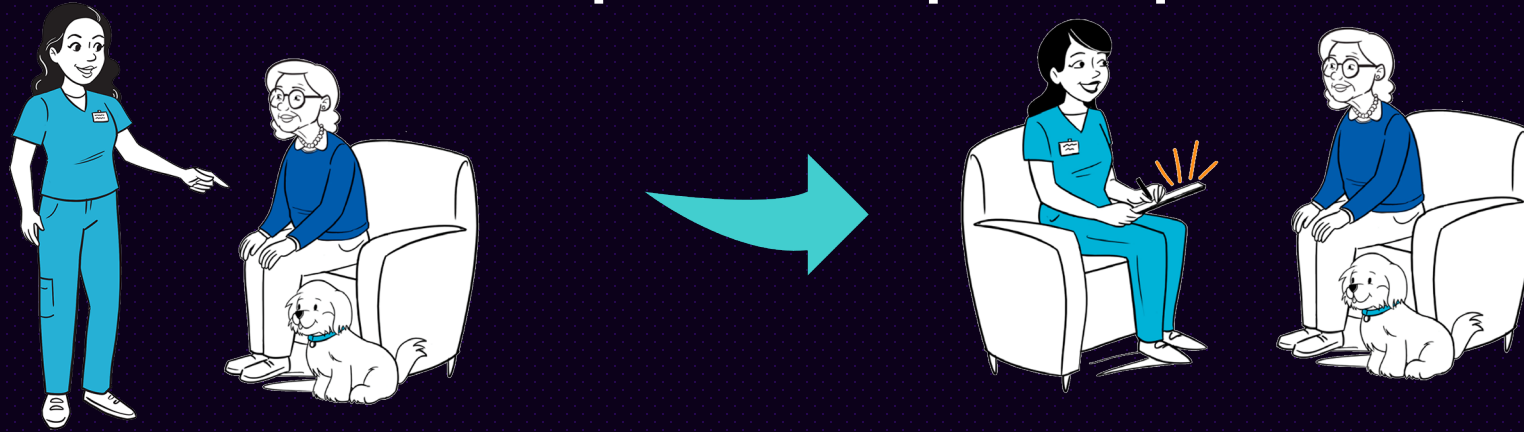


* Implies disease specific testing & treatment

Shared decision making for older adults

move...

From: siloed disease-specific **To:** patient priorities-aligned



- Patient's health outcome goals and care preferences identified
- Clinician(s), patient and care partners work together to select diagnostic / therapeutic care consistent with these outcome goals and care preferences

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Mrs. B

Health outcome goals: Babysit active 3 y.o. grandson
2-3 times week

Healthcare preferences:

Willing and able to do: Exercise, PT, tests &
imaging; most medications tolerated & helpful

Burdensome (unwanted) care: medications that
cause fatigue, cardiac devices

Most bothersome: Fatigue

One thing (Top Priority): To be less tired so that she
can babysit grandson

What does diagnostic excellence look like for Ms. B?

Start by identifying:

Conditions, treatments, life context factors
contributing to most bothersome problem
impeding goals

-e.g., sleep apnea, heart failure, depression,
medications, lack of transportation, others



What does diagnostic excellence look like for Ms. B?



Based on this information, consider:

Which current or potential interventions likely to improve bothersome problem (fatigue) & help goals? (e.g. endurance exercise, PT, antidepressant, stop or ↓beta-blocker; device that improves heart function, counseling, easier transportation options, etc.)



Shared decision making to select best options

Diagnosis & Shared Decision-making with Older Adults:

Take home message

- **Diagnostic excellence in older adults:**
 - Identify patient's health outcome goals & care preferences
 - Determine conditions, treatments, life factors impeding these goals
- **Shared decision-making for older adults**
 - Patient & care partners articulate goals desired & care willing and able to receive to achieve them
 - Health professionals (along with patient/care partners) identify & act on factors impeding these goals