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## Patient Test Requests Not Driving Health Care Costs

By Lori Solomon, Editor, *Diagnostic Testing & Emerging Technologies*

Physicians’ perceptions of the “demanding patient” may not be based in reality. According to a new study, published online Feb. 12 in *JAMA Oncology*, patients make demands for additional cancer tests and treatments in 8.7 percent of all outpatient encounters. But the treating clinicians reported that the majority of these requests are, in fact, clinically appropriate, leading the authors to conclude that demanding patients don’t account for a significant proportion of health care costs.

Previous studies have shown that physicians perceive rising health care costs to be, in part, driven by patient demands for expensive tests and treatments as a result of increasing health care consumerism created by the proliferation of information on the Internet. However, there have been few studies actually quantifying the frequency of patient demands.

From October 2013 to June 2014, clinicians (34 oncologists, 11 oncology fellows, and 15 nurse practitioners and physician assistants) practicing at outpatient oncology clinics (hematologic, gastrointestinal, breast, lung/head and neck cancers) associated with three Philadelphia-area hospitals were interviewed immediately following patient encounters. Questions evaluated the frequency, appropriateness, and physician compliance with patient requests.

Based on 5,050 patient-clinician encounters (involving 3,624 patients), patient requests were made in 8.7 percent of encounters. Of the 440 patient demands, 49.1 percent were for imaging; 15.5 percent were for palliative treatments (excluding chemotherapy or radiation); 13.6 percent were for laboratory tests (i.e., tumor markers); and 5.2 percent were for genetic or chemosensitivity analyses. The likelihood of a patient making a demand was significantly associated with having lung/head and neck cancer, receiving active treatments, and a fair- or poor-quality patient-clinician relationship. Physician compliance occurred in 98.1 percent of clinically appropriate requests.

In only 11.4 percent of encounters with demands was the patient request deemed clinically inappropriate. These clinically inappropriate requests were for imaging (36 percent), laboratory tests such as tumor markers (16 percent), and chemosensitivity assays (18 percent). Even still, clinicians complied with seven of the 50 inappropriate demands or requests.

“Physicians often identify ‘demanding patients’ as fueling high health care costs,” write the authors led by Keerthi Gogineni, M.D., from University of Pennsylvania.  
“At least in oncology, physicians’ perceptions that demanding patients induce a large quantity of clinically inappropriate tests and treatments seem inaccurate.”

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