

What can doctors do to moderate healthcare costs?

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Medical care costs can reach such levels as to marginalize some patients from scientific and technologic advances. The reasons for these elevated costs are diverse and, in most cases, it is not in the doctors' hands moderating them. In this manuscript, some actions are proposed that doctors can carry out to decrease the costs of medical care. The magnitude of the savings that can be achieved with these measures is modest, since most part of the costs do not depend on doctors, but this is about offering our contribution. Avoidance of everything that is superfluous: no more medications or studies than those that are strictly necessary, no defensive medicine, and not caving to patients and relatives' pressure for useless tests or medications to be prescribed.

- When prescribing, take into account the medication's cost, either for the patient, the healthcare institution or the insurance company, in proportion to the expected benefit. Try to obtain the highest benefit at the lowest cost.
- Do not duplicate unnecessarily: some doctors don't trust the results of certain laboratories and repeat the tests, or else have other interests, such as dichotomy, the need to give themselves time to study the case or watch the evolution.
- Choose the most simplified possible treatment schemes, but, of course, without sacrificing efficacy.
- Choose, whenever possible, interventions that have been shown to be cost-effective.
- Technologic innovation and development: search for unprecedented, less expensive alternatives.
- Try to prescribe generic interchangeable medications, in common agreement with the patient. Make sure that such medications are in effect interchangeable (GI).
- In equal circumstances, always choose the less expensive option.
- Eliminate profiles and routines unless they imply lower cost. Order or perform studies only to confirm or disregard a clinical diagnosis. Avoid unnecessary tests.
- Avoid broad screenings and rather perform directed studies and treatments.
- Avoid anticipated and unnecessarily prolonged hospitalization.
- Always bear in mind that the least expensive strategy is prevention, opportune reference and early diagnosis.
- Make collegiate decisions whenever necessary and feasible.
- Transparency: inform the patient on the costs and the reasons thereof.
- Absolutely avoid the practice of dichotomy between doctors.

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