

Appendix F

Each province has a Choosing Wisely campaign affiliated with Choosing Wisely Canada™. ¹ Collaboratively developing a conference with other professions is more labor intensive however, the enhancement in outcomes far outweighs the time and effort. Practice changing learning and discussions are possible and inevitable in this type of setting. Our evaluations demonstrate a higher level of interaction, learning, integration and better outcomes.

In Nova Scotia, the first Canadian ADS has been running since 2001. ² This service includes 13 pharmacists and one primary care oversight physician in addition to pharmacists from our Drug Evaluation Unit (DEU). Some other provinces now have Academic Detailing Services and this adaptation would be within easy reach for those provinces with ADSs. A comprehensive evaluation and review of our ADS conducted two years ago provided excellent feedback from physician and group participants indicating a high level of practice change due to the respect and trust physicians place in this service. Documented practice changes resulting from this service at the time of the review included a reduction of opioid use for chronic non-cancer pain³ and, modified thresholds for hypertension on adults over 65 years of age.⁴

Choosing Wisely Canada™ is a national campaign with provincial campaigns in each Canadian province. Access to the data sets and lists as well as many resources is readily available, and utilization is encouraged. Collaboration between the provincial CWC campaigns and ADS services, where they exist, would serve to advance the development of a conference emulating ours.

This conference allows a large number of providers to access ADS at once and benefit from this intensive and proven approach to education.^{5,6} The small group format and cultural immersion could also be replicated based on local and provincial variation. The Dalhousie Office of CPDME would be pleased to provide an overview of the format and plans from our conferences to support other units in achieving success with similar conferences in their area.

1- <https://choosingwiselycanada.org/campaigns/>. Accessed January 31, 2020.

2- Academic detailing service. Faculty of Medicine: continuing professional development and medical education. Dalhousie University. <https://medicine.dal.ca/departments/core-units/cpd/programs/academic-detailing-service.html>. Accessed February 2020.

3- Allen, Michael JM, et al. "Self-reported practices in opioid management of chronic noncancer pain: a survey of Canadian family physicians." *Pain Research and Management* 18.4 (2013): 177-184.

4- Allen, Michael, Kim Kelly, and Isobel Fleming. "Hypertension in elderly patients: recommended systolic targets are not evidence based." *Canadian family physician* 59.1 (2013): 19-21.

5- Fischer, Michael A., and Jerry Avorn. "Academic detailing can play a key role in assessing and implementing comparative effectiveness research findings." *Health Affairs* 31.10 (2012): 2206-2212.

6- Chhina, Harpreet K., et al. "Effectiveness of academic detailing to optimize medication prescribing behaviour of family physicians." *Journal of Pharmacy & Pharmaceutical Sciences* 16.4 (2013): 511-529.