

Use of Anti-Nuclear Antibody Testing by Family Physicians in NL

Choosing Wisely Canada Recommendation

Don't order ANA as a screening test in patients without specific signs or symptoms of systemic lupus erythematosus (SLE) or another connective tissue disease.

Practice Points

1. The number of ANA tests ordered in NL relative to the incidence of connective tissue disease is very high. 57% of tests were ordered by Family Physicians (FPs).
2. ANA is not indicated unless a connective tissue disease is a significant possibility.
3. ANA > 1:80 is required to consider the presence of SLE. False positive results are quite common and a reason that ANA testing be only undertaken in people in whom a connective tissue disease is a strong possibility.
4. ANA is not indicated as a screening test to evaluate fatigue, back pain, and other musculoskeletal pain in the absence of other clinical manifestations to suggest connective tissue disease, nor is it indicated to confirm a diagnosis of rheumatoid arthritis or osteoarthritis.
5. ANA testing need only be ordered once.
6. ANA costs \$24 a test.

Methods

1. ANA and anti-ds DNA tests ordered in NL from 1 Apr 2016 – 31 Mar 2018 (2 years) and undertaken at the Health Sciences Centre laboratory were analysed by FP, ordering specialty, age, and sex.
2. Billing information was available for 474 FPs in 2017.

Results

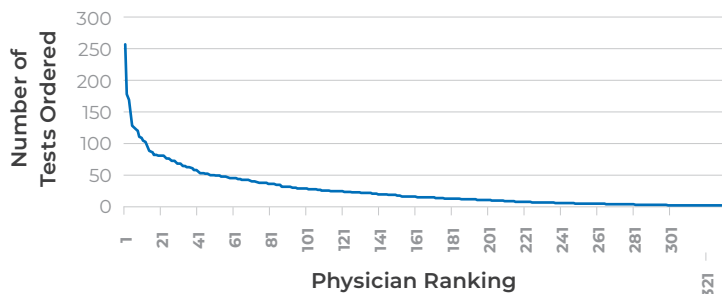


Fig. 1. Frequency of ANA Test Ordering Ranked by FP in 2 Years (N=9,120)

- 50 FPs ordered ≥50 ANA tests per year.

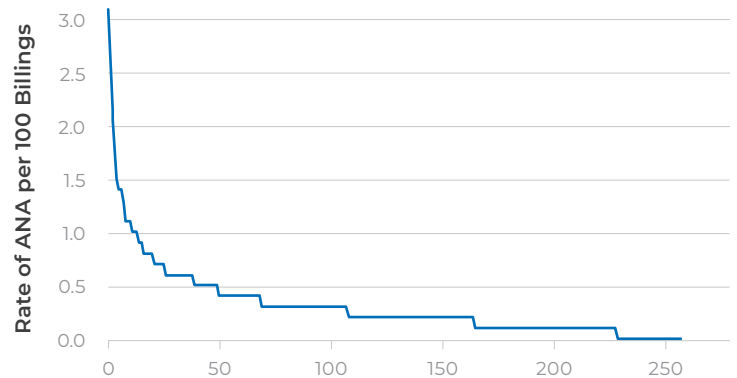


Fig. 2. Rate of ANA Testing/100 Billings Ranked by FPs' Rate of ANA Testing in 2017

- When analyzed by rate of ANA tests/100 billings the distribution was similar to that when analyzed by volume. A small minority of FPs have high rates of testing.

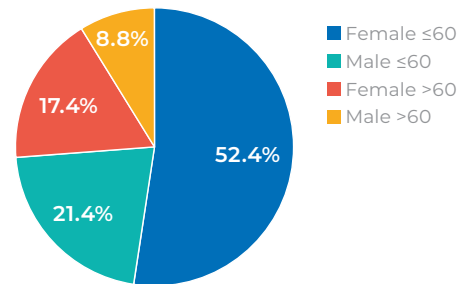


Fig. 3. Volume of ANA Tests Ordered by FPs by Age and Sex (N=9,120) (1 Apr 2016–31 Mar 2018)

- 48% of ANA tests are in low risk groups for a connective tissue disease: males and females ≥60 years.

Conclusions

1. Nearly half of ANA tests ordered by FPs are in patients at low risk for connective tissue disease.
2. About 50 FPs in NL have high volume/rate of ANA testing.
3. ANA testing should not be undertaken in patients without clinical manifestations suggestive of connective tissue disease.