



Three common health care treatments you may not need

A middle-aged IBM executive from the New York City area experienced chest pain and went to a cardiologist, who ordered a full workup, including a CT scan of his chest.

According to the story in Consumer Reports, nothing was found, but a radiologist saw “something funny” in the neck area. A biopsy was performed, followed by an angiogram. The second procedure resulted in complications and a brief stay in the hospital. When it was over, he had amassed more than \$150,000 in bills.

Eventually, the pain disappeared on its own. Months later, a physician determined he had a strained chest muscle, which required no treatment other than over-the-counter medicine.

People across the United States are over-relying on medical tests they don’t need. This unnecessary care can lead to harmful side effects and can cost thousands of dollars.

While saving money should never be a reason to avoid needed tests and procedures, you should know when a test or screening is appropriate and when a second opinion may be in order.

U.S. medical specialty societies, working with Consumer Reports and the ABIM Foundation, created a list of tests and treatments they say are performed too often and not always necessary. The effort, called *Choosing Wisely*[®], is part of a national initiative led by the ABIM Foundation and Consumer Reports to help patients and physicians have conversations about what care they truly need.

Here are three treatments from that list:

EKGs and exercise stress tests

If you have sudden chest pain, an electrocardiogram (EKG) or exercise stress test can be lifesaving. If you have a history of heart disease or are at very high risk for it, these tests are also very important.

But if you don’t, you should think twice.

Even though the tests are less accurate for lower-risk people and sometimes have misleading results, low-risk patients often get this test as part of their routine checkup.

The inaccurate results can trigger more and more tests, which can expose you to radiation over time. It can also be a waste of money. According to HealthcareBlueBook.com, an EKG typically costs about \$50 and an exercise stress test about \$200 to \$300.

Imaging tests for headaches

Many people who experience severe headaches want a CT scan or MRI to see if they’re caused by a brain tumor or other serious problem. But most of the time, neither test is necessary.

Generally, your doctor only needs a careful medical history and a neurological exam, which typically tests such things as your reflexes, to diagnose migraines, tension-type headaches and other common headaches.

Adding a CT scan or MRI rarely shows why a headache occurs or helps you manage its symptoms. And they are unlikely to reveal a more serious underlying problem.



One possible risk is that they will show something that appears to be worrisome but actually isn't. For example, in some cases, doctors might mistake a more prominent area of a person's brain for a tumor, or a twist in a blood vessel for a brain aneurysm. Those findings can lead to more and more unnecessary tests.

Treating sinusitis with antibiotics

Millions of people are prescribed antibiotics each year for sinusitis, a frequent complication of the common cold, hay fever, and other respiratory allergies. Unfortunately, most of those people probably don't need the drugs.

Sinus infections almost always stem from a viral infection, not a bacterial one—and antibiotics don't work against viruses. Even when bacteria are responsible, the infections usually clear up on their own in a week or so. And antibiotics don't help ease allergies, either.

About one in four people who take antibiotics have side effects, including stomach problems, dizziness, or rashes. Overuse of antibiotics also encourages the growth of bacteria that can't be controlled easily with drugs. That makes you more vulnerable to antibiotic-resistant infections.

Antibiotics are usually required only when symptoms last longer than a week, start to improve but then worsen again, or are very severe.

For more examples, read Consumer Reports' ["When to say "Whoa!" to doctors."](#)

This article is part of a toolkit that supports the Choosing Wisely® campaign, an initiative of the ABIM Foundation in partnership with Consumer Reports to help patients and physicians have conversations about health. The articles, tip sheets and links in the series will provide helpful information on everything from coping with serious illness, to preventive care, to the do's and don'ts of common tests. For more information, see [the rest of the series](#) and all the [Choosing Wisely resources from Consumer Reports](#).