POEMs describe interventions that are not superior to other options, are sometimes more expensive, or place patients at increased risk of harm. To maintain a focus on research studies, POEMs about guidelines, such as those produced by the U.S. Preventive Services Task Force, were excluded. We also excluded 12 of the most relevant POEMs of 2015 that were discussed in a previ ous article. demonstrate that epidural injections are superior to gabapentin. Given the similari ties between pregabalin and gabapentin, one wonders if both drugs reduce the neuro pathic pain of spinal stenosis via a placebo effect. Until we have more data on the best conservative therapies for spinal stenosis, the most reasonable option may be a trial of gabapentin, physical therapy, or both before requesting an epidural injectiofh.

#### KNEE DEGENERATIVE JOINT DISEASE

In symptomatic patients with knee degen erative joint disease, those who received platelet-richplasma injections were no better off in terms of symptoms and function score compared with those who received hyal uronic acid.<sup>6</sup> Although the study concluded that both treatments are effective, previous studies question the bene t of hyaluronic acid injections.<sup>8</sup> Another study found that injections of methylprednisolone cannot be routinely recommended to enhance patients' ability to participate in exercise therapy.

#### Cardiovascular Disease

Table 2summarizes clinical actions to consider for the treatment of cardiovascular disease, including betablocker therapy, dual antiplatelet therapy, and screen ing for coronary artery disease in patients with diabetes mellitus.<sup>19-22</sup>

#### BETA BLOCKERS AFTER MYOCARDIAL INFARCTION

Although recommended by guidelines and used as a quality indicator of hospital care, the use of beta blockers after myocardial infarction, when combined with epti mal contemporary acute and chronic treatment, does not provide a further survival bene t. In a meta-analysis the early use of beta blockers reduced subsequent rein farction and angina symptoms, but these bene ts began to wane within 30 day8. Thus, in the era of statins, anti platelet agents, and stents, beta blockers do not appear to confer a bene t beyond 30 days.

DUAL ANTIPLATELET THERAPY AFTER DRUG-ELUTING STENTS

Among patients treated witbrug-eluting stents who

studies reported associations between bridging therapy and an increased risk of bleeding and cardiovascular events. Moreover, withholding bridging therapy is not associated with an increased risk of recurrent venous thromboembolism, suggesting that bridging anticoagu lation should not be routinely recommended for patients with venous thromboembolism, especially those at low risk of recurrence<sup>8</sup>. low vitamin D levels will make it easier to avoid ineffec tive supplementation.

EDITOR'S NOTITIHIS article was cowritten by Dr. Mark Ebell, Deputy Editor for AFP and cofounder and Editor-in-Chief of Essential Evidence Plus, published by Wiley-Blackwell, Inc. Because of Dr. Ebell's dual roles and ties to Essential Evidence Plus, the article underwent peer review and editing by four offFP's medical editors. Dr. Ebell was not involved in the editorial decision-making process.—Jay Siwek, MDAteditican, Family Physician

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## eTable A. Additional Top POEMs from 2015 Consistent with the Principles of the Choosing Wisely Campaign

Clinical question	Bottom-line answer	Clinical actions to consider for Choosing Wisely
Does early imaging of older adults with back pain improve outcomes? <sup>1</sup>	Among adults 65 years or older who present to primary care clinicians for a new episode of back pain, imaging before six weeks resulted in no improved outcomes at one year, but increased overall health care costs by almost 30%.	In older patients with new onset back pain, do not routinely order early imaging.
Is acetaminophen effective for the treatment of low back pain or osteoarthritis? <sup>12</sup>	Although acetaminophen was hoped to be a safer alternative to nonsteroidal anti-in ammatory drugs and opioids for the treatment of common musculoskeletal problems, on average it provides only minimal pain relief and improvement in function for patients with low back pain or osteoarthritis. Some persons may bene t with full dosages, but most will not.	In patients with low back, hip, or knee osteoarthritis pain, do not routinely tell patients to expect a clinically important effect on pain and disability from acetaminophen.

What is the optimal

medication regimen for

treating adults with acut8(h)-9(e)-7(n e)-7(f)-29(fi)-7(n f)6(o)-10(r )]TJ EMC -4(p)16(,0(r )]TTib-10d t)3(o b)-1P91mnm1(l)-14ap,0(r wKS )]TJ F9 . 482.3 (en-US)

# eTable A. Additional Top POEMs from 2015 Consistent with the Principles of the Choosing Wisely Campaign (continued)

Clinical question	Bottom-line answer	Clinical actions to consider for Choosing Wisely
Does exercise training, vitamin D, or the combination of both decrease the number of falls in older women? <sup>49</sup>	Group exercise sessions twice a week for the rst year and once a week for the second year did not decrease the number of falls among older women, but they halved the likelihood of a fall resulting in an injury. Vitamin D was ineffective.	In typical community-dwelling women younger than 75 years, do not routinely prescribe vitamin D to prevent falls.
Are men who are invited to receive systematic prostate cancer screening better off than men who receive routine care?		