

Reducing low-value care & promoting sustainable healthcare

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Unil.



A healthcare worker, likely a nurse or doctor, is shown from the chest up. They are wearing a white lab coat, blue nitrile gloves, and a white surgical mask. They have long dark hair and are wearing glasses. They are holding a syringe with a blue plunger and a needle, pointing it towards the camera. The background is a plain, light gray wall.

What is low value care ?

OVERUSE

OVERTREATMENT

OVERDIAGNOSIS

INAPPROPRIATE CARE

UNNECESSARY CARE

LOW VALUE CARE

MISUSE

WASTE

HARM

LITTLE BENEFIT

NO BENEFIT

RESOURCE USE

QUALITY OF CARE

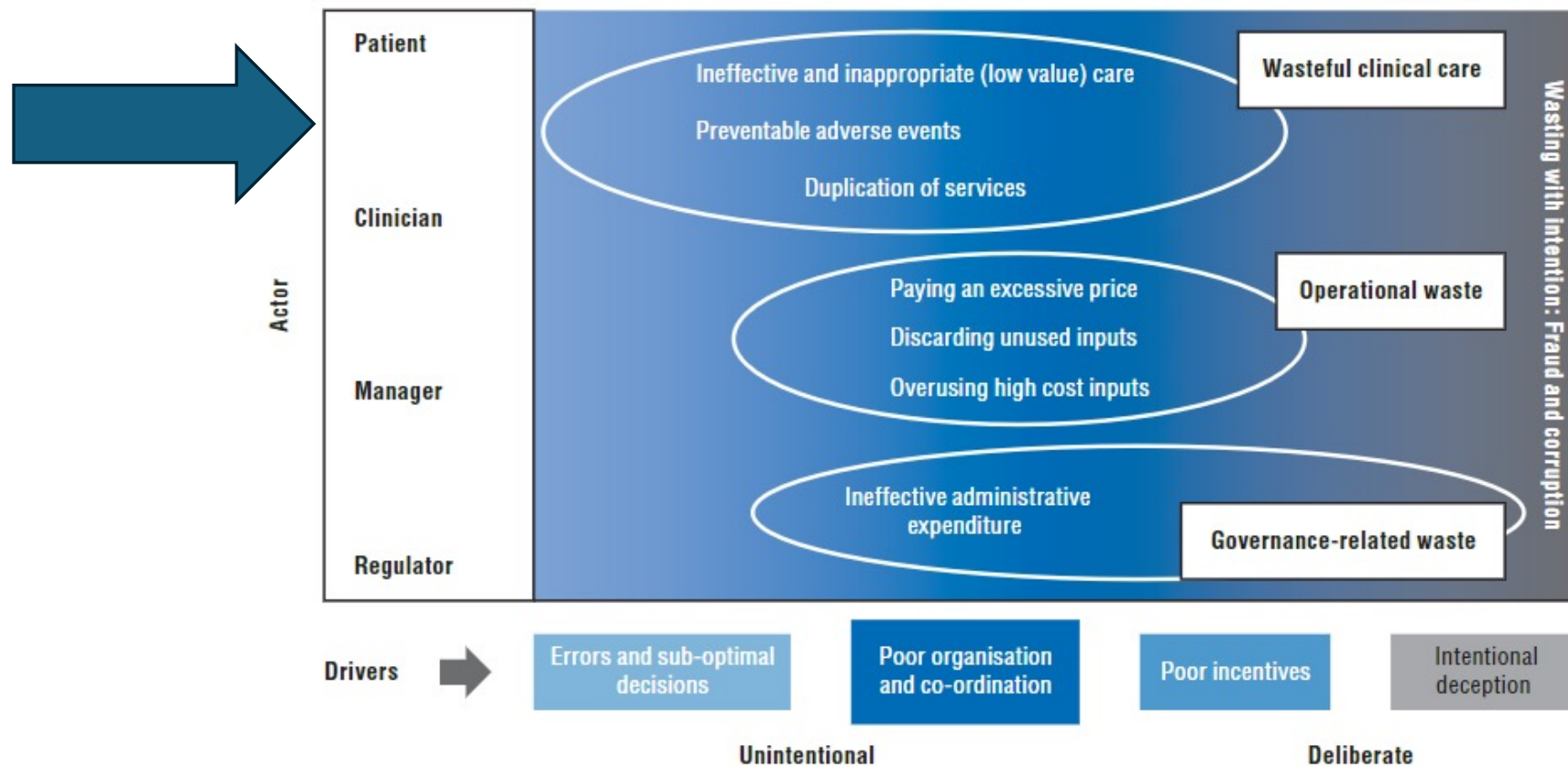
VALUE-BASED CARE

EFFICIENCY

APPROPRIATENESS

SAFETY

Low value Care, OECD definition (2017)



Low Value Care, Swiss definition

**MOINS,
C'EST PARFOIS
PLUS.**

Contre les traitements
médicaux excessifs ou
inappropriés.



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Tests, treatments, or procedures that provide little or no patient benefit, may cause harm, and waste healthcare resources.

Using «Do not do » recommendations

www.smartermedicine.ch

**WENIGER
IST MANCHMAL
MEHR.**

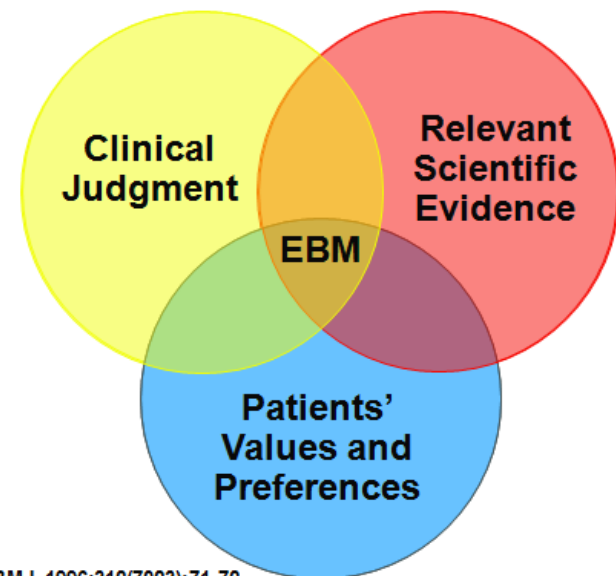
Gegen Über- und
Fehlbehandlungen
in der Medizin.



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Choosing Wisely Switzerland



Evidence-Based Medicine



Sackett DL, et al. BMJ. 1996;312(7023):71-72.

Low Value care, European **new** definition (2025)

“From a health system perspective, low-value care encompasses overuse, misuse and underuse of healthcare services (for example, prevention, diagnostics, treatment, medication). Overuse and/or misuse comprise the delivery of harmful, ineffective, inappropriate, or not cost-effective healthcare services. Underuse refers to healthcare services not provided or used despite being necessary. Low-value care can lead to negative consequences for patients, their caregivers, the healthcare workforce, the health system as a whole and the wider environment.”

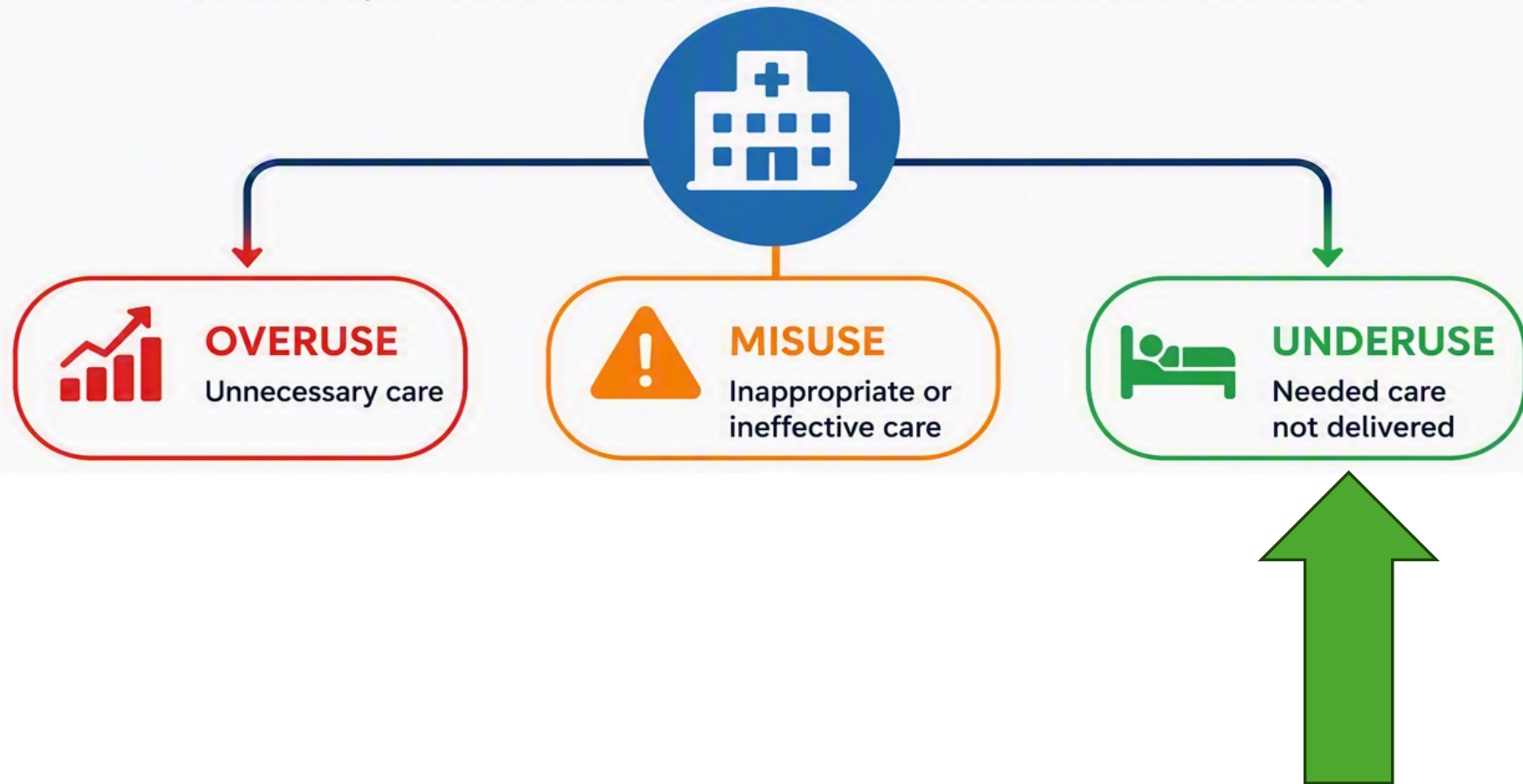
IDENTIFYING, MEASURING AND REDUCING LOW-VALUE CARE IN THE CONTEXT OF HEALTH SYSTEM PERFORMANCE ASSESSMENT

Report by the Expert Group on Health Systems Performance Assessment, European commission 2025

https://health.ec.europa.eu/publications/identifying-measuring-and-reducing-low-value-care-context-health-system-performance-assessment_en

LOW-VALUE CARE

Overuse, Misuse and Underuse of Healthcare Services



LOW-VALUE CARE

Overuse, Misuse and Underuse of Healthcare Services



Examples

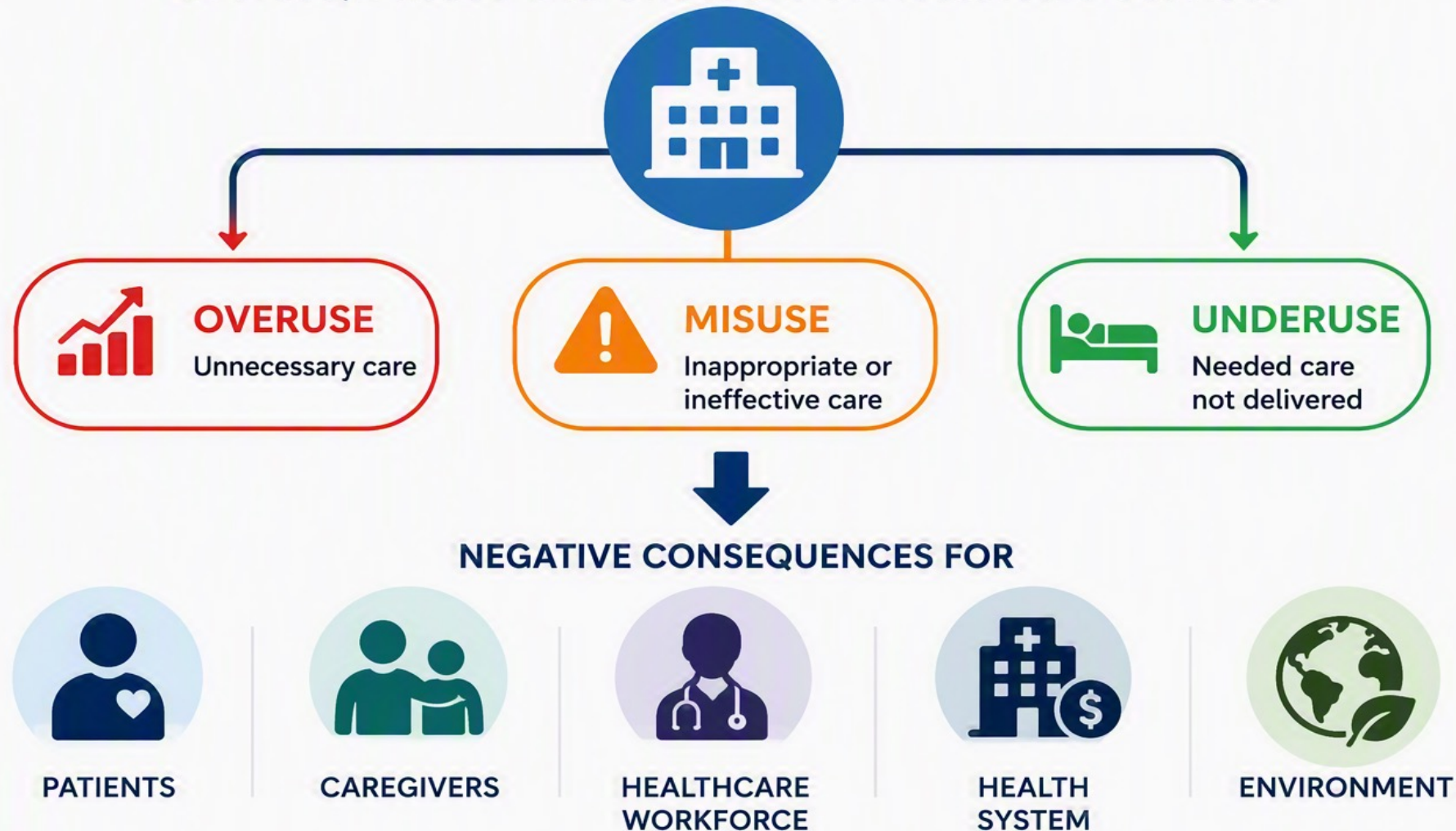
Overuse of sleeping pills

Misuse of antibiotics

No promotion of
physical activity

LOW-VALUE CARE

Overuse, Misuse and Underuse of Healthcare Services



A young girl with dark hair and bangs is wearing a white lab coat. She is looking directly at the camera with a serious, determined expression. Her right arm is raised, and her fist is clenched, pointing towards the viewer. Her left hand is also visible, with the fingers slightly curled. The background is softly blurred, showing warm, golden light from a window on the left, suggesting an indoor setting like a hospital or laboratory.

**How to identify and tackle
low value care in Swiss hospitals?**

LUCID: A 5 Million CHF Funded Initiative



Primary Goal : to study quality of care in Swiss medical hospitalized patients

Key focus : to identify & monitor Low Value Care practices

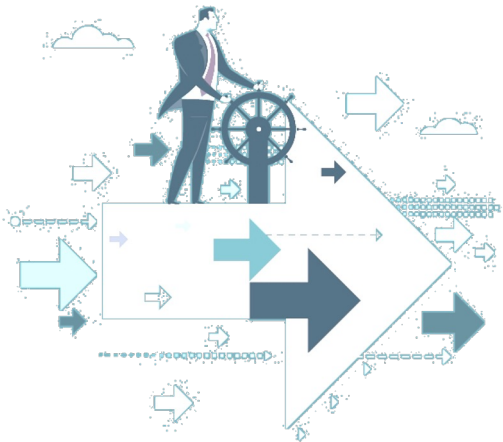
LUCID: A 5 Million CHF Funded Initiative

➡ **Primary Goal : to study quality of care in Swiss medical hospitalized patients**

Key focus : to identify & monitor Low Value Care practices

Why ?

- Low Value Care represents up to 20% of healthcare costs
- **No systematic monitoring of Low Value Care in Swiss Hospitals**



LUCID: A 5 Million CHF Funded Initiative

➡ **Primary Goal : to study quality of care in Swiss medical hospitalized patients**

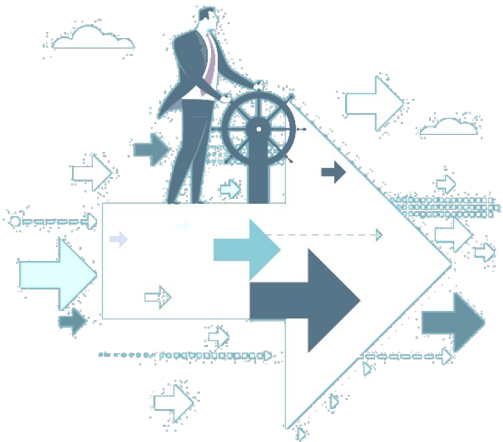
Key focus : to identify & monitor Low Value Care practices

Why ?

- Low Value Care represents up to 20% of healthcare costs
- **No systematic monitoring of the processes of care in Swiss Hospitals**

How ?

- **Build Low Value Care indicators, based on the *Smarter medicine Initiative***
- **Promote data-driven benchmarking and targeted quality improvement actions**



LUCID National Registry

A Cohort of Medical Hospitalized Patients

(who represent the largest part of hospitalizations)



INCLUSION CRITERIA

Consenting ≥ 18 year old
Hospitalized in Geneva,
Lausanne, Bern, Zürich, Basel
After 01.01.2014
(i.e. start of general consent
for data reuse)



EXCLUSION CRITERIA

Hospitalization in non-
medical wards
(i.e., psychiatry,
gynecology/obstetric,
pediatrics, surgical wards)



LARGE DATASET

Routinely collected data
(Diagnosis, Laboratory Test,
Treatment, Administrative
Data)

BMJ Open Monitoring low-value care in medical patients from Swiss university hospitals using a Findable, Accessible, Interoperable, Reusable (FAIR) national data stream and patient and public involvement: LUCID study protocol

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ABSTRACT

Introduction Healthcare practices providing minimal or no benefit to recipients have been estimated to represent 20% of healthcare costs. However, defining, measuring and monitoring low-value care (LVC) and its downstream consequences remain a major challenge. The purpose of the National Data Stream (LUCID NDS) is to identify and monitor LVC in medical inpatients using routinely collected hospital data.

Methods and analysis This protocol describes a multistep approach to the identification and surveillance of LVC: (1) creating an NDS based on Findable, Accessible, Interoperable, Reusable (FAIR) principles using routinely collected hospital data from medical inpatients who signed a general consent for data reuse from 2014 onwards; (2) selecting recommendations applicable to medical inpatients using data from LUCID NDS to develop a comprehensive and robust set of LVC indicators; (3) establishing expert consensus on the most relevant and actionable recommendations to prevent LVC; (4) applying the Strength of Recommendation Taxonomy methodology to assess the level of evidence of recommendations; (5) involving patients and the public at various stages of LUCID NDS; and (6)

STRENGTHS AND LIMITATIONS OF THIS STUDY

- ⇒ Low-value care (LVC) in medical hospitalised patients, a National Data Stream (LUCID NDS) will facilitate nationwide collaborative research on LVC using Findable, Accessible, Interoperable, Reusable (FAIR) principles.
- ⇒ LUCID NDS will consist of existing clinical data from medical hospitalised patients in five Swiss university hospitals that have signed a general consent for data reuse from 2014 onwards.
- ⇒ We describe a multistep approach to identify, select and assess the evidence of LVC recommendations that could be derived from data of LUCID NDS.
- ⇒ Establishing expert consensus on the most relevant and actionable recommendations to prevent LVC in hospital will allow recommendations to be prioritised and monitored.
- ⇒ Patient and public involvement is one of the highest priorities of LUCID NDS and it is an innovative strategy to tackle LVC.



Guffi T, ... , Méan M, BMJ Open 2024

**>150'000
patients**

LUCID National Registry on Quality of Care : **a Gold Mine** to identify Low Value Care

Low-Value Care in Swiss Hospitals

- Sleeping pills in older patients
- Blood transfusion practices
- Inappropriate acute blood pressure treatment
- Overuse of antibiotics in older patients without infection

Patient-Centered Outcomes

- Night awakenings during hospital stays
- Frequency of lab tests
- Sex differences in low value care provision

Healthcare System Performance

- Benchmarking of low-value care across Swiss University hospitals



LUCID National Registry on Quality of Care : A call for Low Value Care monitoring



5.5. Weiterentwicklung des Projekts «LUCID»

Das Projekt «LUCID» (*low value care in medical hospitalized patients*) verfolgt das Ziel, die Qualität der Versorgung in den Universitätsspitälern zu verbessern, indem Behandlungen mit geringem Mehrwert identifiziert werden. Ziel ist es, ein echtes Monitoring aufzubauen, wie es im Nationalen Qualitätsbericht empfohlen wird. Der Runde Tisch unterstützt dieses Projekt und setzt sich dafür ein, dass dieses in ein nationales Dashboard ausgedehnt wird, welches auch Arztpraxen umfassen soll.



5.5. Développement du projet « LUCID »

Le projet « LUCID » (*low value care in medical hospitalized patients*) vise à améliorer la qualité des soins dans les hôpitaux universitaires en identifiant les traitements à faible valeur ajoutée. L'objectif est de mettre en place un véritable monitoring, comme le recommande le rapport national sur la qualité. La table ronde soutient ce projet et s'engage à ce qu'il devienne un tableau de bord national qui devra aussi inclure les cabinets médicaux.

A photograph of a surgical team in an operating room. Several surgeons in blue scrubs and masks are visible. In the foreground, a surgeon's gloved hand holds a tablet computer. The background is slightly blurred, showing the surgical environment with bright lights and medical equipment.

**Towards smarter resource use in
medical hospitalized patients**

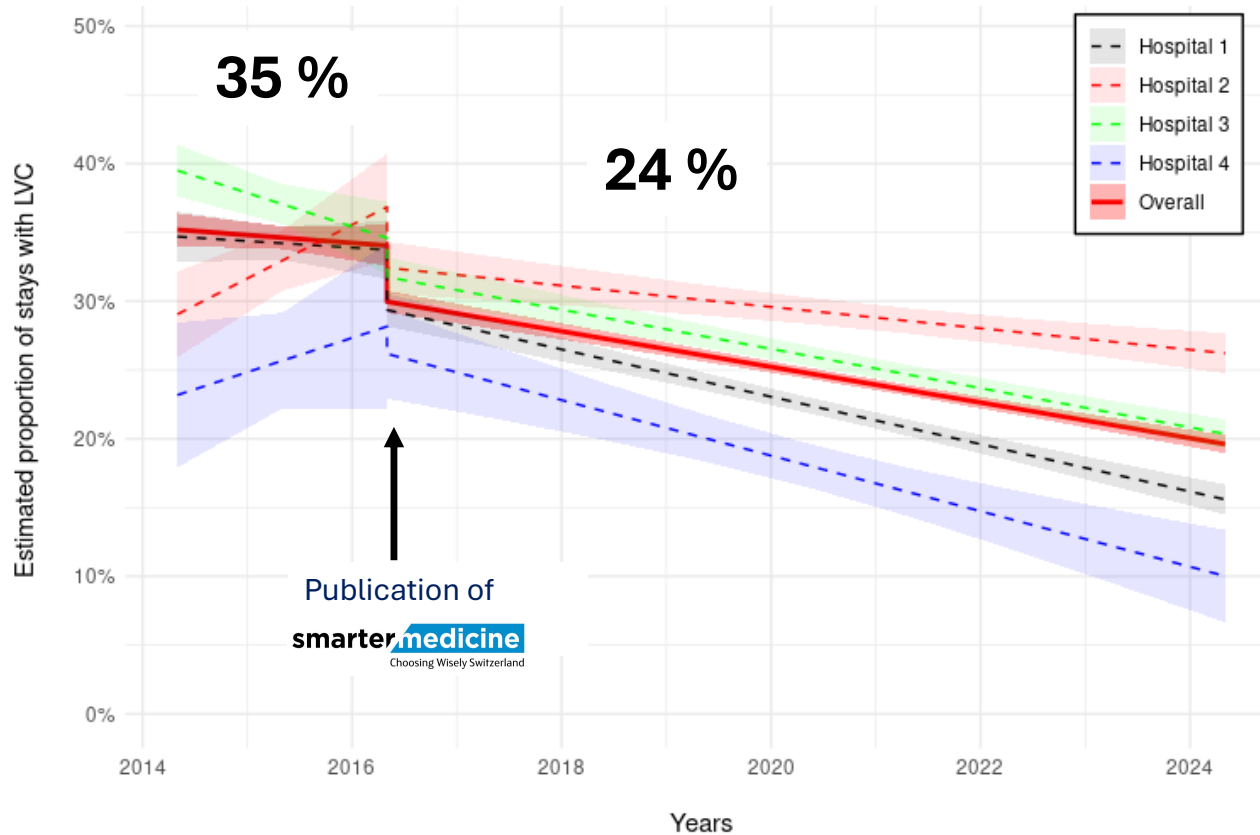
Initiatives to identify & reduce Low value Care

- Do not prescribe sleeping pills for acute insomnia in older **hospitalized** patients



Proportion of stays with inappropriate prescribing of sleeping pills (age > 65 yo)

Estimated proportion of stays with inappropriate prescribing, for each year & hospital (N= 76'472 stays)



Reducing Low Value Care: challenges and pitfalls of LUCID Registry



Low-Value Care in Swiss Hospitals

- From identification to implementation of implementation of practice change
- A learning health system and culture is needed

Patient and workforce Centered Outcomes

- Patient as well as workforce partnership is needed to include all perspectives

Healthcare System Performance and sustainability

- Long-term sustainability of a national registry to identify and monitor Low Value Care:
 - Who is in charge ?
 - Who pays for it ?
 - Who sets the Low Value Care indicators ?
 - How to use these indicators ?



Learn more about LUCID
Scan the QR code or visit
www.lucid-nds.ch



