

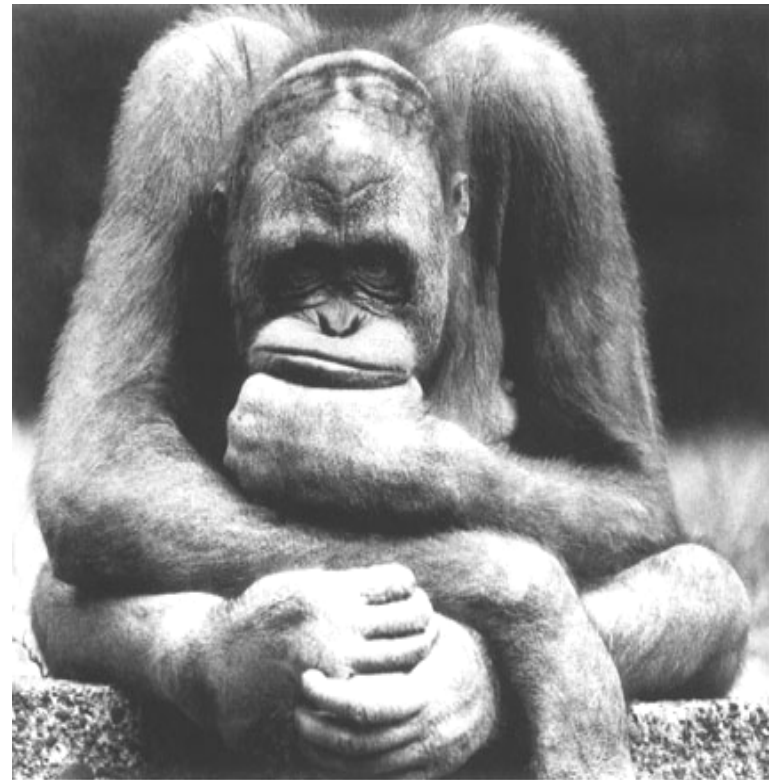
# **Is there a role for clinical guidelines as an educational tool?**

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Mexico DF**

**WOLFE. AAO. New Orleans  
2007**

**Is there a role for clinical guidelines as  
an educational tool  
for practitioners and residents?**

**Yessss.iiii**



The screenshot displays the website of the American Academy of Ophthalmology. The header includes the logo and name, a search bar, and navigation links for 'About', 'Newsroom', and 'Contact Us'. A main navigation bar contains 'Home', 'Meetings', 'Clinical Education', 'Practice Management', 'Publications', 'Member Services', and 'Advocacy'. Below this, a secondary navigation bar lists 'Guidelines and Assessments', 'Clinical Statements', 'Medical Information Technology', 'Educational Products', and 'News and Information'. The main content area is titled 'Guidelines and Assessments' and features a sidebar with links to 'Preferred Practice Patterns', 'Compendium', 'Ophthalmic Technology', 'Complementary Therapy', and 'Summary Benchmarks'. The main text area is titled 'Overview of Guidelines and Assessments' and contains a section for 'Preferred Practice Patterns (PPPs)' with a descriptive paragraph. A 'Compendium' link is also visible. On the right side, there are partial views of 'My Profile' and 'Page T' sections.

- **Are they important ?**
- **Where are the problems for their adoption?**
- **How to disseminate the guidelines?**

# The importance of clinical guidelines.

- ❁ **Impossibility to keep up with medical literature (19 art.x 365 days)**

- ❁ **There is an unexplained variability in medical practice**

- ❁ **Medicine is everyday more expensive.**

- ❁ **Provide cost effective treatments**

**Medicine has a long history of different kinds of guidelines.**

- **These are the best guidelines we ever had.**



- **Evidence based**

- **Consensus of experts**

# Where are the problems?.

- There are no guidelines for everything
- Guidelines cover 60% to 95% of the relevant cases\*
- Clinical judgment must be used to decide when a guideline must be used

\* Eddy DM Designing a practice policy: Standards, Guidelines and options. JAMA 1990

Comprehensive Ophthalmology	Pediatric Ophthalmology/Strabismus
<ul style="list-style-type: none"><li>• Comprehensive Adult Medical Eye Evaluation 2005</li></ul>	<ul style="list-style-type: none"><li>• Amblyopia 2002</li><li>• Esotropia and Exotropia_2002 </li><li>• Pediatric Eye Evaluations 2002</li></ul>
Cataract/Anterior Segment	Refractive Management/Intervention
<ul style="list-style-type: none"><li>• Cataract in the Adult Eye 2006</li></ul>	<ul style="list-style-type: none"><li>• Refractive Errors_2002 </li><li>• Vision Rehabilitation for Adults 2001 </li></ul>
Cornea/External Disease	Retina/Vitreous
<ul style="list-style-type: none"><li>• Bacterial Keratitis 2005</li><li>• Blepharitis 2003</li><li>• Conjunctivitis 2003</li><li>• Dry Eye Syndrome 2003</li></ul>	<ul style="list-style-type: none"><li>• Age Related Macular Degeneration 2006</li></ul>

# Where are the problems?.

- We all have to be educated in how to evaluate Guidelines and evidence based medicine
- Residents must be trained in using the new tools
- Education based in clinical guidelines vs. preceptor model.

( No evidence of a better educational model ) \*\*

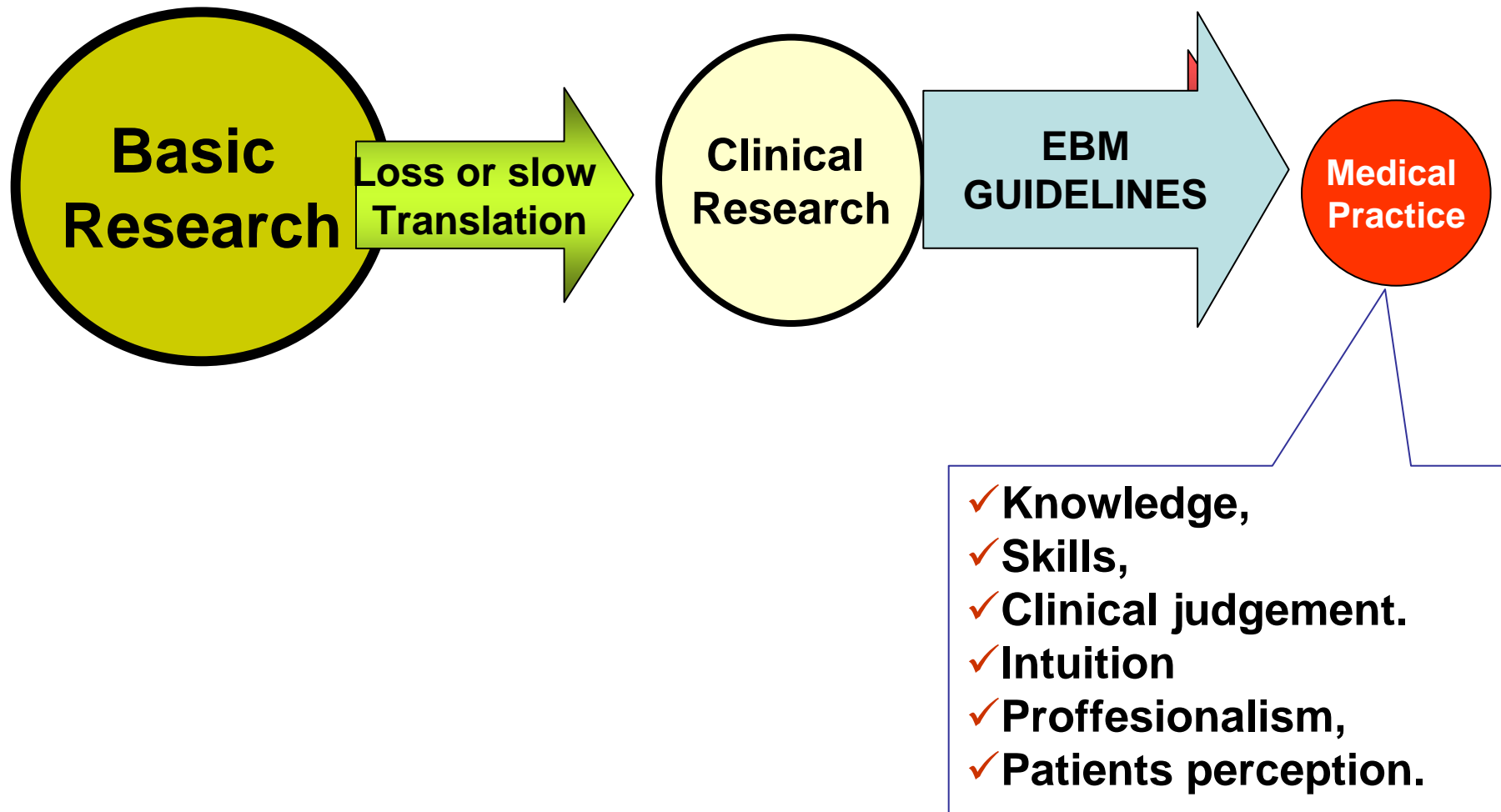
\*\* Berg et al, Clinical Guidelines in practice and education. JGIM 1997

\*



The screenshot shows a slide with a blue header containing the word 'icine'. The main content is titled 'Evidence Based Medicine' and includes a definition: 'Evidence-based medicine is the conscientious use of current best evidence in making decisions about the care of individual patients. The practice of evidence-based medicine integrates individual clinical expertise with the best available external clinical evidence from systematic research. Some aids for research include:'. Below this are four blue hyperlinks: 'Agency for Healthcare Research and Quality', 'Bandolier', 'Centre for Evidence-Based Medicine', and 'The Cochrane Collaboration - an international organization that aims to help people make well-informed decisions about health care by preparing, maintaining and ensuring the accessibility of systematic reviews of the effects of health care interventions'. At the bottom, it says 'Cochrane Eyes and Vision Group (CEVG)'.

# The importance of clinical guidelines. How do we improve medical care ?



# The slow translation

## Scientific evidence

- 1981 (JAMA ) published the results of beta blockers in heart attack trial.
- Late in 1980s The role of aspirin as a cardiovascular protective drug.
- Rapid treatment with percutaneous transluminal coronary angioplasty or fibrinolysis in acute heart attack. Guideline in 1996 and 1999.

## Translation loss from clinical evidence to practice

- Yet in 1996 only 62.5% of patients were receiving treatment.
- Yet, in 2000 one third patients with coronary artery disease were not receiving treatment.
- Yet in 2002, only one third of eligible for reperfusion received neither of these therapies.

# Where are the problems for their widespread use?

*In Health Care , invention is hard but dissemination is even harder ( Jama 2003. Donald Berwick)*

## *The science of dissemination.*



**The perception of something different**

- Is it complex ?
- Can I make it simple ?



**The individuals who may adopt the change**

**How Is it going to help me in my practice?**

**Where is the benefit for the patient?**

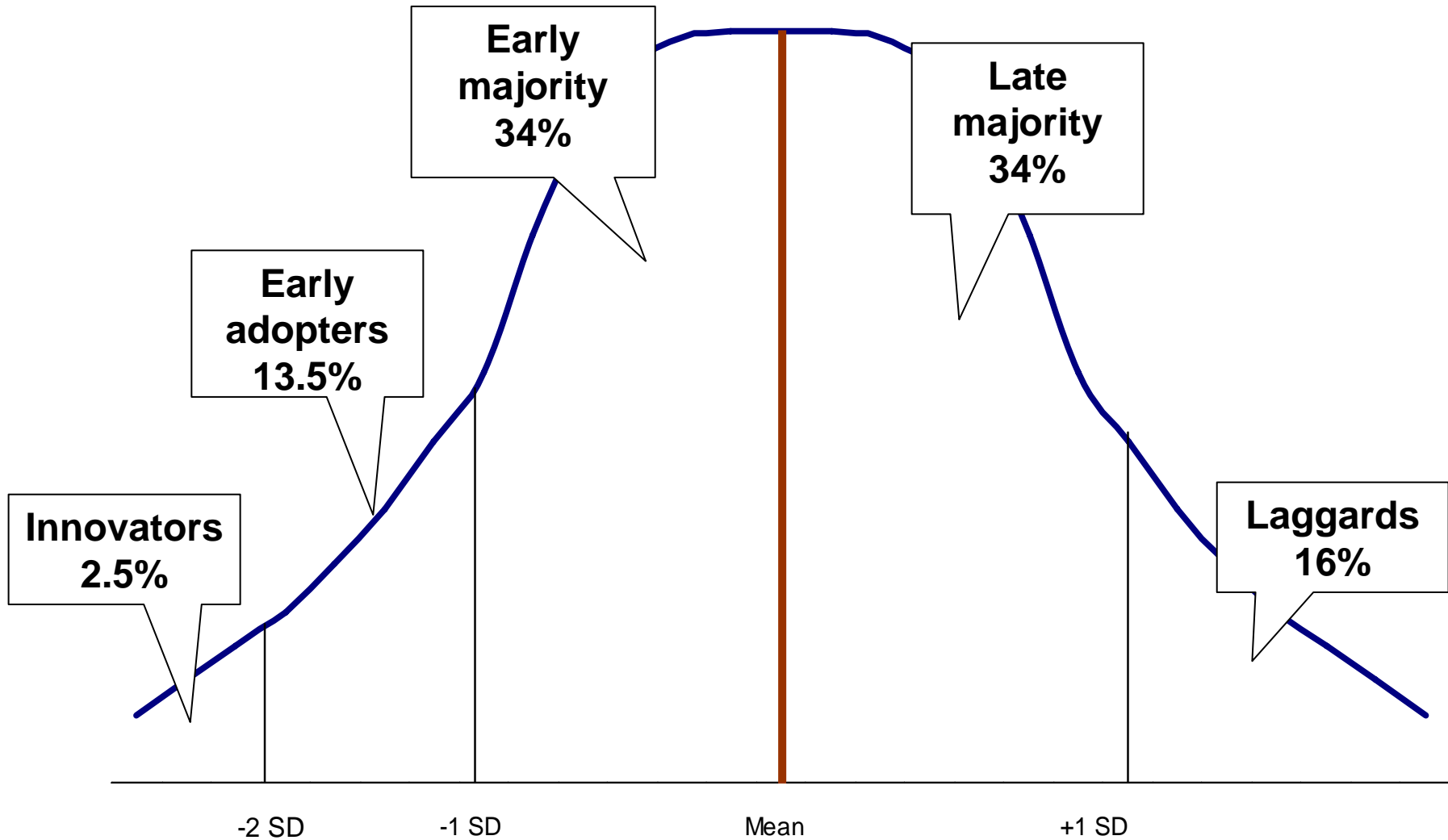


**Contextual factors.**

**Is there support from the medical organization?  
( Hospital , associations)**

# Adopter categorization for innovativeness.

*From Rogers . Diffusion of innovations*

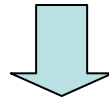


# How to disseminate the guidelines in education and practitioners?

*Adapted from Disseminating innovation in Health Care. JAMA april 2003*

## **Find early adopters.**

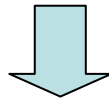
**Encourage them to try new guidelines, reduce uncertainty .  
( Leaders, Program Directors, respected practicing physicians)**



## **Make early adopters activity observable.**

**The early majority will follow them.**

**(Congresses, courses )**

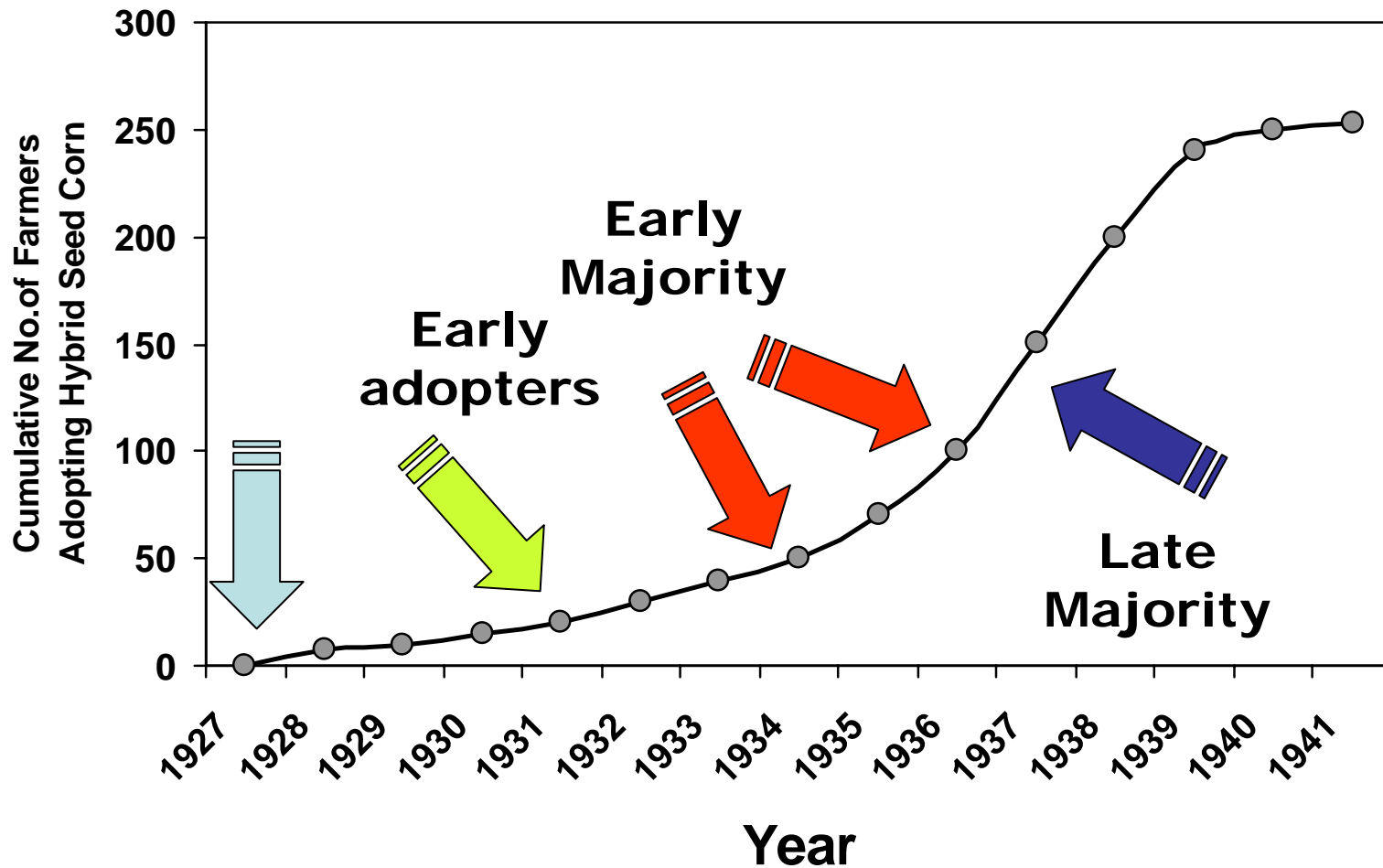


## **Allow changes.**

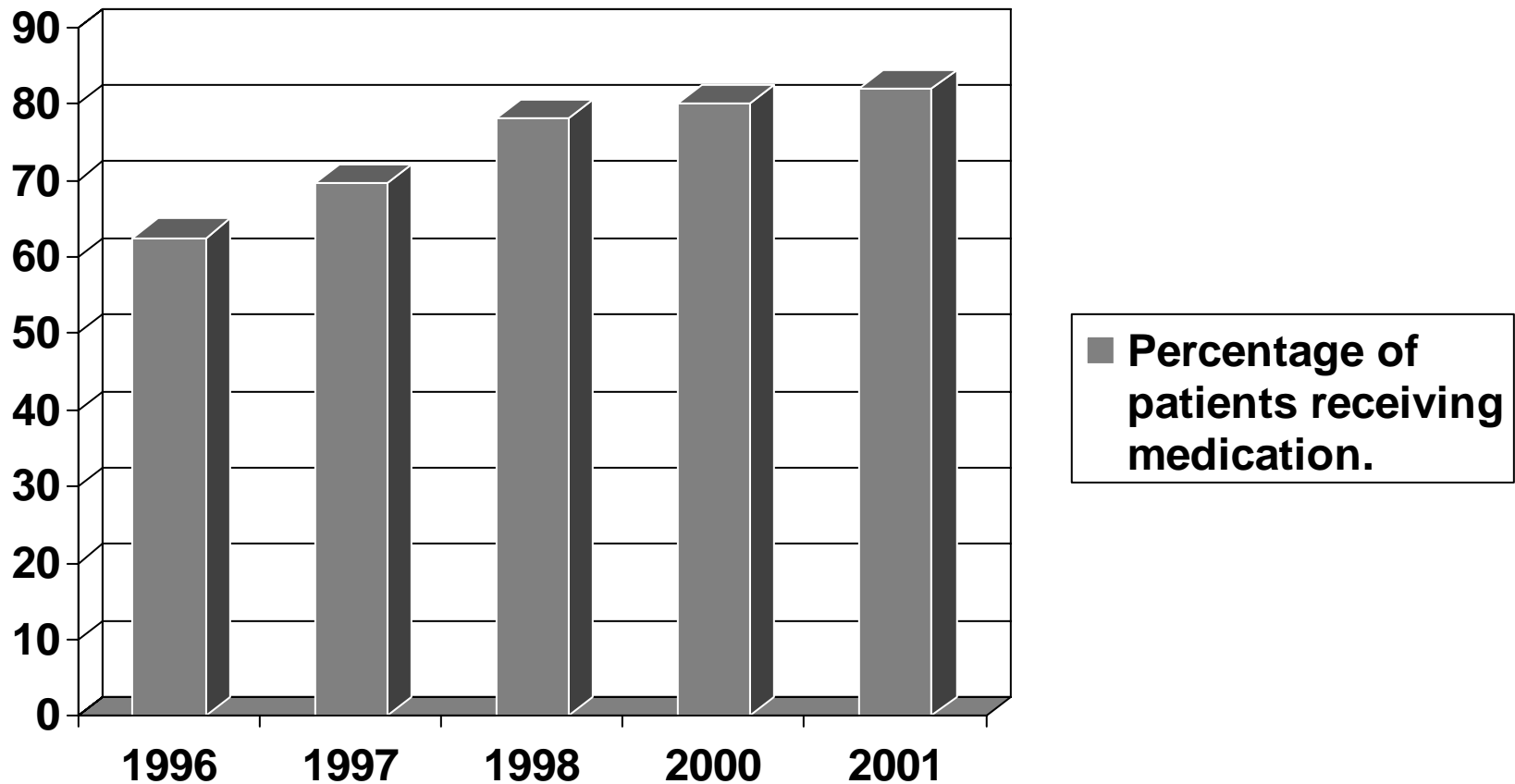
**Guidelines must be adopted and adapted .  
Reinvention is an act of creativity and courage**

# *The adoption curve for innovation.*

*From Rogers . Diffusion of innovations*



## Beta- blocker treatment after myocardical infarction after the intervention and Guidelines of Proffesional organizations




Adapted from: Lenfant C. Clinical Research to clinical Practice. Lost in Traslation? N Engl. J Med. 2003

## American Diabetes Association, NCQA. Guidelines for Diabetes Physician Recognition Program

	1999	2001
<b>Glycosylated Hemoglobine measured</b>	<b>75%</b>	<b>81.4%</b>
<b>Poorly controlled Glycosylated Hemoglobine</b>	<b>44.9%</b>	<b>36.9%</b>
<b>Complete lipid profile measurement</b>	<b>69%</b>	<b>81.4%</b>
<b>Acceptable lipid control</b>	<b>44.3%</b>	<b>50.9%</b>
<b>Nephropaty Screening</b>	<b>36%</b>	<b>46%</b>
<b>Eye examination</b>	<b>45.4%</b>	<b>52%</b>

# Is there a role for clinical guidelines as an educational tool?

- **Yes. They can play a role in education.**
- **We have to re-educate ourselves to use them.**
- **Professional Organizations can play an important role to ensure that these recommendations influence the practice of ophthalmology**



The screenshot shows a web page with a sidebar on the left and a main content area on the right. The sidebar contains a menu with the following items: Preferred Practice Patterns, Compendium, Ophthalmic Technology, Complementary Therapy, Summary Benchmarks, and Evidence-Based Medicine. Below the menu is a banner for 'IHE Eye Care' with a button that says 'Preview The Electronic Office Showcase'. The main content area is titled 'Overview of Guidelines and Assessments' and contains three sections: 'Preferred Practice Patterns (PPPs)', 'Compendium', and 'Ophthalmic Technology Assessments'. Each section has a brief description of its purpose and content.

**Preferred Practice Patterns (PPPs)**  
Designed to identify characteristics and components of quality eye care. Developed by a panel of experts and based on the best available scientific data, PPPs provide guidance for the pattern of practice, not for the care of a particular individual.

**Compendium**  
A collection of clinical practice guidelines based on clinical evidence and expert consensus to assist the clinician in decision-making about treating specific diseases.

**Ophthalmic Technology Assessments**  
Evaluate new and existing procedures, drugs and diagnostic and screening tests for safety and clinical effectiveness. Written and reviewed by the Ophthalmic Technology Assessment Committee of the Quality of Care and Knowledge Base Development Secretariat.

**Summary Benchmarks**  
Do you rely on the evidence-based recommendations of the Preferred Practice Patterns (PPPs), but wish you could quickly locate key clinical information... perhaps during a patient visit? The Summary Benchmarks