



# Consensus vs Evidence What is Most Helpful to the Practitioner?

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Guidelines for Developing Guidelines

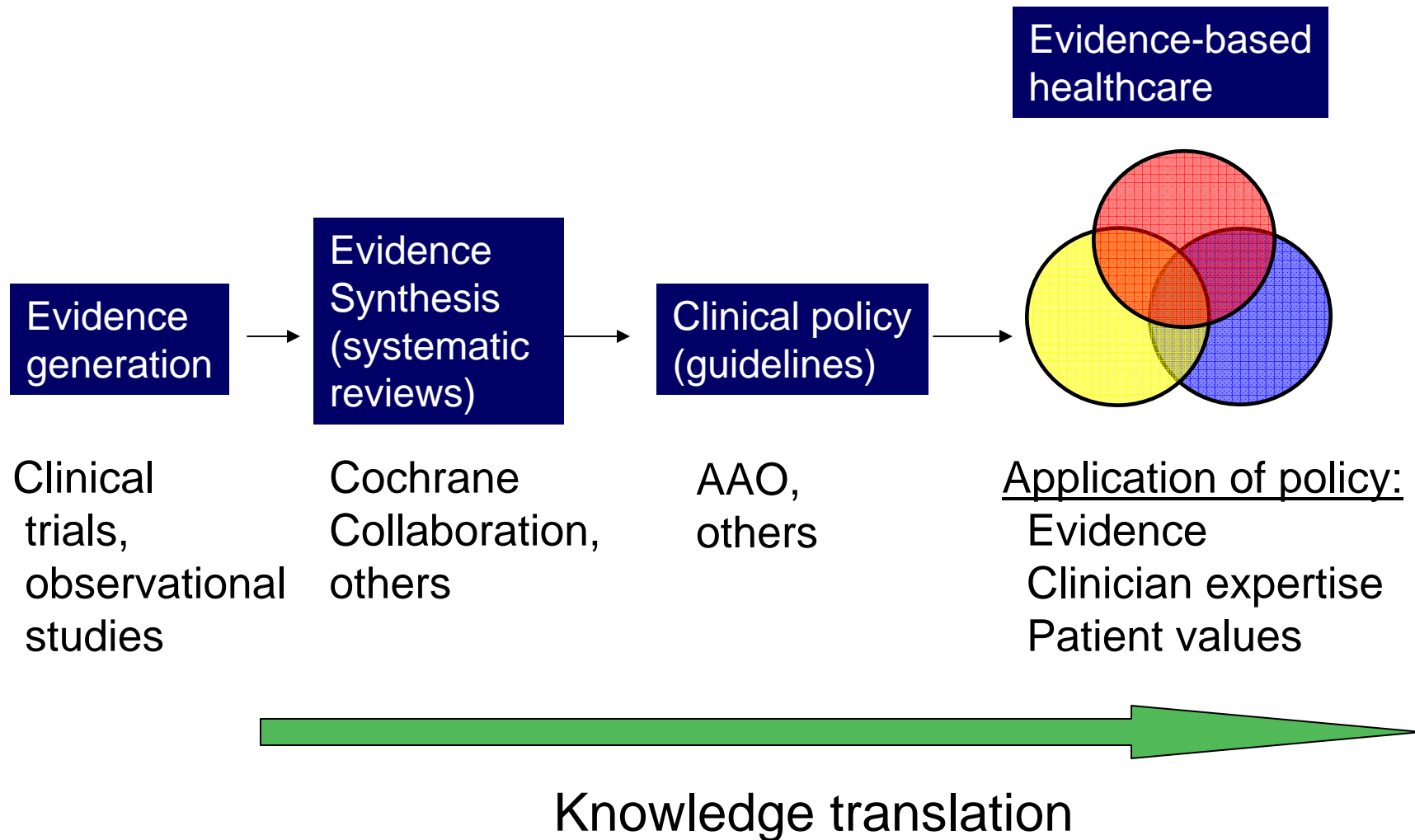
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# Knowledge translation: From clinical research to practice decisions





# Goal of guidelines

- Doctors need guidelines so that patients get optimal care
- What factors likely to influence guideline use?
  - Transparency
    - Systematic reviews using high quality, standardized methods that minimize bias
    - When no evidence available, clinicians, funders, policymakers need to know this
  - Trusted source
    - Minimize conflict of interest
    - Up-to-date
  - Accessible, digestible, timely
    - One click
    - Available at time of question



## Electronic sources used by primary care MDs (all daily Internet users) answering 46 preset clinical questions

<u>Electronic source</u>	<u>% of total</u>
Up-to-Date	66%
MEDLINE/PubMed	36%
Google/Internet	23%
Cochrane	10%

39% of questions correctly answered before searching and 41% correctly answered after searching.



## Resident and fellow knowledge of statistics and interpretation of research findings

- Survey completed by 75% of 367 residents in 11 residency programs.
- Overall mean percentage correct:
  - Residents = 41.4%
  - Fellows & gen'l med faculty with research training = 71.5%
- Correct interpretation:
  - RR = 81.6%
  - OR from multiple regression=37.4%
  - Kaplan Meier 10.5%



## Looking for evidence requires you to frame and classify your question

- **Frame:** Figure out what your questions are
- **Classify:** What type of question is this and what is the best evidence to address that question?
- **Example: Patient with ocular hypertension**
  - What risk factors does the patient have for progression to glaucoma? (*etiology*)
  - Likelihood of progression? (*prognosis*)
  - Potential benefit of IOP-lowering tx? (*therapy*)
  - Potential harm of IOP-lowering tx? (*harm*)
  - Potential differences in outcome if the patient is treated before or after glaucoma is detectable? (*screening; prognosis*)
  - Optimal degree of IOP reduction, once treatment found to be necessary? (*Encompasses several questions*)



## One size does NOT fit all!

The question classification guides systematic reviewers to the appropriate type of evidence

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### Question:

- Incidence
- Prevalence
- Therapy
- Screening
- Diagnostic accuracy
- Prognosis
- Harm
- Etiology

### Look for evidence from:

Followup (cohort) studies

Surveys

Clinical trials

Clinical trials

[Clinical trials if possible], case series

Followup studies, [clinical trials]

Clinical trials, followup studies, case control studies

Follow up studies, case control studies



# Cochrane Evidence Gap Project

- Examine practice guidelines to see which problems are deemed important by clinicians
- Develop answerable clinical questions from guidelines
- Identify existing evidence (clinical trials and systematic reviews) for each question
- Work with clinical community to prioritize knowledge translation activities
- Work with funders to prioritize research



Cochrane Eyes and Vision Group (CEVG) E-Gap Project  
Example

<b>2005 AAO PPP POAG</b>	<b>Clinical question</b>	<b>Initial Cochrane CENTRAL Search Result</b>	<b>Available CEVG Systematic Reviews</b>	<b>DARE Abstracts</b>
<p>In many instances, topical medications constitute effective initial therapy.</p> <p><b>[No evidence rating]</b></p>	<p>Is medical therapy an effective initial treatment in lowering IOP in patients with POAG?</p>	<p><b>11 trials identified</b></p>	<p>Medical vs. surgical interventions for open angle glaucoma (Review published on 04/19/2004) <b>-Not cited</b></p> <p>Medical interventions for POAG and ocular hypertension (Protocol in 2004)</p> <p>Neuroprotection for prevention of and treatment of glaucoma in adults (Title in 2004)</p>	<p>None</p>



# Take-home messages

- Evidence-based healthcare is the integration of best research evidence with clinician expertise and patient values.
- Doctors need evidence translated into transparent, trustworthy, easy to access guidelines
- To be evidence-based, every guideline needs a high quality systematic review as a foundation
- “High quality evidence” defined by the question being asked
  - Systematic reviews are applied to all types of evidence.
- Current guidelines not always evidence-based
- CEVG would welcome a partnership with AAO and ophthalmologists for ensuring important systematic reviews get done and form the foundation of vision guidelines.

[www.cochraneeyes.org](http://www.cochraneeyes.org)