

# RHS 434

Tutorial lecture for the guideline  
presentation assignment



# Clinical Practice Guidelines (CPGs)

*Definition: (old)*

“***Systematically*** developed statements to assist ***practitioner and patient decisions*** about appropriate health care for ***specific*** clinical circumstances” (IOM 1990)



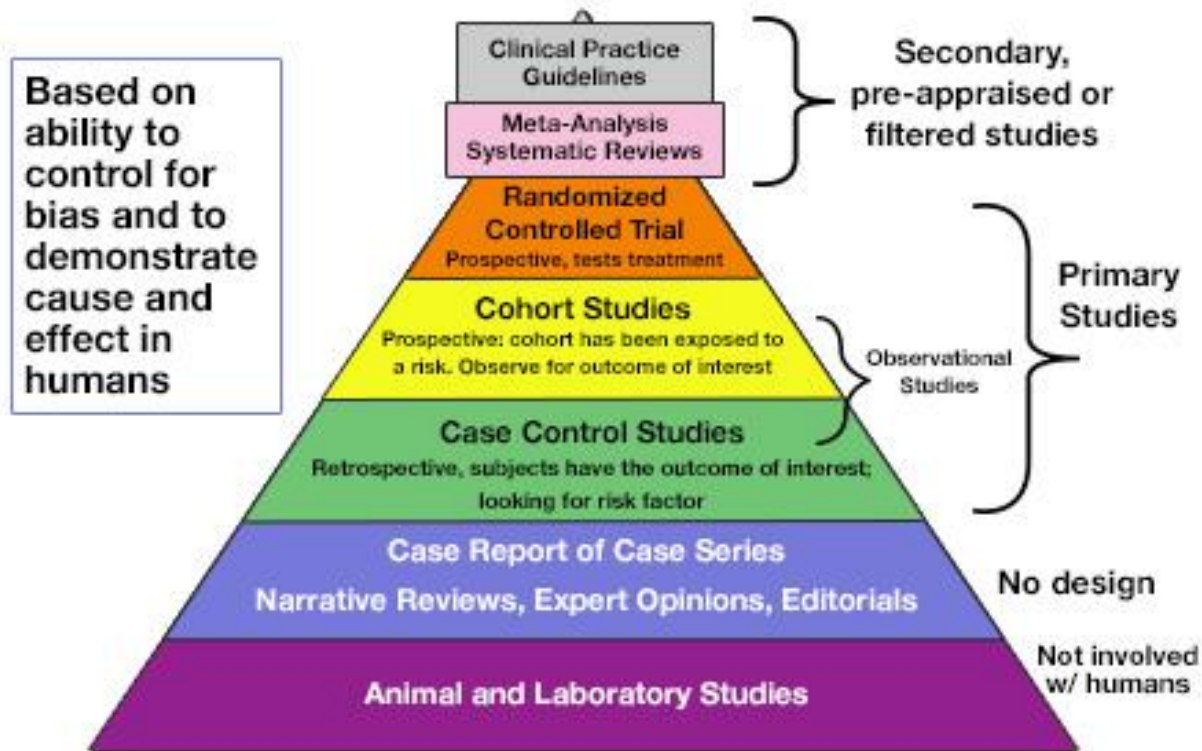
**GUIDELINES**

# It's importance

“Good Clinical Practice is an international ethical and scientific quality standard for the design, conduct, performance, monitoring, analyses and reporting of clinical trials. ”

A Vijayanathan, O Nawawi Biomed Imaging Interv J. (2008) The importance of Good Clinical Practice guidelines and its role in clinical trials; 4(1): e5. Published online 2008 January 1. doi: 10.2349/bijj.4.1.e5

## Heirarchy of Research Designs & Levels of Scientific Evidence



<http://www.dentalcare.ca/en-CA/dental-education/continuing-education/ce311/ce311.aspx?ModuleName=coursecontent&PartID=4&SectionID=-1>

# Oxford Centre for Evidence-based Medicine – Levels of Evidence (March 2009)

Level	Therapy/Prevention, Aetiology/Harm
1a	Systematic review (with homogeneity) of RCTs
1b	Individual RCT (with narrow Confidence Interval)
1c	All or none (ie all patients died before the Rx became available, but some now survive on it; or when some patients died before the Rx became available, but none now die on it)
2a	Systematic review (with homogeneity ) of cohort studies
2b	Individual cohort study (including low quality RCT; e.g., <80% follow-up)
2c	"Outcomes" Research or ecologic studies (studies of group ch <sup>ics</sup> )
3a	Systematic review (with homogeneity) of case-control studies
3b	Individual Case-Control Study
4	Case-series (and poor quality cohort and case-control studies )
5	Expert opinion or based on physiology, bench research or "first principles"

Oxford Centre for Evidence Based Medicine

<http://www.cebm.net/oxford-centre-evidence-based-medicine-levels-evidence-march-2009/>

# PEDro Scale (Physiotherapy Evidence Database)

Item #	Criteria (Yes = 1 point)
1	Eligibility criteria specified
2	Subjects randomly allocated to interventions or order of treatment
3	Concealed allocation
4	Groups similar at baseline
5	Blinding of subjects
6	Blinding of those who provided intervention
7	Blinding of assessors for at least one key outcome
8	Measure of one key outcome obtained from >85% initial subjects
9	All subjects who had outcome measures received allocated intervention. If not, data for one key outcome analyzed by "intention to treat"
10	Between intervention group statistical comparison for at least one key outcome
11	Point measures and measures of variability provided for at least one key outcome
<b>TOTAL</b>	Sum of scores for items 2–11

# examples

- **National Institute for Health and Care Excellence**

<https://www.nice.org.uk/>

- **Clinical guideline for Achilles Pain, stiffness**

[http://www.orthopt.org/ICF/icf\\_2010/Achilles%20Tendinitis%20Clinical%20Guideline%20-%20JOSPT%20-%20Sept%202010.pdf](http://www.orthopt.org/ICF/icf_2010/Achilles%20Tendinitis%20Clinical%20Guideline%20-%20JOSPT%20-%20Sept%202010.pdf)

- **Pedro**

<http://www.pedro.org.au/>

- **Extra helpful link**

<http://www.students4bestevidence.net/>

- **What makes a good clinical guideline?**

<http://www.medicine.ox.ac.uk/bandolier/painres/download/whatis/whatareclinguide.pdf>

