

Adherence to Evidence Based Medicine & Guidelines

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Guidelines: Definition

Practice Guidelines are a set of patient care strategies developed to assist in clinical decision making. Clinical guidelines identify, summarize and evaluate the most current data . Many professional organizations have established and published practice guidelines for their clinical specialties.

EBM: Definition

Aims to apply the best available evidence gained from the scientific method to medical decision making. It seeks to assess the quality of evidence of the risks & benefits of treatments (including lack of Rx).

Is it a Problem?

- Physicians trained & practicing in the same institution treat common cold differently
- An endocrinologist requests BMD yearly on an osteoporotic patient
- Less than 3% at AUB start a diuretic in a HT pt with no complications

*Why MDs do not stick to the
evidence?*

Opinion Leader (OL)

❖ Academician

- University/Academy/Society
- Published scientific articles
- Chairman/Vice Chair/Director

❖ Are OL affected by the drug industry (DI)?

Effect of OL

“Doctors don’t respond well to the traditional sales & marketing push. But, they do respond well to... doctors...who have been recognized for their expertise and knowledge of innovative, emerging therapies.” OL “are likely to... advocate for new products”

Dorfman et al. Pharmaceutical Executive 1 March 2006

How Easy for DR to Tango with OL?

- ❖ Parke-Davis identified 40 OL in one US region
- ❖ 35 danced the tango
- ❖ 14 received honoraria/grants from the company (US\$10,000-158,250/OL)

Steinman et al. Annals of Internal Med 2006. 145(4):284-293

Can DI Predict Research Results?

- ❖ DI is having more influence in the design & analysis of clinical trials
- ❖ 192 studies comparing statins showed that studies funded by the manufacturer of the test medicine are 20X as likely to report results favorable to the test medicine.

Bero et al. PLoS Med 2007. 4(6):e184

“Ghost Writers”

- ❖ Legal cases in the US revealed internal company documents listing trial reports with authors ‘to be determined’

Ross et al. JAMA 2007. 297:1216-1223

- ❖ A contract medical writing company managed 85 papers on Pfizer’s antidepressant (Zoloft), 55 of which resulted in published reports. All papers favored Sertraline.

Healy et al. British J Psychiatry 2003. 183:22-7

Impact of OL on Guidelines

Do OL have a say in Guidelines?

How Many of You?

- Attended a conference sponsored by the DI & followed by a meal over the last 3 months?
- Received a gift (including pen, notepad others) from a DI over the last 3 months?

Why Drs Don't Stick to EBM?

- Fed by the wrong person/source
- Lack of time
- Not trained-79% (unfamiliar with EBM tools)
- Access to user friendly tools of EBM
- The “thought leader” knows better
- Confused
- Believe in anecdotal experience
- Caretaker pressure

Practicing Sound Medicine

- ❖ Apply EBM
- ❖ Follow guidelines prepared by a body with no conflict of interest (NICE)
- ❖ Reward good practices
- ❖ The stick to bad practices
- ❖ Control DI activities

Controlling the DI

- ❖ Scheduled appointments away from pts
- ❖ Non-formulary drugs not to be promoted
- ❖ No samples
- ❖ No promotional items
- ❖ CME controlled by course directors
- ❖ DR to communicate warnings & side effects
- ❖ Food not to be provided directly by DR

Helpful websites

- <http://www.nice.org.uk/nhsevidence/>
- <http://www.guideline.gov/>
- <http://plus.mcmaster.ca/EvidenceUpdates/>
- <http://www.library.nhs.uk/guidelinesFinder/>