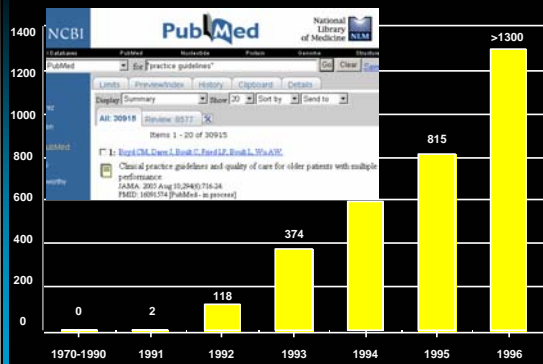




Clinical Guidelines appraised with the AGREE instrument

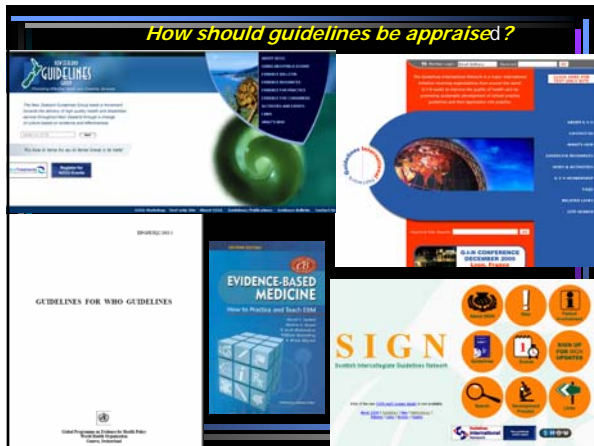
Asbjørn Jokstad

PRACTICE GUIDELINES IN MEDLINE



Quality & characteristics of guidelines?

- Evidence based Guidelines
- Good Practice guidelines by consensus
- Guidelines produced by individual experts
- Standards
- Protocols





- Appraisal instrument for clinical guidelines
- Translated into 13 European languages & Japanese
- Recommended for use by most European HTAs

AGREE APPRAISAL INSTRUMENT
23 criteria within 6 domains

1. SCOPE AND PURPOSE (3)
2. STAKEHOLDER INVOLVEMENT (4)
3. RIGOUR OF DEVELOPMENT (7)
4. CLARITY AND PRESENTATION (4)
5. APPLICABILITY (3)
6. EDITORIAL INDEPENDENCE (2)

Each criteria ranked on a scale:
Strongly Agree **4 3 2 1** Strongly Disagree

OVERALL ASSESSMENT

Would you recommend these guidelines for use in practice?

Strongly recommend

Recommend (with provisos or alterations)

Would not recommend

Unsure

APPRAISAL OF GUIDELINES
FOR RESEARCH & EVALUATION

AGREE

INSTRUMENT
TRAINING MANUAL

The AGREE Collaboration
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Quality of clinical guidelines in dentistry?

www.fdiworldental.org

N=778
N=391 guidelines
pr July 2003

Search Results	World	FDI
Endocarditis	[World]	[FDI]
Dental erosion	[World]	[FDI]
Disabled patients	[World]	[FDI]
Dry Mouth, Saliva and oral health	[World]	[FDI]
Emergency treatment	[World]	[FDI]
Neuralgia and pain	[World]	[FDI]
Odontophobia, psychology, fear	[World]	[FDI]
Oral mucosal problems	[World]	[FDI]
Quality of life	[World]	[FDI]
Sport	[World]	[FDI]

www.fdiworldental.org

N=915 + 323 SRs
N=433 guidelines
pr July 2004

Search Results	World	FDI
Endocarditis	[World]	[FDI]
Dental erosion	[World]	[FDI]
Disabled patients	[World]	[FDI]
Dry Mouth, Saliva and oral health	[World]	[FDI]
Emergency treatment	[World]	[FDI]
Neuralgia and pain	[World]	[FDI]

AGREE APPRAISAL INSTRUMENT



1. SCOPE AND PURPOSE (1-3)
2. STAKEHOLDER INVOLVEMENT (4-7)
3. RIGOUR OF DEVELOPMENT (8-14)
4. CLARITY AND PRESENTATION (15-18)
5. APPLICABILITY (19-21)

6. EDITORIAL INDEPENDENCE (22-23)

Is concerned with the independence of the recommendations and acknowledgement of possible conflict of interest from the guideline development group


Clinical guidelines in dentistry

Very few guidelines today contain explicit links to the scientific evidence


The strength of recommendations are seldom presented


Many existing guidelines should be improved according to an AGREE format

NDA's should become involved being well qualified to address likely organisational, behavioural and costs implications of applying guidelines



That's' it folks!




1. SCOPE AND PURPOSE (1-3) 

1. The overall objective(s) of the guideline is(are) specifically described.
Comments?

2. The clinical question(s) covered by the guideline is(are) specifically described.
Comments?

3. The patients to whom the guideline is meant to apply are specifically described.
Comments?


2. STAKEHOLDER INVOLVEMENT (4-7) 

4. The guideline development group includes individuals from all the relevant professional groups.
Comments?

5. The patients' views and preferences have been sought.
Comments?

6. The target users of the guideline are clearly defined.
Comments?

7. The guideline has been piloted among target users.
Comments?

3. RIGOUR OF DEVELOPMENT (8-14) 

8. Systematic methods were used to search for evidence
Comments

9. The criteria for selecting the evidence are clearly described
Comments

10. The methods used for formulating the recommendations are clearly described
Comments

11. The health benefits, side effects and risks have been considered in formulating the recommendations
Comments

12. There is an explicit link between the recommendations and the supporting evidence
Comments

13. The guideline has been externally reviewed by experts prior to its publication
Comments

14. A procedure for updating the guideline is provided
Comments

4. CLARITY AND PRESENTATION (15-18)



15. The recommendations are specific and unambiguous

Comments

16. The different options for management of the condition are clearly presented

Comments

17. Key recommendations are easily identifiable

Comments

18. The guideline is supported with tools for application

Comments

5. APPLICABILITY (19-21)



19. The potential organisational barriers in applying the recommendations have been discussed

Comments

20. The potential cost implications of applying the recommendations have been considered

Comments

21. The guideline presents key review criteria for monitoring and/or audit purposes

Comments

6. EDITORIAL INDEPENDENCE (22-23)



22. The guideline is editorially independent from the funding body

Comments

23. Conflicts of interest of guideline development members have been recorded

Comments
