Including Evidence-Based Rehabilitation in Clinical Practice Guidelines

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Introduction

The Finnish Medical Society Duodecim's Current Care Guidelines unit (CC) has developed evidence-based clinical practice guidelines (CPG) for over 20 years, totaling to more than 100 guidelines. The national guidelines cover important issues related to Finnish health, medical treatment as well as prevention of diseases.

CPGs are intended as a basis for treatment decisions, and can be used by physicians, other healthcare professionals and citizens.

Rehabilitation is often neglected in CPGs even when evidence shows effectiveness. Current Care carried out a development project Current Rehabilitation during the years 2012–14, supported by the Social Insurance Institution of Finland.



Notifications of guideline publications Functional capacity in CC Guidelines Tools for including functional capacity in CPG's Rehabilitation in CC Guidelines Tools for including rehabilitation to CPG's Training of CC editors and CPG groups Structures and processes for including rehabilitation in CPG's Project plan 2011 2012 2013 2014

Case presentation

The main objective of was to develop processes and structures to include the evidence and good practices of rehabilitation and functional capacity to CPGs and to use those in the development and updating of CPGs. Other objectives were to develop further publication formats and implementation tools, and to evaluate and report about the development project in professional and scientific publications. The project objectives were met in different phases of the project (Figure 1).

The main target groups were identified as CC editors (EBM methodology experts) and members of the voluntary CPG working groups (usually ten clinicians), who develop CPG's with the support from the editorial team. A flow diagram of the process description for including rehabilitation in CPGs was drawn up at the beginning of the project (Figure 2).

CPG working groups were offered tools and training (e.g. a handbook with evidence tables for rehabilitation trials) for broadening their topics to rehabilitation. Nationally two seminars and several sessions in medical conventions focusing on rehabilitation in CPGs were arranged.

Later on in the project the focus was broadened to including functional capacity and especially the use of the ICF framework. The CC information specialists tested several different search strategies for finding the most effective one for studies on rehabilitation and functional capacity (for search strategy, please visit www.kaypahoito.fi).

Project evaluation was carried out by monitoring rehabilitation subtitles and evidence summaries in the CPG database, and by surveying the views of the CC editors on the completion of the CPG, after every publication. Also the benefits and shortcomings of the project were surveyed annually with a questionnaire to the CC board and editorial team.

During the project 54 CPGs were published. In 30 of them rehabilitation was covered either as a subtitle or in evidence summaries. As most of the CPGs published were updates, comparisons between versions were possible. The number of rehabilitation subtitles increased from 20 to 30 during the project, and the number of relevant evidence summaries increased markedly – from 49 to 164.

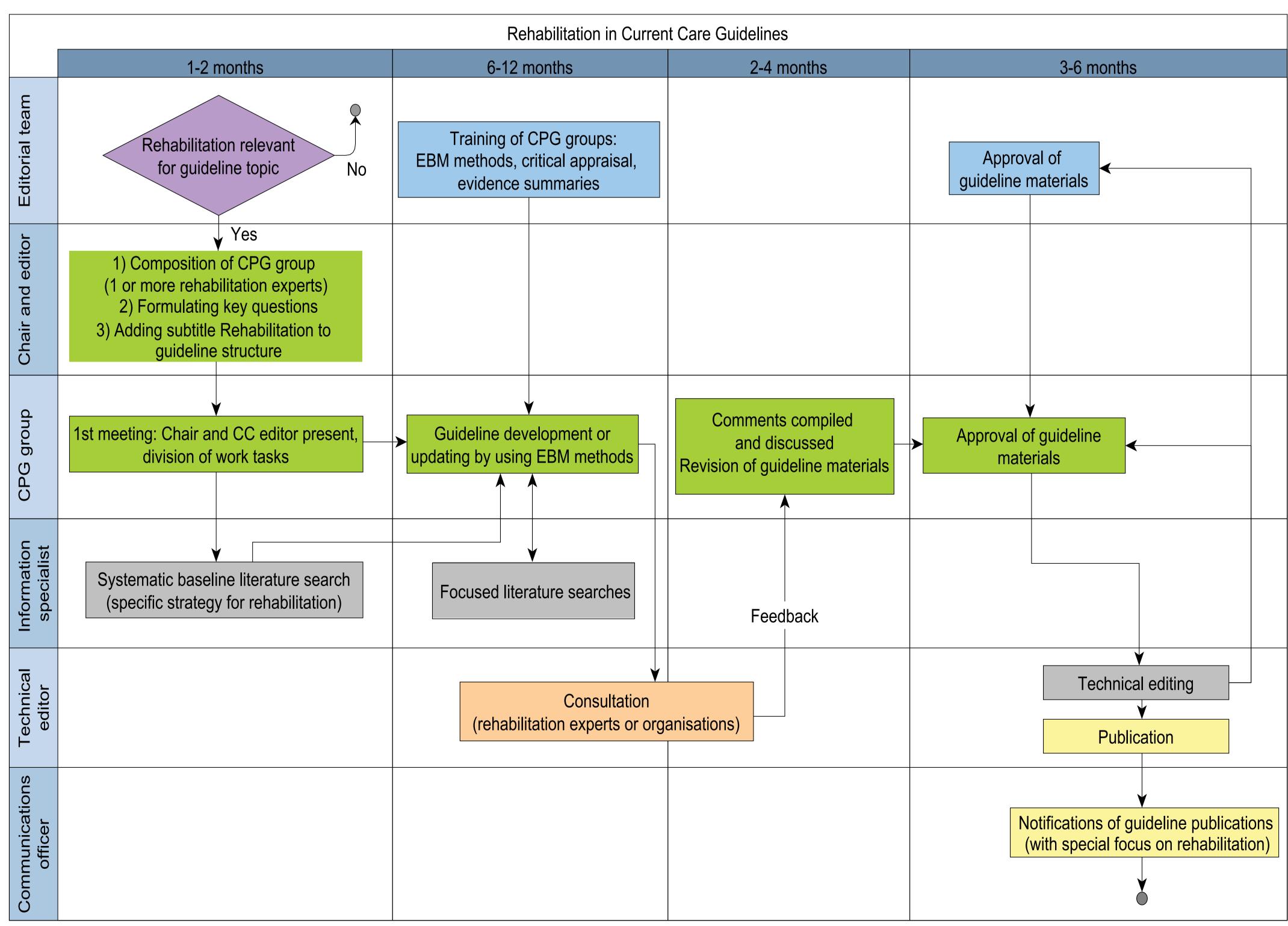


Figure 2. The process of including rehabilitation in Current Care Guidelines.

Discussion

Rehabilitation has been a neglected field in CPGs. Therefore, targeted efforts to include rehabilitation recommendations in CPGs were needed. During the project, rehabilitation in CPGs was brought to the working groups' meeting agendas and was discussed in a systematic way.

The amount of critically appraised rehabilitation evidence increased markedly. Processes and tools developed during this project are now available for the working groups and embedded in the development process of the Current Care Guidelines.