

Evidence-based Guidance – a practical approach to summarising the evidence



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Introduction

This poster summarises our experience of reviewing the evidence for an update of Guidance for breast cancer services.¹

Background

The National Cancer Guidance makes recommendations to ensure that everyone using NHS services in England and Wales has access to high quality care.

The Guidance is produced through collaboration between people who manage, provide and use the service, and independent researchers who review the underlying evidence.

Summary

A small review team had to address many review questions in a relatively short time.

Collaboration with an expert group was essential to formulate the right review questions to inform service guidance.

An information specialist in the review team optimised use of the time available for searching.

Selection of studies and data extraction were done by only one reviewer. Uncertainty was resolved by discussion in the review team and extracted data were double-checked.

Quality was assessed using criteria specific to study design.

The review team and the expert group worked together with a medical writer to ensure that the guidance recommendations were evidence-based.

Vital statistics

Review questions addressed = 43

Searches conducted = 251

References retrieved = 7526

Studies included = 24 systematic reviews and 145 primary studies

Dissemination

The update of the Guidance Manual and the Evidence Review for the update are published in paper, CD-ROM and electronic format. See the following websites for details:

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

<http://www.york.ac.uk/inst/crd/>

Objective

To review the evidence for an update of NHS Guidance on breast cancer services.

Methods

Collaboration

A breast cancer expert group was convened to collaborate with a commissioned independent review team.

Proposals

Proposals for guidance recommendations were generated by the expert group and through wider professional consultation.

Review Questions

The review team converted the proposals to review questions.

Draft questions were passed between reviewers and content experts several times until well-formulated review questions were agreed.

Finding the Evidence

An initial search was conducted for current relevant systematic reviews

In the absence of existing well-conducted systematic reviews, primary studies were sought

Web resources were searched for grey literature and ongoing studies

Bibliographies of identified studies were checked for additional studies

Personal contacts were targeted for additional data

Main Sources Searched

Medline
Embase
CancerLit
Cochrane Library
DARE
AMED
HMIC
BNI
Cinahl
SSCI/SCI
SIGLE
HealthStar
PsychInfo
ASCO website

Selecting Studies

Studies were selected using pre-defined inclusion criteria.

Quality assessment

Existing systematic reviews were included if they were current and met the quality criteria developed for DARE.²

Primary studies were critically appraised using criteria appropriate to the study design.

The strength of the evidence was graded using a pre-defined scheme.

Summarising the evidence

Characteristics of the included studies were tabulated and the evidence synthesised in a narrative summary.

Getting the Evidence in to the Guidance

The review team worked closely with a commissioned writer to ensure accurate and balanced use of the evidence review to inform the Guidance recommendations.

References

1. The National Cancer Guidance Steering Group. *Guidance on Cancer Services: Improving Outcomes in Breast Cancer*. NICE. Forthcoming July 2002
2. NHS Centre for Reviews and Dissemination. Database of Abstracts of Reviews of Effectiveness. Available from <http://www.york.ac.uk/inst/crd/>