

CLINICAL PRACTICE GUIDELINES

ASSIGNMENT 1 REFLECTIONS ON LEARNING

REFLECTION 2: CLINICAL PRACTICE GUIDELINE ADAPTATION

Linked Paper : 'GRADE Evidence to Decision (EtD) frameworks for adoption, adaptation, and de novo development of trustworthy recommendations : GRADE – ADOLPMENT'. Holger J. Schunemann et al.

DESCRIPTION

This reflection exercise involved reading and reflecting on one of three pertinent topics (of choice) covered during the Clinical Practice Guideline (CPG) module. For this reflection I chose the topic on 'Clinical Practice adaptation'. This exercise included reading and critically reflecting on the linked topic paper (mentioned above).

I chose this topic since I felt that clinical practice adaptation is relevant to my line of work. This is also a stream of guideline related work that I am looking forward to working toward in my professional future. I also looked at the other two topics ('Structure of formulating and writing guideline recommendations' and 'Appraising clinical practice guidelines'). I started off by briefly reading through the other linked papers before I settled on this chosen one.

The objectives of this paper focused on the GRADE-ADOLPMENT approach to guideline production which combines guideline adoption, adaptation and de novo development as required, utilizing the GRADE and Evidence to Decision (EtD) frameworks.

FEELINGS

Clinical guidelines are used very often in my scope of work in a clinical research setting. We consciously and unconsciously use guidelines daily for various activities to guide patient management, referral, counselling and investigation. I sometimes look at our 'daily use' guidelines (guidelines that we use most commonly in our setting) and reflect on how I can constructively contribute by adding information based on my daily experiences using existing

guidelines in my patient setting. I feel that my contributions could help other clinicians with their patients in a similar situation. I also sometimes deliberate whether the guidelines that we use in our context are actually a correct 'fit' for our patients in our setting. I have realized that guidelines are greatly impacted by one's physical, political, environmental and importantly financial (resource) situation.

At times, existing guidelines can be perceived as 'cast in stone'. As clinicians we refer to these guidelines almost devotedly. We need to consider that guideline development is an integrated and complex process. We also need to consider that guidelines require regular update based on the ever-changing evidenced-based information that becomes available globally. Hence, we need to keep abreast of new updates to guidelines as well as the dissemination and implementation of these.

Given the South African context, I understand that we live in a resource limited setting. In my opinion, although our National Department of Health does have relevant funding to support guideline development, we need to acknowledge that there are resource allocation based on prioritized health needs. Therefore, I understand the value of these guideline development options. I appreciate the importance of being able to adopt or adapt guidelines based on resource limitations and more importantly, to ensure adequate guideline dissemination and implementation.

EVALUATION

Overall, the experience with learning about clinical practice guideline (CPG) adaptation was constructive and educational. It was essential to read the paper together with applying the knowledge that I gained from the lecture. I found that the paper complemented the information that was shared in the lecture session.

Whereas the lecture focused on an overview of guideline development methods together with the process relating to each one, the linked paper focused more on describing the process for guideline production based on these methods. Hence, the paper was a practical extension of the lecture or a working guideline adaptation model.

The process of reading this paper was relaxed and easy to understand. I took some time to thoroughly read through it while referring to the lecture notes for any points of clarity. The paper was visually easy to follow and understand. The layout with sub-headings, tables and a flowchart made for a visually appealing text.

The introduction section of the paper also explained key concepts of the topic, hence, one could read the paper and have a full overview of the theory behind guideline adaptation. I found this to be very useful and valuable especially to first time readers on this topic.

ANALYSIS

Guideline adaptation process is a critical component of the CPG module. It is crucial for us as students to fully grasp the concept, process and methods regarding this topic. By reading the linked paper, I was able to fully utilize my knowledge on the topic but also to learn its practical application.

Throughout the process of reading up on this topic, I tried to make notes and highlight various learning points within my lecture notes and on the paper as well. These highlighted points enabled me to draw my attention to certain pertinent points to guide my knowledge. By reading the paper I have also gained deeper insight and knowledge into the guideline adaptation process.

It was essential for me to actually grasp the guideline adaptation concept and process and by doing so adding depth to my current knowledge. The paper described the guideline adaptation process in detail and with a step by step approach. The 'Methods' section was comprehensive with concise descriptions of the entire process from the 'General organization and planning', 'Selection of guideline topics' to 'Arriving at a final framework for GRADE-ADOLOPMENT'. All this information was further illustrated in a flow diagram for easy reference.

By the end of the reading, I was more confident with better understanding on the guideline adaptation process than before.

CONCLUSIONS (GENERAL AND SPECIFIC)

Clinical Practice Guideline (CPG) module and the Guideline adaptation process are new concepts for me. I don't have prior knowledge or experience with this topic. Hence, it was essential to supplement knowledge gained through the lecture sessions with further reading. In this instance, reading of the linked paper was most appropriate and valuable. By doing so, I was able to make sense of this process including specific terms being used, teams involved, the rigour of the review process, decision making process and leading ultimately to the final usable recommendation. This was all well documented in the paper.

My initial perception of this process was of it being simpler and involving fewer steps and fewer experts. Therefore, the paper was informative about the rigour of the entire process. I realized that the process was more detailed and complex than I previously perceived it to be.

As much as I have gained more knowledge from reading the paper, I feel that I still have more knowledge to gain regarding this topic. I feel that for me, this was an initial stride to learning more about this process.

PERSONAL ACTION PLANS

I believe that I still have much knowledge and experience to gain regarding this topic. For me, this process of reading the linked paper and studying my lecture notes was just an introduction to learning about guideline adaptation. I need to remind myself that I am still a student learning about this process and that I will require many more hours of reading, lecture time and discussions with experts and peers before I feel confident enough to consider myself worthy of being involved in such a process. I believe that becoming adept at such a process involves years of experience and exposure to relevant guideline teams together with guidance from experts and panelists. It may also involve reviewing previous guideline development processes that may have worked or not and learning from these experiences as well.

This is a process that I consider of interest and of importance if I were to consider a future career or academic path in clinical guideline development. I therefore, plan on exploring and reading more literature on this topic. This together with attending relevant lectures, seminars, and workshops and interacting with relevant methodologists and guideline 'developers'.

As I mentioned at the beginning of the reflection, I sometimes think about how I can positively contribute to existing guidelines with the experience that I have gathered within my context over the years. I feel that sometimes, us as clinicians, have a wealth of knowledge and experience in certain clinical matters that can be shared with peers. Knowledge sharing is extremely valuable in any setting.

Overall, I have come to the realization that there is still a lot more reading, 'scoping' out the guideline development landscape and interacting with experts for me to engage in, to improve on my current knowledge. I believe that the guideline development process is a dynamic and ever-changing one. Experts are constantly seeking out innovative approaches to improve existing methods. As so, guidelines are currently being updated with new information, current developments and newly harnessed evidence. I plan on using any opportunity to tap into this information space so that I can ultimately contribute successfully to the guideline development process in the future.