

Exploring Comparative Effectiveness: Fundamentals of Evidence-based Health and Introduction to the Cochrane Collaboration

National Health Policy Forum

Washington, DC

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July 25, 2008



Blue Cross
Associatio

BCBSA State Effectiveness

Statement for the Record to
Subcommittee On Health
U.S. House Of Representati
On Comparative Clinical E
Submitted by: Blue Cross ar

Introduction

The Blue Cross and Blue Sh

Developing A Comparat Informatio

High-level considerati
evidence for decision

by Gail R. Wilensky

ABSTRACT: Interest in obj
has been growing in the Uni

w 572

DOI 10.1377/hlthaff.25.w572 ©2006 Projec

medical services, drugs, devices, th
treat the same condition. The College further recommended the
establishment of an adequately funded, trusted national entity that
should prioritize, sponsor, or produce both comparative clinical and
cost-effectiveness data.

the public and our patients.

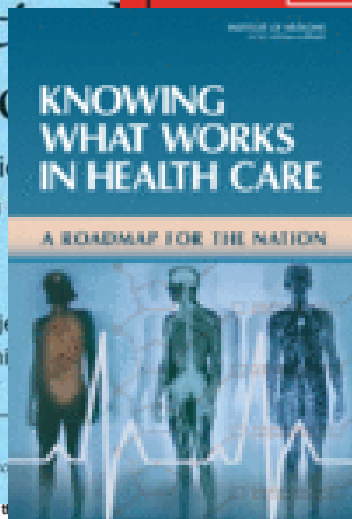
Ann Intern Med. 2008;148:956-961.

www.annals.org

JUNE 2008

REPORT TO THE CONGRESS

Reforming the Delivery System



KNOWING WHAT WORKS IN HEALTH CARE

A ROADMAP FOR THE NATION



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the logjam between innovation

n

care and Medicaid Services (CMS) posted

September/October 2006

th Foundation, Inc.

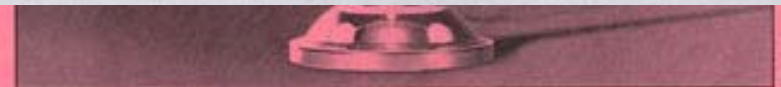
nce, Judgment, And Value In cision Making: A David Eddy

costs in medical decision making is a
ting better value for money in health care.

ne (EBM) has increasingly influenced decision making
appropriate use of EBM in decision making requires a

19 June 2007

People to People Health Foundation, Inc.

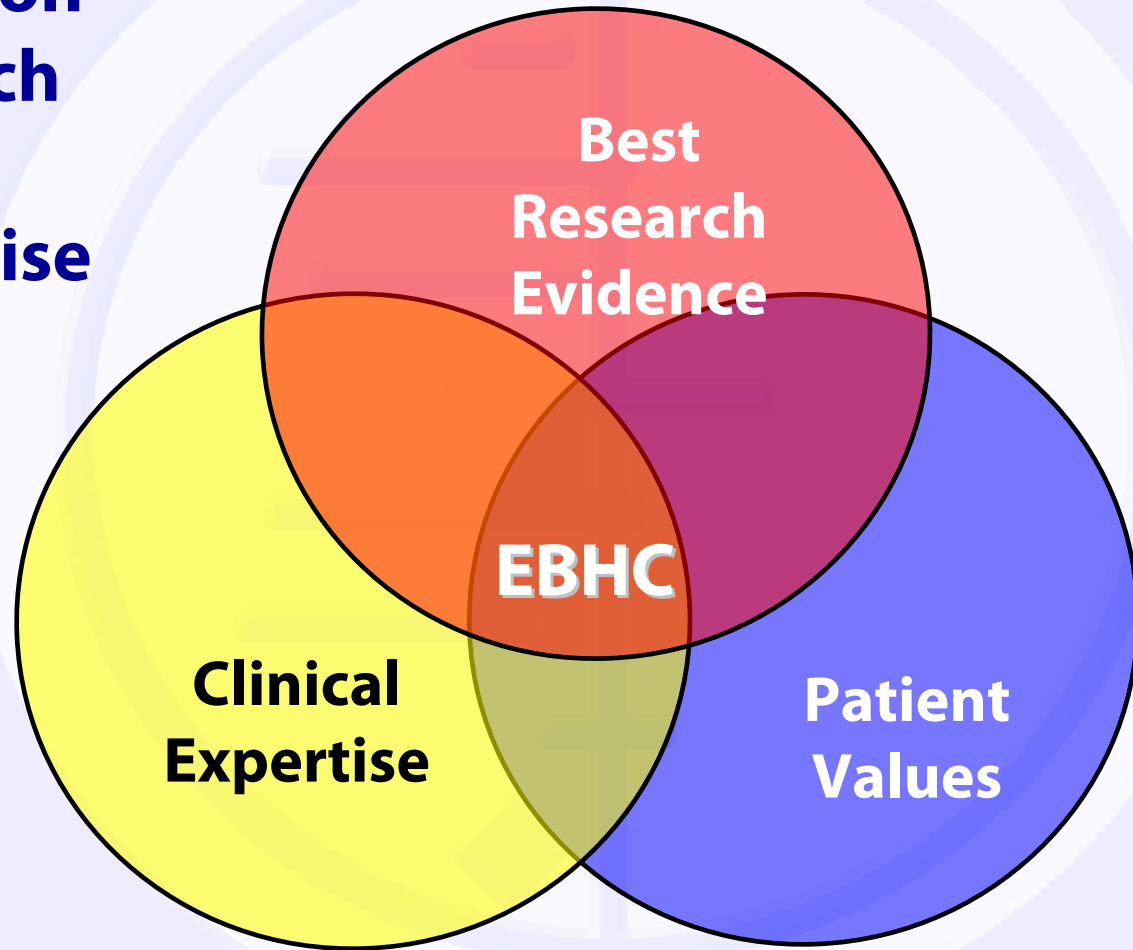


Health care is complex: Multiple questions in a single patient visit

- Example: Patient with high blood sugar
 - What risk factors does the patient have for diabetes? (*etiology*)
 - Likelihood of progression? (*prognosis*)
 - Potential benefit of weight loss? (*therapy*) *
 - Comparative benefit of weight loss vs drugs? (*therapy*) *
 - Potential harm of weight loss? Of drugs? (*harm*) *
 - Potential differences in outcome if the patient is treated before or after diabetes is detectable? (*screening* *; *prevention* *)
 - Optimal degree of sugar reduction, once treatment found to be necessary? (*Encompasses several questions*)
 - * “best” evidence is systematic review of randomized trials (comparative effectiveness)

Evidence-Based Healthcare

“The integration of best research evidence with clinical expertise and patient values.”



Ideas

The Year in

AN ENCYCLOPEDIA OF
innovations,
conceptual leaps,
harebrained schemes,
cultural tremors

&
hindsight reckonings
that made a difference in

2001



Contents, Page 16

12.9.01 In this week's issue, 80 ideas that shook the world (or at least jostled it a little) in 2001, from a newly diagnosed personality disorder that affects only celebrities (Acquired Situational Narcissism, Page 50) to a groundbreaking mapping technique that helps the police narrow the search for serial criminals (Zeroing In on a Killer, Page 110) — with stops along the way for the big ideas of the year in politics, medicine, sports, business, fashion, warfare and even breakfast cereal. This issue is the culmination of many months of research and analysis (and several moments of arbitrary editorial whimsy). The process began in the summer, when we asked experts in a wide variety of disciplines and professions for the one idea — good or bad, large or small — that was most important right now in their fields of expertise. Our writers and editors then supplemented that list with their own suggestions, often seeking out the brand-new idea at the heart of a news story — not only within events like Sept. 11, which produced reconsiderations and innovations of all kinds, but also in stories that might seem on the surface to be relatively idea-free. (What conceptual innovation explains Britney Spears?) The result is our first-ever Encyclopedia of Ideas — a 47-page compendium of great, and not-so-great, notions from the last 12 months.

Ideas

The Year in



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PAGE 58



49 Introduction

A-F

- 50 Acquired Situational Narcissism
- 52 Air Taxis
- 52 The All-Species Inventory
- 53 American Imperialism, Embraced
- 54 Announced Assassinations
- 54 Apes Have Culture, Too
- 56 Artificial Chromosomes
- 56 Attaching Good Genes to Bad Viruses
- 56 BattleSwarm
- 58 Beauty Is Back
- 58 A Better Golf Ball
- 60 Blame the Brokers
- 60 Cheating Is Part of the Game
- 60 Closing Endangered Species
- 62 Communal Bereavement
- 62 The Consciously Constructed Sexual Paradox
- 63 "Content"
- 64 Corporate Fujitsu
- 64 The Cram-Down
- 66 The Crowd



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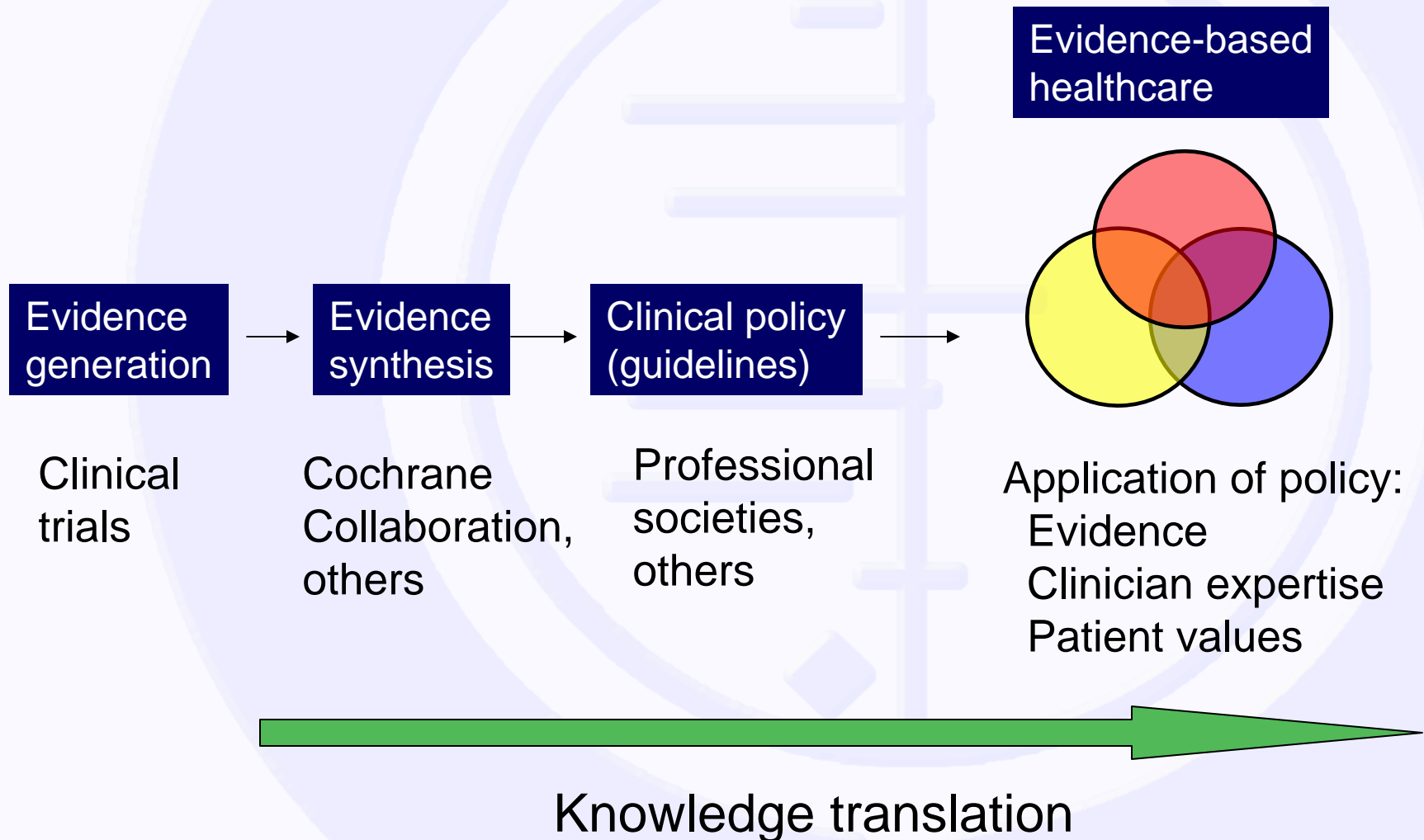
- 69 False-Identification Prevention
- 70 The Fewer the Episodes, The Better the Show
- 70 FinalScratch
- 70 Focus-Group Hypnosis
- 73 Focus on the Negative
- 73 Forget the Art — It's All About The Building

G-P

- 73 The Game That Plays You
- 74 Genetic Pollution
- 76 Global Antiretroviralism
- 76 Global-Warming Lawsuits
- 76 History Turns on the Tiniest Things
- 78 Hybrid Cars
- 79 Hygiene Is a Hazard
- 79 Infanzitized Adults
- 80 Justice Without Borders
- 80 Kustom
- 81 Laptop Composing
- 82 The Lie Detector That Scans Your Brain
- 82 The Moratorium Gambit
- 84 Nonromantic Dating
- 86 Old Masters Cheated
- 86 Can E-Mail Message Can
- 86 Would
- 86 Celebrity

68. Evidence-Based Medicine

Knowledge translation: From clinical research to practice decisions



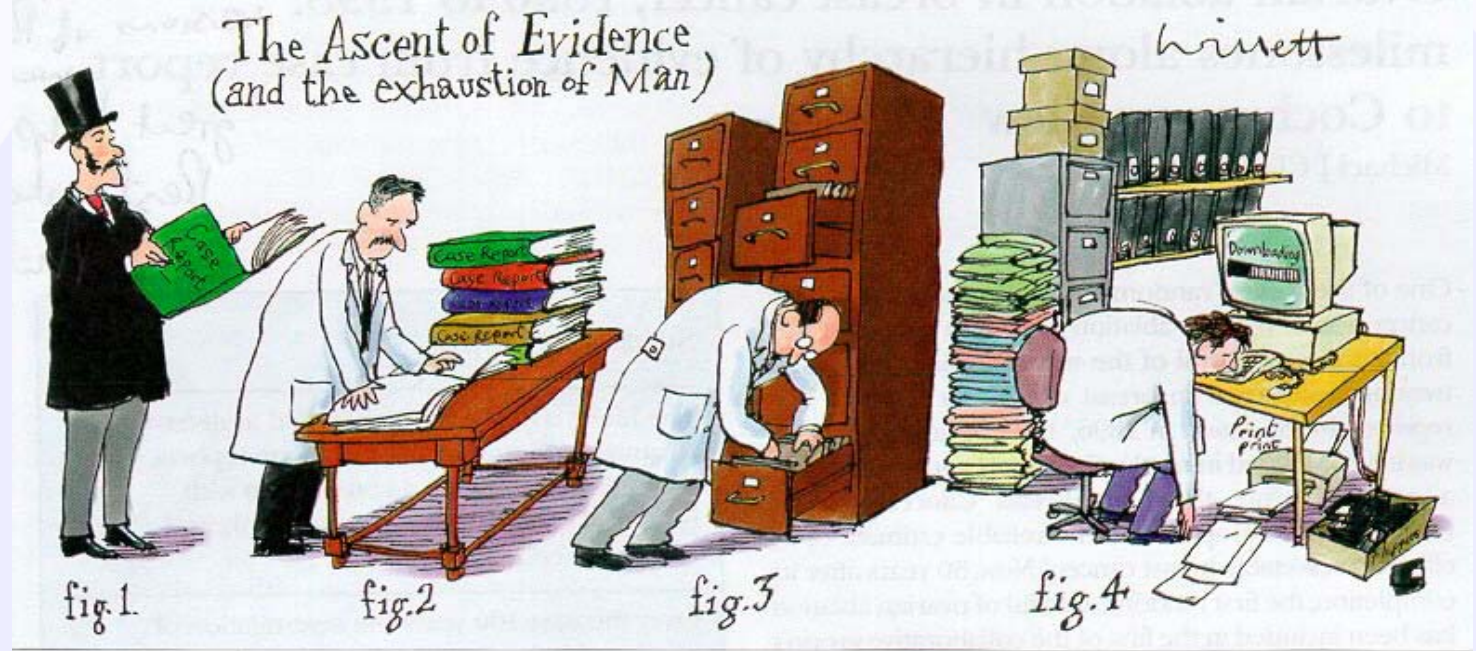
What to do?

EVIDENCE

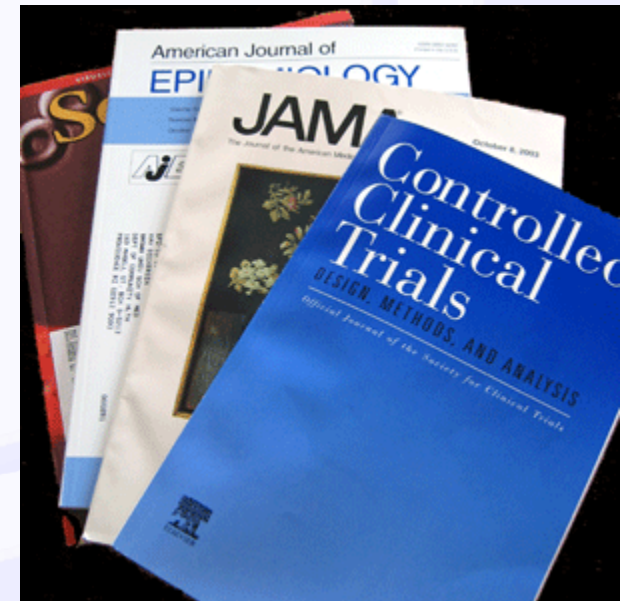


GUIDELINES

How do we get providers & patients what they need?



General clinicians wanting to keep abreast have to examine 19 articles per day, 365 days per year





Archie
Cochrane



The Cochrane Collaboration aims to help people make well-informed decisions about healthcare by preparing, maintaining and promoting the accessibility of systematic reviews of the effects of healthcare interventions



It's about collaboration

1993: 77 people from 12 countries

2008: >15,000 active contributors in 100 countries

Working together toward a common goal



The Cochrane Library

Evidence for healthcare decision-making

Visit thecochranelibrary.com >

- Published quarterly by John Wiley, Inc
- Cochrane Database of Systematic Reviews (n=5407)
- Other databases
 - Database of Abstracts of Reviews of Effectiveness(8,349)
 - CENTRAL Register of Controlled Trials (540,156)
 - Health Technology Assessments (7,486)
 - Economic Assessments (23,743)



Commissioned systematic reviews in US, 2006

Organization	# full reviews
AHRQ	
-Effective Health Care	4
-EPC	22
-USPSTF	6
Other Federal Programs	
-CMS	9
-DERP	3
-NIH Consensus Dev'p Pgm	3
Private technology assessors	
-BCBS TEC	14
-ECRI	20
-Hayes	86

Commissioned systematic reviews in US, 2006

Organization	# full reviews
Cochrane	867
AHRQ	
-Effective Health Care	4
-EPC	22
-USPSTF	6
Other Federal Pgms	
-CMS	9
-DERP	3
-NIH Consensus Dev'p Pgm	3
Private technology assessors	
-BCBS TEC	14
-ECRI	20
-Hayes	86

The Cochrane Consumer Network

The Cochrane Consumer Network contributes to every aspect of developing systematic reviews – developing the reviews, selecting important patient-centered outcomes, plain language summaries, participating in conferences, priority setting, governance



The screenshot shows the CCNet website homepage. At the top, the logo 'ccnet' is displayed in a teal and grey font, with 'CONSUMERS IN COCHRANE' underneath. Below the logo is a navigation bar with links: 'Cochrane and systematic reviews | consumers in Cochrane | resources | contact us'. A row of nine small portrait photos of diverse individuals is shown. Below the photos is the text 'A NETWORK OF' followed by the Cochrane Collaboration logo, which consists of a blue circle with a white caduceus-like symbol and the text 'THE COCHRANE COLLABORATION®'. To the right of the logo is a welcome message: 'Welcome to these web pages in which we describe how and why health consumers contribute to The Cochrane Collaboration.' Below this message are two blue links: '» About the Cochrane Consumer Network' and '» What's happening'. At the bottom left of the screenshot is a search box labeled 'search CCNet' with a magnifying glass icon.



Answering clinicians' questions

Cochrane Evidence Gap Project

- Examine practice American Academy of Ophthalmology (AAO) guidelines for primary open angle glaucoma to identify problems clinicians consider important
- Develop answerable clinical questions from guidelines
- Ask American Glaucoma Society (AGS) doctors to rank the importance of each questions to good patient care
- Identify existing evidence (clinical trials and systematic reviews) for each question
- Work with stakeholders to prioritize systematic reviews for guideline activities
- Work with funders to prioritize new research where it is needed



Examples of clinical questions from AAO guidelines and ranked by AGS

Comparative effectiveness is not just about drugs

- Does discussion of the benefits and harms of medical treatment with patients affect patient satisfaction?
- Does routine patient assessment help reduce systemic side effects, toxicity, and possible interactions of glaucoma medication?
- What is the relative effectiveness of selective laser trabeculoplasty compared with other trabeculoplasty techniques in lowering intraocular pressure in patients with open angle glaucoma?

What's in it for countries that invest in Cochrane?

- Leveraging of investment
- Efficient use of resources
- Trusted source
- Focus on high quality evidence
- Building capacity through education and training
- Finding out what works leads to informed healthcare investment
- Cochrane is global, independent and likely to survive local political pressures