European Best Practice Guidelines

James Tattersall
Background

- Process commissioned by EDTA-ERA in 1998
  - KDOQI, CARI, UK renal guidelines already published
  - Considerable guideline activity underway
- “Expert groups”
  - Transplant (2000, 2002)
  - PD (2005)
Co-operative initiatives

- K/DOQI
  - Bone metabolism 2004
  - Hypertension in CKD 2004
  - CVD in dialysis 2005
  - Anemia 2006

- KDIGO
  - Classification/ definition CKD
  - Hep C
  - Bone/mineral metabolism
Organisation facilitating guidelines

- Logistical and secretarial
  - Baxter
  - Fresenius
  - Hoffman-La Roche, Amgen, Vifor, Ortho-Biotech
- Literature search and evidence grading
  - Cochrane (HD)
  - Thomson Gardiner-Caldwell (Anaemia)
- Collection of feedback and dissemination of guidelines
  - EDTA-ERA
Funding sources

- Baxter (PD)
- Fresenius (HD)
- Hoffman-La Roche (Transplant, Anaemia)
- Amgen (Anaemia)
- Ortho Biotech (anaemia)
- Vifor (anaemia)
How guidelines relate to healthcare systems in area

- Europe is diverse
  - 30 + countries
  - Mixture of models (socialised, insurance-based)
  - Mixture of languages.
  - Differences between levels in healthcare funding.
  - ‘New’ ex-soviet empire European countries inherited broken systems.

- At least for dialysis, convergence was surprisingly rapid.

- No attempt to include cost-benefit in the guidelines
Selection and prioritisation of guideline topics

- No formal process
- Decided by the expert groups (HD, PD, Transplant)
  - Composition of group
  - Existing guidelines
  - Availability of evidence
  - Considered to be important
Selection of expert groups

- Invited by the ERA-EDTA council.
- No formal selection process
- European experts on the guideline topic
  - No more than 1-2 per country in each group.
- Initially only nephrologists
  - HD group invited one dietician, one radiologist and one surgeon for 2nd part.
Methodology

• Delegated to expert groups.
• Division into sub-groups (3-4 members)
• Formulation of important questions
• Generation of key words
• Literature search performed by Cochrane
• All literature graded by Cochrane
• All literature scored by expert group.
  • Each paper scored by at least 2 members.
  • Modified READER system (with elements of GRADE) used to score papers.
Methodology (2)

- Randomly selected papers presented to group and the scores challenged by whole group.
- Low-scoring papers automatically rejected
  - Reader score includes relevancy.
- Rejected papers retained as part of the guideline audit.
- Guidelines formulated by sub-groups.
- Guidelines presented and circulated to entire group.
- All guidelines signed-off by each group member.
Methodology (3)

- External expert reviewers selected
  - Non-nephrologists
  - Non-European
- Draft guidelines submitted to
  - Reviewers
  - ERA-EDTA membership
  - Selected international nephrology societies (ISN, ASN, CSN, CARI)
  - All European national associations.
Disseminations and implementation

- Draft guidelines, responses and proposed amendments presented at ERA-EDTA conference 2006
- Final versions published 2007
  - Published in NDT
  - ERA-EDTA website
- Impact to be assessed by QUEST projects.
  - Adequacy of HD
**strengths**

- Formal, independent selection of evidence.
- Formal, transparent scoring of papers.
- Consultation at late stages.
- Ongoing study to assess impact (QUEST).

**weaknesses**

- Commercial funding.
- Qualification/selection of expert groups.
- No patient, manager or nurse representation.
- Inconsistent style, format, terminology.
- No consideration of guideline lifecycle.
- No consultation at early stage.
  - Prioritisation.
  - Questions asked.
  - What the guidelines are trying to achieve not clearly stated.
Future outlook

- ERA-EDTA have a responsibility to maintain, update, withdraw or correct existing guidelines.
- Impact of existing guidelines to be monitored by QUEST.
- ERA-EDTA council have decided that the Association should remain involved in new guideline development.
- The form of this involvement has not yet been decided.
- First EBPG meeting January 2008
"You want proof? I'll give you proof!"