

2<sup>a</sup> Conferenza Nazionale GIMBE®  
Bologna, 9 febbraio 2007

## Il punto su EBP Core-Curriculum

Nino Cartabellotta

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## EBP core-curriculum

1. Sicily Statement on EBP
2. EU-EBM Project
3. The next steps

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## EBP core-curriculum

1. Sicily Statement on EBP

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2<sup>nd</sup> International Conference of Evidence-Based Health Care Teachers & Developers  
Sign posting the future in EBHC  
Uveggio Castle, Palermo (Italy), 10<sup>th</sup> - 11<sup>th</sup> September, 2003

Hosted by GIMBE® and CASIS 10 with institutional support of  
Aspirante S. Maria Nuova, CASP International Network, Ludwig Maximilian University, Oxford Centre for Evidence-Based Medicine, University of Bristol

EBHC 2003  
Conference Report  
- Presentations  
- Abstract book  
- Attendees  
- Social program  
- Photos  
- Thanks to...  
- Press release  
- Welcome message  
- Steering Committee

Sicily 2003

EBHC Conferences  
- 2007  
- 2005  
- 2003

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## BMC Medical Education



Debate

Open Access

### Sicily statement on evidence-based practice

Martin Dawes<sup>1,2</sup>, William Summerskill<sup>2</sup>, Paul Glasziou<sup>3</sup>,  
Antonino Cartabellotta<sup>4</sup>, Janet Martin<sup>5</sup>, Kevork Hopayian<sup>6</sup>, Franz Porzolt<sup>7</sup>,  
Amanda Burks<sup>8</sup> and James Osborne<sup>9</sup>

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## Was the publication effective?

- 2<sup>nd</sup> most highly rated in BMC Medical Education >14.000 hits
- Highly rated (900 hits in the last 30 days)
- Cited in the opening plenary at Cochrane Colloquium 2005
- 12 citation tracked using Google Scholar

DOES EVIDENCE LEAD TO EFFECTIVENESS?  
Vivian Lin  
Professor of Public Health  
La Trobe University

PROCESS OF EVIDENCE-BASED PRACTICE  
(Dawes et al, 2005 - Sicily Statement)

1. Translation of uncertainty to an answerable question
2. Systematic retrieval of best evidence available
3. Critical appraisal of evidence for validity, clinical relevance, and applicability
4. Application of results in practice
5. Evaluation of performance

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2. **EU-EBM Project**

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euebm  
European Evidence-Based Medicine Society

EU  
Education and Culture  
Leonardo da Vinci

**EBP Teaching in Europe:  
EU Leonardo da Vinci Project**

**Julie Hadley  
Khalid Khan**

The University of Birmingham  
Birmingham Women's Hospital

U B Birmingham Women's Health Care NHS TRUST

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## Overall aim of the project

- The project aims to improve transparency across the European healthcare sector through the design, development, promotion and piloting of a European qualification in EBM for individuals with a medical or related degree.

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## EBM Team

- Julie Hadley (Project manager)
- Khalid Khan (Professor of obstetrics, gynaecology and clinical epidemiology)
- Mary Publicover (Information specialist)
- James Davis (Research fellow)
- Denise Hardy (Administrator)
- Educational fellow (to be appointed)
- Collaborations
  - Public Health: Amanda Buris, Catherine Meads, Chris Hyde
  - Deanery: David Wall, Veronica Wilkie
  - CEBM - Paul Glasziou
  - GIMBE® - Nino Cartabellotta

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## Role of GIMBE®

- GIMBE® National Conferences
- GIMBE® EBHC International library
- Nino Cartabellotta – steering committee member

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## EBP core-curriculum

- Module 1. Asking Clinical Questions
- Modulo 2. Searching the Evidence
- Modulo 3. Critical appraisal of systematic reviews
- Modulo 4. Application of evidence to the patient
- Modulo 5. Implementation of evidence into practice

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## EBP core-curriculum

### Module 1. Asking Clinical Questions

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## Module 1. Aims

- To be able to define structured clinical questions as the first step in Evidence-Based Practice

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## Module 1. Learning aims

Knowledge	Skills	Attitude
Be aware of the different knowledge needs	Be able to identify knowledge needs	Prioritise problems or questions
Know about the structure of a clinical focused questions	Be able to use fluently the PICO grid to write questions	Use the PICO structure when coping with a knowledge gap in practice
Know that different types of questions are best answered by different type of studies	Be able to choose the most appropriate study type to answer a clinical question	Look always for the highest level of evidence for a given problem/question

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## EBP core-curriculum

### Module 1. Asking Clinical Questions Module 2. Searching the Evidence

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## Module 2. Searching the Evidence

- To be able to conduct an efficient search of the evidence

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## Module 2. Learning aims

Knowledge	Skills	Attitude
Be aware of the different databases and their pros and cons	Be able to select search terms and combine them using Boolean operators	Use the most efficient database in own setting
Know how to translate the PICO question into a search strategy	Be able to use fluently the PICO grid to write questions	Write the clinical questions, the strategy and the database for a given clinical problem
Know about the 5S strategy and	Be able to choose the most appropriate database	Go always to the highest 5S level and run the search.

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## EBP core-curriculum

- Module 1. Asking Clinical Questions  
 Module 2. Searching the Evidence  
**Module 3. Critical appraisal of systematic reviews**

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## Module 3. Critical appraisal of systematic reviews

- To be able to critically appraise the validity of the results of the systematic review, and to be able to interpret these results.

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### Module 3. Learning aims (a)

Knowledge	Skills	Attitude
Be aware of factors that can influence the validity of included primary articles	Have knowledge of these factors and have the capability of explaining them in common words: <ul style="list-style-type: none"> <li>• Random allocation</li> <li>• Concealment of allocation</li> <li>• Comparable groups</li> <li>• Blinded assessment of outcome</li> <li>• Loss to follow up</li> <li>• Intention to treat analysis vs per protocol analysis</li> </ul>	To realise that the results of the SR depend on the quality of the primary articles

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### Module 3. Learning aims (b)

Knowledge	Skills	Attitude
Be aware of factors that influence the validity of the SR	Have knowledge of the following factors and have the capability of explaining them in common words: <ul style="list-style-type: none"> <li>• General description and distinction of systematic review and meta-analysis.</li> <li>• Possible types of bias: selection bias, language bias, publication bias</li> <li>• Handling clinical and statistical heterogeneity of the primary studies</li> <li>• Interpretation of forest plot, 95% CI</li> </ul>	To realise that the quality of a SR also depends on the way it was conducted

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### Module 3. Learning aims (c)

Knowledge	Skills	Attitude
Be able to interpret the main results of the study and have knowledge of the uncertainty of these results	Be aware of the different types of measures of effectiveness: <ul style="list-style-type: none"> <li>• Absolute risk reduction</li> <li>• Relative risk</li> </ul> Know expressions of uncertainty: <ul style="list-style-type: none"> <li>• P-value (to glossary, not in module)</li> <li>• Confidence interval</li> </ul>	To realise that effectiveness can be expressed in different ways and that there is no absolute truth.  The participant should know how to interpret and handle uncertainty of the results.

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### Module 3. Learning aims (d)

Knowledge	Skills	Attitude
Whether the results of the SR are valid and whether the treatment worth using	Be able to handle all of the above	Be able to make a recommendation about the use of the studied intervention.

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- Module 4. Application of evidence to the patient**

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## Module 4. Application of evidence to the patient

- To familiarise with the interpretative process of assessing whether evidence is applicable in practice

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## Module 4. Learning aims

Knowledge	Skills	Attitude
Be aware of the factors that limit the validity and applicability of a systematic review: <ul style="list-style-type: none"> <li>• Limitations of the methodology of underlying studies included in a review</li> <li>• Be aware of the difference between statistical and clinical significance of the summary result</li> <li>• ...</li> </ul>	<ul style="list-style-type: none"> <li>• Be able to apply the knowledge outcomes to a review and to make considered judgements about applicability of evidence</li> <li>• To estimate the absolute treatment benefit (NNT) if the baseline risk of the patient is taken into account</li> <li>• ...</li> </ul>	<ul style="list-style-type: none"> <li>• To realise that summary results of meta-analyses (diamonds in forest plots) have limitations</li> <li>• To realise that a statistical significant result does not automatically imply that it is a useful intervention in daily clinical practice</li> <li>• To realise that relative risk (RR) is not as helpful in initialising treatment as NNT</li> <li>• ...</li> </ul>

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## Module 4. Learning aims

Knowledge	Skills	Attitude
<ul style="list-style-type: none"> <li>• Be aware of using Number needed to treat (NNT) instead of relative risk reduction when making judgements about the absolute benefit of the intervention</li> </ul>	<ul style="list-style-type: none"> <li>• Be able to compare the study patients to your own patient</li> <li>• Be able to make a judgement whether the study features are so dissimilar to your patient and intervention that the evidence cannot be applied</li> </ul>	<ul style="list-style-type: none"> <li>• To realise that eliciting patients' preferences is an important step in evidence-based patient care and that patient's and physician's preferences can often differ</li> </ul>

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## Module 5. Implementation of evidence into practice

- To understand and be able to use the principles of knowledge translation in implementing valid, applicable evidence into practice

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## Module 5. Learning aims

Knowledge	Skills	Attitude
Be aware of the possible barriers that may exist when implementing new evidence into practice	Be able to identify gaps in evidence based practices in own setting	Have an open-minded attitude towards implementing EBP by accepting the life-long learning principle
Be able to identify the mechanisms in own workplace that bring about implementation of new clinical actions	Be able to include new valid, applicable evidence into practice guidelines in own setting	Be determined to influence others in own institution to transfer valid, applicable evidence into practice
Know about strategies required to influence the implementation of new clinical practice	Be able to raise awareness and increase use of EBP in own setting	Be realistic about the level of change possible and length of time needed to achieve this

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## The next steps

### EBP core-curriculum

- traduzione e disseminazione
- verifica con altre professioni sanitarie ed eventuale adattamento
- pre-core curriculum?
- sperimentazione: "A cluster randomised controlled trial to evaluate the effectiveness of an EBP course"
- standardizzazione eventi EBP GIMBE®

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## The next steps

### 4<sup>th</sup> EBHC International Conference - 31 Oct – 4 Nov 2007

- EU-EBM final meeting
- Sicily Statement II
- Presentation of RCT results

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## The next steps

### EBHC International Library

- Coinvolgimento collaboratori
- Completamento struttura
- Lancio versione definitiva (fine 2007)
- Aggiornamento continuo
- Monitoraggio accessi
- Sperimentazioni

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