

# THE ECOSYSTEM OF EVIDENCE

Lessons learned in the pandemic era and future challenges

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International collaboration to increase efficiency of updating evidence syntheses to support guidelines for disease prevention

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#E8HC2023

# Competing Interests

#### **Financial**

none

#### Academic

 Dr Brouwers is (co)principal investigator on the AGREE II, AGREE REX tools which will be used in the proposed study









Elliott J et al. *Nature*. 2021;600(7889):383-385

# "Living" guidelines and evidence synthese

#### Becoming increasingly normative

#### Considerations

- has "livingness" resulted in evidence syntheses and guidelines of better quality? do we have the tools to appropriately assess "livingness"?
- impact on users
  - more credible? more implementable? more useful?
  - impact on cognitive load of individuals?
  - impact on the process of policy design and action?







## Questions

- 1. What is the quality of "living" evidence syntheses and guidelines?
- 2. Are existing appraisal tools appropriate to assess the quality of "livingness"?
- 3. What are the defining characteristics of "living" that need to be captured in existing quality assessment tools?

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## Methods & Results 1

Rapid scoping review - methods related articles

Can we get an early signal of unique defining features relevant to appraisal tools?

- n=9 majority (8) about evidence syntheses
- includes the 2017 Journal of Clinical Epidemiology series
- monitoring work of https://livingevidenceframework.com/en/living guidelines
- no papers outside the Cochrane or GIN communities







## Methods & Results 2

What is the quality of "living" guidelines? Are the guideline appraisal tools adequate for the job?

n=22 "living" guideline candidates

International participants to appraise with AGREE II and AGREE-REX

- mean and quartile (domain) scores
- consistency in scores

International participants to appraise the appraisal process

- were the AGREE tools appropriate?
- what concepts are missing?
- were the appraisal tools easy to apply?







### Limits

- Living evidence syntheses and guidelines relatively new, and perhaps rather dominated by recent pandemic experience, so as yet limited variability expected in scoping review
- Relatively small number of stakeholders so far (Canada, UK, Australia) but we are exploring beyond this
- From equity perspective, living evidence syntheses may not be applicable to all stakeholders (how will we consider those in lowresource settings), given the countries where stakeholders currently involved
- Work is still in progress!

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## Next Steps

### "livingness" - impact on users

- more credible? more implementable? more useful?
- impact on cognitive load of individuals?
- impact on the process of policy design and action?





# Why Should We Care?

Evidence syntheses and guidelines are not ends unto themselves

They are in service to a larger agenda

- decision making
- public health and clinical action
- health policy
- appropriate use of resources
- health equity and justice

Development strategies must be mindful of the ultimate goals

Every expectation and step comes at a price





