

beGIN to COLLABORATE

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A little about me

- Researcher (cell biologist)
- Used to love showing graphs with interesting adventures of 'my' growth factor receptor
- 2001 became guideliner @ IKNL
 (Comprehensive Cancer Center the Netherlands)
- Working on improving care by closing quality cycle
- Board member of Guidelines International Network
- Now loving to tell a very simple love story



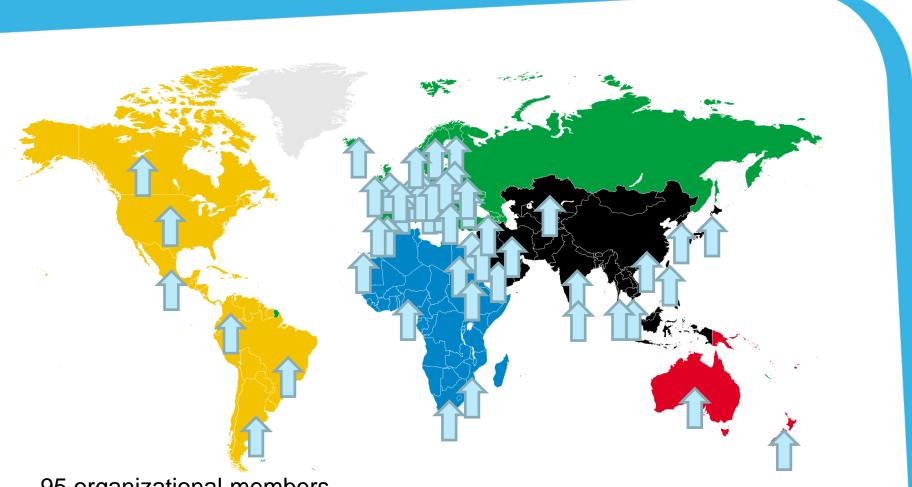
A little about G-I-N

- G-I-N = Guidelines International Network
- Aim to lead, strengthen and support collaboration in guideline development, implementation and evaluation
- Share and spread knowledge all over the world
- Network and networking





GIN (org) members all over the world



95 organizational members 125 individual members



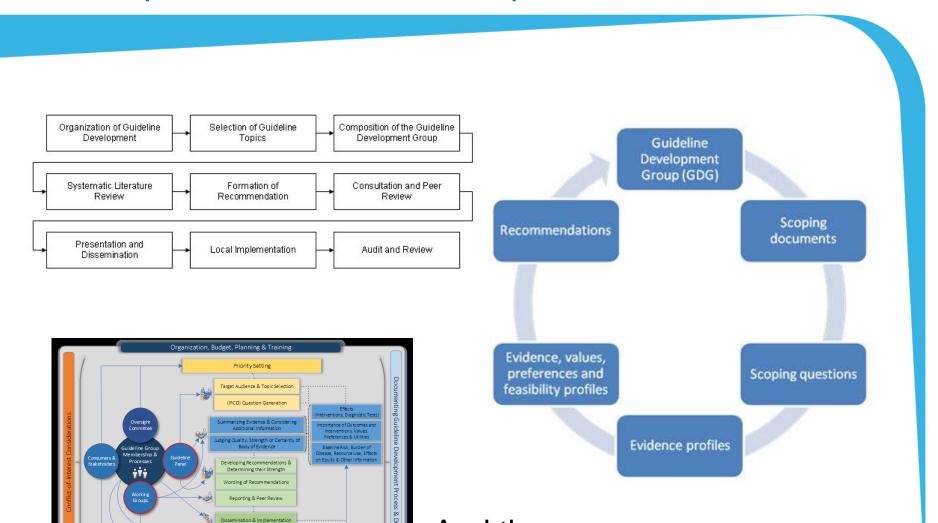
Guideline process IKNL





No surprise: that circle isn't unique

Evaluation & Use



And there are many, many more of these graphs out there!



More similarities

Not just the guideline development process is similar

- Many key questions are the same
- •We are searching the same databases
- •We come across the same literature
- •We review literature in the same way
- We present evidence in similar evidence reviews and tables
- And then we are making different recommendations (as we should)



So, here are the 2 options

1. Focus on the differences, look away, duplicate work, waste (limited) time and money

OR

2. Become friends, search for similarities, overcome differences, learn from each other, work together and improve!! This is where our **love story** starts!



First make friends

- Use international networks and meetings, like GIN, DECIDE, GRADE, AGREE, ADAPTE to get to know colleagues from around the corner or the world
- You'll find out those other guideline addicts are just like you
- You've got to like them!



Look around for more friends

- The chances you and your new friend are both going to develop the same guideline at the same time might seem small.
- But they actually are not
- You just have to know about the others
- Remember: more friends = more possibilities



Match making

- Here is where the match making starts!
- Search (inter)national dating sites: Type Status Guideline Feb 07, Netherlands Planned G-I-N library, guidelines.gov, richtlijnendatabase.nl Under 2013 Kingdom review NICE, SIGN and (many) other sections of the section - quidelines published NICE (UK) -Guideline Apr 30, United Under National Institute 2013 Kingdom review for Health and Clinical Excellence = guidelines Kitherapie und Nachsorde des Mann akarzingras der Frau tangen and DKG DE) - Germann akarzingras der Frau tangen and DKG DE) - Germann akarzingras der Frau tangen and Society Guideline Published Jul 02. Germany 2012 "most of all guidelines planned -Guideline Feb 13, Netherlands Published 2012 Cancer Centre, the Netherlands 67% Рак молочної залози (первинна та вторинна медична допомога). MoH (UA) - The Guideline Nov 23, Ukraine Published Адаптована клінічна настанова, заснована на доказах State Expert 2011 [Breast cancer (primary and secondary care). Adapted evidence-based guideline] Center, Ministry of Health, Ukraine 87% American Society of Clinical Oncology Endorsement of the Cancer Care Guideline United Published ASCO (US) -Oct 10, Ontario Practice Guideline on Adjuvant Ovarian Ablation in the Treatment American Society 2011 States of Premenopausal Women with Early Stage Invasive Breast Cancer of Clinical Oncology American Society of Clinical Oncology Clinical Practice Guideline Update on 80% ASCO (US) -Guideline Mar 01, United Published the Role of Bone-Modifying Agents in Metastatic Breast Cancer American Society 2011 States of Clinical Oncology

Your friends have negative sides, but you choose to ignore those!





methodologies

- 2. Search for collaboration possibilities
- ☐ 3. Resource implications
- ⊞ 4. Examples
 ⊞ Oncoline, how does it
- work?
- ☐ List of guidelines ☐ Frequently Asked
- Questions
- □ Colofon



| Item | IKNL | KCE | SIGN | DKG | rxemark(s) |
|--|---|---|---|--|---|
| Organisation | knowledge and quality control within the field of oncology and palliative care. There are 15 | The College of Oncology often decides on the subjects for oncologic guideline development. One to three KCE experts guide the development process, and do the search and critical appraisal. The College ultimately wants guidelines on all oncologic subjects. | Healthcare Improvement Scotland. We employ 21 staff to facilitate the development of guidelines by healthcare professionals. | Guideline Program in Oncology (GGPO) to the with the Association of the scientific medical societies | No barrier for collaboration. |
| Bottle neck analysis and search questions | Through a survey, | The College of Oncology and KCE compose the multidisciplinary guideline development group. There is | multidisciplinary guideline | The Medical Societies responsible for putang | No barrier for collaboration. It doesn't matter how the search questions are decided on. Utimately, collaboration will be |
| 440310112 | | a stakeholder consultation phase. | key questions (10 by selective update), with guidance from SIGN, these | GDG is developing key questions being the base for the search. This process is guided by GGPO. | focused on common questions. |
| Search strategy: development | tables and concept evidence report are developed by an IKNL | Once the search questions are formulated, two KCE experts develop the search strategy and selection oriteria. Sometimes, this will be outsouroed (public tender). | the PICO format. SIGN Information Officers base their search strategy on these KQs. The selection oriteria are agreed between the IO & the group. | First a search for and assessing of existing CPGs has to be performed in order to decide which KQ can be answered on the base of guideline adaptation. For remaining KQ search strategies according to PICO are developed by the GDG (IO or trained physicians) or by an external partner. | Standardisation may be needed - for example filters for different types of studies that are used to limit the number of irrelevant hits. |
| Search strategy | - At the start of most literature searches, existing | - The choice between an ADAPTE or de novo | Searches done in a hierarchical manner - | Databases: always medline, Cochrane | Differences in search strategy can influence results. |



Move closer

- Talk about barriers
- Overcome them together
- Invest (time) in harmonizing your methods (use international standards)
 - There are many international tools that can help you, you've been introduced to many of them the last days
- Agree (and confirm) on steps to be taken in the process
- It's like starting to live together, there is no need for 2 similar books, dvd's in da house (use spotify!)



First trust, then marry!

- Collaborate by:
 - Sharing key questions between you and your friend(s) (literature search, review, evidence report, evidence table)
 - Sharing guidelines between you and your friend(s)
 - Working together with your friend(s) on one guideline
- Examples:
 - Colorectal carcinoma (IKNL, KCE)
 - Testiscarcinoma (KCE, SIGN)
 - Cervical cancer (IKNL, KCE)



Nurture your babies!

- There is no use in just making guidelines
- They should have an impact:
 - These kids should make the world a little better
- So: use saved resources to improve uptake of guidelines
- Don't rest until they actually do!



We are happy!

- We learned a lot from each other
- We improved our methodologies
- We developed more key questions than without collaboration
- We saved money (~20% per guideline)
- We are more aware of limited resources and how to use them well
- We can also collaborate on evaluation studies
- Last but not least: It's nice to love and be loved!

Join?





Collaborate!











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