



PREVENTING OVERDIAGNOSIS, QUEBEC 2017 – 17th to 19th August 2017

Guideline for “Protection against Over- and Underuse of Healthcare” of the German College of General Practitioners and Family Physicians (DEGAM)

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Guideline for “Protection against Over- and Underuse of Healthcare”

Why?

“The aim of the German College of General Practitioners and Family Physicians is a high-qualitative health care, the protection of patient and society against overuse and the balance of overall benefits against harms and costs” (www.degam.de)

Guideline for “Protection against Over- and Underuse of Healthcare”

Aim of the guideline:

Development of a concise and clear compilation as well as prioritization of the most important and negative recommendations with a focus on under- and overuse in primary care

The methodological steps can be summarized as follows:

- 1) search for health services research studies
- 2) search for outcome studies regarding over- and underuse
- 3) extraction of all positive and negative recommendations from the DEGAM and NVL guidelines
- 4) prioritization- and voting process
- 5) commenting and categorization of recommendations in according to the sections screening, diagnosis, monitoring, therapy
- 6) a formal consensus process with target groups of the guideline and other scientific medical societies, e.g. public health
- 7) publication of the guideline

Priorisierungsformular zur DEGAM-Leitlinie „Brustschmerz“

Thema	Unterthema
Diagnostisches Vorgehen	3.3 KHK als Ursache des Brustschmerzes
Empfehlung 13: K.7 Empfehlen Sie dem Patienten eine Koronarangiographie nur, wenn damit ein definierter diagnostischer und/ oder therapeutischer Nutzen zu erwarten ist. (A, 1Ia)	
Evidenzgrad	T 1a
Empfehlungsgrad	A
Bewertung der Empfehlung (bitte jeweils ein Kästchen anklicken bzw. ankreuzen):	
1 = sehr niedrig 9 = sehr hoch	
1. Clearness of the recommendation	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 9
2. Relevance of the recommendation regarding overuse of healthcare	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 9
3. Relevance of the recommendation regarding underuse of healthcare	<input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 9
4. Is the problem influencable?	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input checked="" type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9
5. Is the recommendation realizable?	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input checked="" type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9
6. Level of evidence	
7. Strength of recommendation	
8. Relevance for clinical objectives	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input checked="" type="checkbox"/> 8 <input type="checkbox"/> 9
9. Relevance for public health objectives	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input checked="" type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9
10. Relevance for further social objectives	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input checked="" type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9
11. Relevance for patient safety	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input checked="" type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9

of the methodological steps 1 to 4

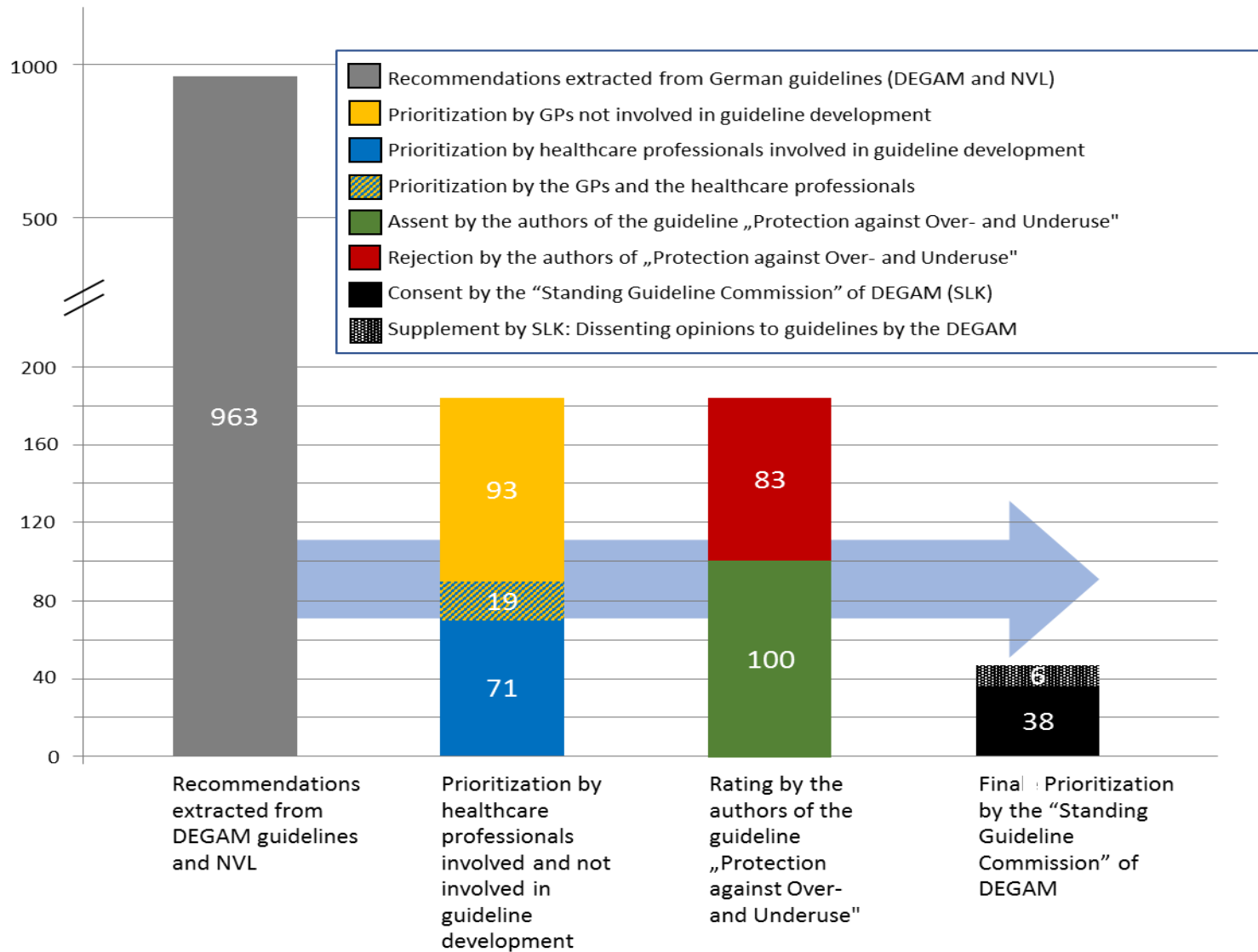
- 1) Health services research studies are very rare
- 2) Outcome evidence rare, varying patient related outcomes
- 3) 963 recommendations were extracted (328 recommendations from DEGAM and 635 recommendations from NVL guideline)
- 4) After prioritization process, finally 38 recommendations selected

Results –

Number of Extracted recommendations

	Clinical guideline	Extracted recommendations	Prioritization by healthcare professionals involved and not involved in guideline development
DEGAM	Cough	16	11
	Chest pain	24	9
	Sore throat	58	11
	Painful Urination	22	9
	Tiredness	34	16
	Neck pain	46	10
	Rhinosinusitis	15	1
	Stroke	113	39
	total	328	106
NVL	Treatment of Type 2 Diabetes mell.	39	5
	Diabetic neuropathy	120	5
	Diabetic nephropathy	63	4
	Diabetic foot	40	11
	Diabetes Patient education	32	3
	COPD	39	6
	Asthma	93	7
	Back pain	93	11
	Heart failure	116	25
	total	635	77

Results – prioritization process



- 5) systematical search for studies to update the evidence basis
- 6) commenting and categorization of recommendations in according to the sections screening, diagnosis, monitoring, therapy
- 7) a formal consensus process with target groups of the guideline and other scientific medical societies, e.g. public health
- 8) publication of the guideline

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