

"...conscientious, explicit and judicious use of the current best evidence in making decisions about the care of individual patients..." -- Sackett, DL

## PART 1: BRIEF INTRODUCTION TO EVIDENCE BASED MEDICINE AND BACKGROUND SOURCES



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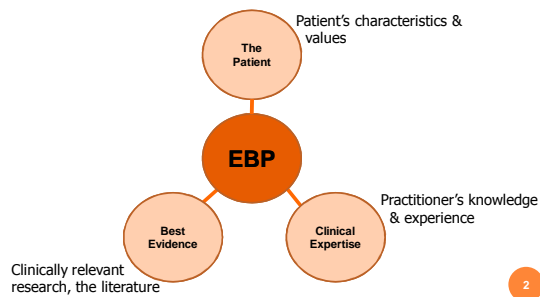
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### 3-pronged approach



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### EBM steps



1. Convert need for information into focused clinical question
2. Track down the best evidence
3. Critically appraise the evidence
4. Integrate evidence with clinical expertise and patient values
5. Evaluate the process and adjust as needed



**Evidence-based Medicine:  
How to Practice and Teach EBM**  
By Straus SE, et al  
Third Edition.  
Churchill Livingstone: Edinburgh, 2005  
0-443-07444-5, 299 pages.  
Includes CD-ROM

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## Why apply EBM?



- Education, textbooks, etc. become out of date
- Skills/experiences increase over time, current knowledge may decrease
- Increase in clinical research and literature
- Daily need for answers to questions

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## Why apply EBM?



- Clinical questions arise 3.2 times for every 10 patients seen
- Practitioners do not pursue or find answers at all or find answers with difficulty 87%
- Practitioners spend <2 minutes to find an answer to a pursued question and don't have the time to assess and validate studies

Ely JW, et al. Analysis of questions asked by family doctors regarding patient care. *BMJ*. 1999;319:358-361.

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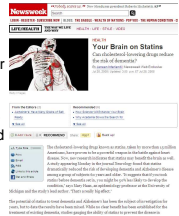
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## Scenario



Your patient is a 73 year old female in good health with normal cholesterol levels and no chronic diseases. However she comes to the clinic because she is starting to notice that she is forgetting things more often. Her husband says he hasn't noticed anything different about her, but she's fearful that she might be getting Alzheimer's. She said she read in *Newsweek* that *Lipitor* may help with the symptoms or maybe even prevent Alzheimer's disease. She wants your advice. Would this help? You recall a few patients complaining about memory problems while on statins but don't know the data on reducing the risk of AD or associated cognitive symptoms. You tell her you'll get back to her.



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## Background



- General knowledge about disorder, disease, condition
  - ✓ Manifestations
  - ✓ Etiology
  - ✓ Diagnosis
  - ✓ Treatment/prevention
  - ✓ Prognosis
  - ✓ Prevalence
  
- General knowledge about medical interventions
  - ✓ Dosing
  - ✓ Adverse effects
  - ✓ Contraindications
  - ✓ Drug interactions
  - ✓ Pharmacokinetics

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## Background sources



**MICROMEDEX** The best source of drug indication, dosage, drug interaction and side effect information, as well as poison control information. **MICROMEDEX** is a collection of many different drug databases, including Martindale, the Physician's Desk Reference (PDR), DRUGDEX, DISEASEDEX, POISONDEX, and several alternative medicine databases.

**UpToDate** A resource for practitioners interested in efficiently filling holes in their knowledge base. **UpToDate** is a very large on-line medical text that contains short, well-written discussions of medical topics. Each review article is written by an expert in the field being discussed, and is designed to provide a quick way to get up to speed.

**MD CONSULT** Allows a user to search and retrieve full-text info from top 50 clinical textbooks. In addition, **MDConsult** includes full-text journals, best-practices guidelines, patient handouts and medical articles from the lay press, as well as some original content.

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**END OF PART 1:  
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