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Clinical guidelines: benefits and limitations

Mohammad Tariqul Alam

Clinical guidelines have been developed and practiced for decades in many developed countries. The potential benefit of using guidelines is to improve the overall health outcome by providing a more consistent care to patients, improving their quality of life and reduce overall mortality and morbidity. The healthcare professionals also benefit from it by taking quality clinical decisions, especially when in doubt about how to proceed to reassure them about the appropriateness of their treatment approach. The healthcare organizations and government bodies also find clinical guidelines to be effective by providing standardized care and optimizing value for money. However, there are certain limitations in guidelines too, especially when they are flawed due to lack of proper scientific evidence, misleading or influenced by the opinions and experiences of the group developing the guideline. However, with sufficient resources, expert clinicians, systematic review of evidence and group process leaders, a flexible guideline that will be valid and usable can be developed.

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Clinical guidelines as defined by the Institute of Medicine are “systematically developed statements to assist practitioner and patient decisions about appropriate health care for specific clinical circumstances”.¹ Guidelines have been developed and practiced for decades in many developed countries in the world like USA, UK, Canada, Australia, etc. These guidelines are developed based on formulation of questions, systematic review, evidence profile (Grade), formulation of recommendations and finally external review of the guideline before dissemination.² The potential benefit of using guidelines is to improve the overall health outcome by providing a more consistent care to patients.

In Bangladesh, mental health is a very unconcerned matter. In the National Mental Health Survey conducted, it was found that 18.7% of the adult population (above 18 years) and 12.6% of children and adolescents between 7 to 17 years are suffering from mental illness in Bangladesh. However, the treatment gap is well over 90% (92.3% in adults and 94.5% in children and adolescents).³ The reasons for the treatment gap among many are lack of awareness, social stigma, high cost and limited options.⁴ It is also seen that there is a huge variation in service delivery among different regions, hospitals and clinicians. Some of these variations lead to inappropriate care, sometimes

overuse or under use of services and medication.⁵ The guidelines act as a tool for making care more consistent and efficient for closing the gap between what clinicians do and what scientific evidence supports.⁶

Recently, Bangladesh Association of Psychiatrists (BAP) has taken the initiative to develop guidelines on some important psychiatric disorders that clinicians at all levels, from general practitioners to psychiatrists face in their everyday practice. These include schizophrenia and related disorders, bipolar disorders, depression, obsessive compulsive disorder and anxiety disorders. Patients with these disorders among others often come to outpatient departments in general hospitals, emergency departments or sometimes present with symptoms of these disorders underlying other medical conditions. A clear and consistent knowledge about their management and when to refer to a psychiatrist is therefore essential.

Guidelines is of benefit to the patients in terms of receiving more consistent care, improving their quality of life by promoting interventions that proved benefit and discouraging the ineffective ones and thereby reducing overall mortality and morbidity.⁵ It also benefits the healthcare professionals in taking quality clinical decisions. The clinical guidelines offer definitive recommendations for clinicians when they are uncertain about how to proceed,

overturn their beliefs of outdated practices and apply newer ones, improve the consistency of care and reassure them about the appropriateness of their treatment approach.⁵ The healthcare systems that provide services, government bodies and various private organizations who pay for treatment also find clinical guidelines to be effective by providing standardized care and optimizing value for money by reducing outlays for hospitalization, prescription drugs and other procedures.⁷

However, as with every procedure, there are certain limitations of clinical guidelines too. The greatest danger lies in flawed guidelines. When guidelines lack proper scientific evidence, is misleading, is influenced by the opinions and experiences of the group developing the guideline, may sometimes lead to making of a flawed guideline.⁸ The biggest sufferers are the patients here as what is considered to be best for patients overall, may be inappropriate for an individual patient, or may interfere with the concept of patient's preference and shared decision making.⁹ Healthcare professionals suffer too from flawed guidelines as the quality of providing care fall when they are provided with inaccurate scientific information and clinical advice.⁵ Healthcare systems and payers may also be harmed by guidelines if following them compromises efficiency or wastes limited resources.⁵

Hence, the same people who benefit from guidelines may be harmed from them too. However, with sufficient resources, expert clinicians, systematic review of evidence and group process leaders, a flexible guideline that will be valid and usable can be developed.¹⁰ With this hope and expectation to improve mental health outcome in Bangladesh by providing better care to patients, the clinical guidelines on various psychiatric disorders will be disseminated by the Bangladesh Association of Psychiatrists. The ultimate aim is to spread awareness about mental health, detect symptoms early and provide efficient management of psychiatric illnesses all over the country in a methodical and consistent approach.

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