

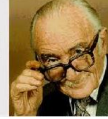
Getting a handle on EVM



The British Small Animal Veterinary Association exists to promote excellence in small animal practice through education and science.



Origins of Evidence-based Medicine



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Centre for Evidence-based Veterinary Medicine



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EBM– What it is and what it isn't

Evidence based medicine is the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients

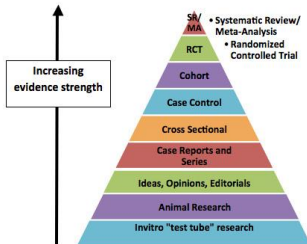
The practice of evidence based medicine means integrating individual clinical expertise with the best available external clinical evidence from systematic research.

Evidence-based veterinary medicine is the use of best relevant **evidence**, in conjunction with clinical expertise, to make the best possible **decision** about a veterinary **patient**. In addition, the circumstances of each patient, and the circumstances and values of the owner/carer must also be considered when making an evidence-based decision.

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What do we mean by "evidence" ?



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Levels of Evidence (CEBM 2011)

Question	Step 1 (Level 5) Local and current random sample surveys (or commentaries)	Step 2 (Level 4) Systematic review of surveys and other studies relating to local circumstances**	Step 3 (Level 3) Local non-random sample**	Step 4 (Level 2) Case series**	Step 5 (Level 1) N/A
Is this diagnostic or monitoring test accurate?	Systematic review of cross-sectional studies with consistently applied reference standard and blinding	Biological cross-sectional studies with consistently applied reference standard and blinding	Non-constructive studies, or studies without consistently applied reference standards**	Case-control studies, or paper or non-independent reference standards**	Mechanism based reasoning
What will happen if we do not add a therapy?	Systematic review of inception cohort studies	Reception cohort studies	Cohort study or control arm of randomized trial*	Case-series or case-control studies, or poorly quality prognostic cohort studies**	N/A
Does this intervention help? (Treatment benefits)	Systematic review of randomized trials or n-of-1 trials	Randomized trial or observational study with dramatic effect	Non-randomized controlled cohort/follow-up study**	Case-series, case-control studies, or historically controlled studies**	Mechanism based reasoning
What are the harms? (Treatment harms)	Systematic review of randomized trials, systematic review of nested case-control studies, n-of-1, or with the patient as the intervention study with dramatic effect	Individual randomized trial or (cross-sectional) observational study with dramatic effect	Non-randomized controlled cohort/follow-up study (post-marketing surveillance) provided there are sufficient numbers to rule out a harm over time. (For long term harms, the duration of follow-up must be sufficient.)**	Case-series, case-control, or historically controlled studies**	Mechanism based reasoning
What are the RARE harms? (Treatment harms)	Systematic review of randomized trials or n-of-1 trial	Randomized trial or (cross-sectional) observational study with dramatic effect	Non-randomized controlled cohort/follow-up study**	Case-series, case-control, or historically controlled studies**	Mechanism based reasoning
Is this (early detection) test worthwhile? (Screening)	Systematic review of randomized trials	Randomized trial	Non-randomized controlled cohort/follow-up study**	Case-series, case-control, or historically controlled studies**	Mechanism based reasoning

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Different types of evidence

- Empirical evidence derived from clinical and basic research
- Experiential evidence, derived in the course of practice by clinicians
- Patho-physiologic rationale
- Patient goals and values (animal welfare ; owner's wishes and circumstances)
- The circumstances in which the treatment is being carried out



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Criticisms of Evidence-based Medicine

- Interferes with professional autonomy
- Problem of application to individual patients
- Knowledge claims (empirical evidence & objective truth)
- Lack of evidence that it improves patient care

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Why am I here ?



Why should we be bothered about EVM ?

- “Veterinary surgeons & Veterinary nurses must ensure that clinical governance forms part of their professional activities”



What is Clinical Governance ?

- A framework to enable the practice to deliver good quality care
- Animal safety
- Clinical effectiveness
- Patient & Client experience
- Guidance to Code at www.rcvs.org.uk

Clinical Governance & PSS

“The Practice must have a system in place for monitoring & discussing the clinical outcome of cases & for acting on the results.”



Clinical governance ideas for practices

- Hold **practice meetings**
- Communicate information from **CPD** meetings
- Carry out '**Significant event**' reviews
- Consider what, if anything, could have been done to avoid this incident, and what changes can be made in procedure as a result



Clinical Governance ideas for practices

- Draw up **clinical guidelines /protocols** after team discussion & looking at evidence

- **Clinical Audit**
Outcome audits
Process audits

www.vetaudit.co.uk

Clinical effectiveness

- Measures how well a particular procedure achieves the desired outcome
- For practices to be clinically effective they need access to best available evidence (EVM)
- In order to discuss & draw up practice protocols
- & to monitor how effective they are by clinical audit & significant event reviews

So where do practitioners find reliable evidence ?



What are the barriers to EVM?

- We already do it
- Too difficult in practice
- Too time consuming
- Not enough (high quality) evidence
- Problems accessing evidence
- Problems of funding research (independent studies / small size)

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What do we need to practice EVM?

- Practice-based research
- Accessible evidence
- Skills to interpret evidence
- Other

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What do we need to do now?

- Individual practitioners
- Universities – research and teaching
- Veterinary organisations
- Veterinary journals
- RCVS / RCVS Trust

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