Reviewer's report

Title: What can we learn from surveying practitioners by regarding their practices?

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Reviewer: Paul Shekelle

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General

This paper describes the results of a survey in Canada regarding the use of anticonvulsant agents in patients with brain cancer, and their knowledge of existing guidelines and willingness to review guidelines. The authors report that there was a great deal of variation in intended use of this medication in two out of the three clinical scenarios, and most respondents volunteered to review a draft version of a guideline. The authors conclude with some specific statements relative to this application.

I read this article with some interest. I think the idea of asking clinicians in order to help determine whether or not to develop a practice guideline is a useful task, particularly if there are no existing data to attempt to assess the extent of potential practice variations. I think the application of this survey is straightforward, although I would like to see some additional detail presented (see below).

My main criticism of this paper is the Discussion, which I believe should be broadened to consider the use of this method in other situations. The title of this paper, namely, “What can we learn from surveying practitioners by regarding their practices?” implies that this paper is going to be about a method. Instead, the Discussion is all about the specific application with respect to this particular clinical topic. The Discussion, however, needs to be broader about the implications of the authors’ findings for other guideline application processes. I can offer several observations, which the authors may wish to incorporate if they see fit. The use of this method could help determine the need for a guideline by assessing current clinical practice if there are no existing data, either prior surveys or medical record reviews or administrative data, that establish whether or not substantial practice variation exists. Even in the presence of such prior knowledge, a survey such as this could be used to more narrowly focus the guideline being considered for development to those areas where clinical disagreement seems to be highest. Secondly, such a survey could help “prime” clinicians to then participate in the guideline review process, which, as the authors note, may be associated with increased acceptance of the guideline. A follow-on to this seems, how many of the 80% actually reviewed and responded when sent this guideline, would be helpful. Lastly, I think the authors want to state in the Discussion those areas where they think additional work is needed to try and advance this field.

In terms of the Methods of the paper, the most important one is that for any survey of scenarios and responses, I believe it is vitally important for the paper to reproduce exactly the clinical scenarios as they were presented to the respondents, along with the possible response options, since subtle changes in wording can potentially have important differences in responses. Additionally, I would like to see a little bit more information about the sampling frame to try to better understand who the respondents were, other than their specialty, and that they were “identified through a database of the practice guideline initiative.” Furthermore, since the authors had a 62% response rate, it seems as though they could compare respondents to non-respondents on the “details of their clinical practice” that are contained in this database.