Reviewer's report

Title: Strategies for updating clinical practice guidelines: a systematic review

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Reviewer: Paul G Shekelle

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this paper describes the results of a systematic review to "[assess] strategies for updating guidelines". the authors identified 8 studies, which they divided into two categories: those that assessed whether guidelines might be out of date, and those that presented strategies for updating guidelines/continuous monitoring and updating of guidelines. the authors end up concluding that "a restricted search of new studies might be sufficient to assess validity if obsolescence is the goal. however, the performance of these restricted compared to exhaustive searches for the updating of recommendations is not known."

this paper certainly deals with a popular topic - how can we keep clinical guidelines up to date? this hasn't received nearly the attention that it needs to receive if health care is going to continue to be improved via the use of guidelines. this review identifies the studies i already knew about, and a couple of other ones as well. i don't know of anything major that has been overlooked. i do think that readers will be helped, though, by some minor reframing of the information.

first off is the title - readers (at least myself as an N-of-1) thought from the title this was going to be all about strategies for updating. But it's not, it is 50% about strategies for monitoring. so i think changing the title to "strategies for monitoring and updating...." will be more informative for readers.

second is there are a number of sentences that contain an implied assumption that i don't think anyone has ever made. take the abstract conclusion, for example. "the performance of these restricted compared to exhaustive searches for the updating of recommendations is not known." i don't think anyone has ever proposed that an update of a guideline be performed based solely on a restrictive search. if someone has advocated this, then the authors should cite it. i think the only situation that the restricted search strategy has been advocated is in the assessment of whether a guideline may be out-of-date.

third is the tendency to conflate systematic reviews, and the evidence about how they can monitored for currency and how quickly they go out of date, and guidelines. certainly guidelines and systematic reviews are related, and the new IOM definition of a guideline is that it be based on a systematic review. however, although related they are not the same thing. juxtaposing the data about how quickly guidelines go out of date with how quickly systematic reviews go out of date (ie, 3 years v 2 years) may make readers think there is a disagreement
between these two when in fact systematic reviews can go out of date without materially influencing the guideline, and vice versa (in the Ottawa paper cited as the source of the "2 year" interval, one of the stopping rules was a new study showing a 25% change in the pooled estimate of effect. If this change didn't influence the decision threshold, then it could be immaterial to a guideline recommendation.) Also, the statement about "future research studies...should report the...key references (references that change the recommendations)" again illustrates this conflation. New studies don't change guideline recommendations, people change guideline recommendations, meaning that any new data has to be interpreted through the lens of the stakeholder group who developed (or is updating) the guideline, and just because 1 new study presents contradictory findings it can't be assumed that this means the guideline recommendation will necessarily change.

Lastly, in any review like this, it's always important to strive to maintain consistency in the narrative critiques of the individual studies. So, for example, our study is critiqued (correctly) as being limited by having a small number of guidelines assessed and "lack of random selection process". Yet the next three studies discussed - from Gerald Gartlehner and from Nunes and from Bosquet - assessed fewer guidelines in aggregate than the 17 we assessed, and likewise didn't use a random selection process to select guidelines, yet there is no mention of these limitations for these studies. So the authors want to avoid the appearance of randomness in their choice of strengths and limitations to mention about the individual studies.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

Loaded on behalf of author.