

Only 18% of clinical recommendations are evidence-based

Cara Livernois | June 22, 2017 | [Business Intelligence](#)



Advising patients on decision making with input based on evidence should be the minimum for primary care physicians. But according to a new [BMJ](#) study, only 18 percent of clinical recommendations are based on high-quality evidence.

The study used Essential Evidence, an online platform with evidence-based medical references, to compile 721 chapters of recommendations. Researchers then used the Strength of Recommendations Taxonomy (SORT) system to grade the recommendations as A, B or C. SORT A recommendations included consistent, high-quality evidence; SORT B included inconsistent or limited quality evidence; and SORT C included expert opinion or recommendations that rely on intermediate outcomes.

“This finding highlights the need for more research in primary care and family medicine,” said Mark Ebell, lead author on the study and professor of epidemiology at University of Georgia. “The research done in the primary care setting, which is where most outpatients are seen, is woefully underfunded and that’s part of the reason why there’s such a large number of recommendations that are not based on the highest level of evidence.”

In total, 3,251 recommendations were analyzed. Findings included the following:

- Overall, 18 percent of recommendations were graded A, 34 percent B and 49 percent were C.
- Therapy was the most common A recommendations, diagnosis were least common.
- Categories with the most A graded recommendations included pregnancy and childbirth, cardiovascular, and psychiatric care.
- The A categories least mentioned covered information on hematological, musculoskeletal and rheumatological, and poisoning and toxicity.
- 51 percent of recommendations were based on studies examining patient outcomes like morbidity, mortality, quality of life or symptom reduction.

“Filling in the gaps for evidence-based, patient-oriented primary care research should matter to patients as well as their health care providers,” said Ebell. “You would want your care to be guided by studies that have demonstrated that what the physician recommends will help you live better or longer. We should all want that kind of information to guide care.”

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