THE ALPHABET SOUP WITH EBM FLAVOUR

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Design: Systematic literature review

Literature included: The time frame for the literature search comprised the years 1975 to 2000. For the years 2001 and 2002, only results of randomized controlled trials were included. The first update will appear in 2004.

Methodology: Depending on the quality and size of the original studies, the strength of each statement was graded from A to D. Level A represents ‘Strong research-based evidence’, that is multiple, relevant and high-quality with homogenous results (e.g. two or more randomized controlled trials), or a systematic review with clearly positive results. Level B represents ‘Moderate evidence’ (e.g. one randomized controlled trial, or multiple less rigorous but adequate studies), level C indicates ‘Limited research-based evidence’ (e.g. open, non-controlled, prospective studies) and level D ‘No evidence’ (e.g. retrospective studies, or consensus reached by the group in the absence of high quality evidence).

Results: The electronic version (130 pages) contains short summaries of the 275 referenced articles. Recommendations for action were formulated based on the studies of highest quality. In this report we will discuss some features of the randomized controlled glaucoma trials (AGIS, CIGTS, CNTGS, EMGT and OHTS) that formed the basis for some of the statements and recommendations of the Finnish guidelines (e.g. in imaging, visual fields, treatment and progression). The way the trial results are reported and emphasized may affect one’s conclusions. We will also discuss whether more glaucoma care is necessarily always better.

Conclusions: Periodic review of pertinent peer reviewed literature including assessment of its quality can be useful in formulating treatment guidelines.

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