The German Project to Develop Guidelines for General Practice: Results and Experiences

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Topics

- Project and methodology
- Current state of development
- Experiences in development
- Implementation activities, barriers
- Conclusion
Aims of the project

- Decision in 1998 to develop guidelines for general practice on ca. 20 important topics
- Publicly funded in the take-off period 1999-2002
- Mixed authoring teams (researchers, practising GPs), support by departments of GP
- The DEGAM guideline project was the first effort in Germany to develop evidence-based clinical guidelines among all medical specialties
- Ownership of guidelines in Germany important: competitive structure of ambulatory care
DEGAM Guidelines

Methods

*Ten-step schedule of development, implementation, and dissemination, including:*

- Evidence-based drafts on complaints/health problems
- Peer-review and consensus finding within the DEGAM-Working Party (ca. 55 members, mixed)
- Implementation modules/tools for GPs, patients and practice staff
- Piloting by GP-panel review and practice testing (ca. 20 practices)
- Attempt to consent with specialist societies + consumers
- Publication in scientific journal, print and internet version
DEGAM Guidelines

Completed guidelines (2004)

- Dysuria (UTI)
- Fatigue
- Low back pain
- Risk/prevention of falls
- Urinary incontinence (July 04) expected in 2004/05:
  - Caregiving
  - Rhinosinusitis
  - Earache (Otitis)
  - Headache
- Stroke
- Cardiovascular prevention
- Chronic heart failure
- Sore throat
- Cough (acute, chron.)
DEGAM Guidelines

Experiences in development

● Monodisciplinary development
● ... takes much more time than expected
  » voluntary, (enthusiastic?) freelancing activity, personal relation
  » limited possibility to adapt international guidelines
  » Difficulty to find evidence for practical problems
● Support by academic departments/projects is essential
● Resources for pilot testing
● Guideline development has increased considerably the scientific potential in German GP
Difficulty of implementation

- Professional strength
- Guideline acceptance
- Public awareness / patient expectations
- Implementation in practice
- ... to change professional behavior

vocational training, CME
professional information, tools
Media, Info-prescription, patient letters,
tools, computer, practice staff (case management)
integration in QM-activity, PRG-work
DEGAM Guidelines

Barriers of implementation
Experiences from implementation projects

<table>
<thead>
<tr>
<th>Sequence of behaviour change</th>
<th>Knowledge</th>
<th>Attitudes</th>
<th>Behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Lack of familiarity</strong></td>
<td>• with GLs generally • volume • lack of practice tools</td>
<td>• lack of agreement (specific guidel.) • dissent • lack of trust in EbM and independence</td>
<td>• Lack of outcome expectation • outcome orientat. • quality improvem.</td>
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<tr>
<td><strong>Lack of awareness</strong></td>
<td>• accessibility • dissemination • information</td>
<td>• 'cookbook' med. • individuality • rigidity • fear of control • impracticability</td>
<td>• Lack of self-efficacy • practice management • convincing patients</td>
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<tr>
<td><strong>Lack of agreement</strong></td>
<td>• with GLs generally • volume • lack of practice tools</td>
<td>• lack of agreement (guidel. in general) • dissent • lack of trust in EbM and independence</td>
<td>• External barriers • Patients • (alleged) preferences • unawareness • consult. style</td>
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<td>• Guidelines • quality • specialist recommendations</td>
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<td></td>
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<td>• External • incentives • lack of time • lack of 'quality culture'</td>
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*adapted from Cabana et al. 'Why don't physicians follow clinical practice guidelines', JAMA 1999
Conclusions

- Development and implementation of guidelines is a formative - but difficult - process in general practice.
- External barriers are mostly first mentioned as an obstacle,
- ... but we know that lack of information and external barriers react in weakening a professional attitude.
- It seems to be important to encourage professional attitudes and self-reliance in implementing guidelines.
- In reverse: working with adequate guidelines is essential for proper (under-)standing as a GP.
DEGAM-guidelines and additional information are accessible at:
www.degam-leitlinien.de

Thank you!