



Clinical Practice Guidelines & Clinical Decision Support Tools (WP7)

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Work package members

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Diana Vitali 🙀 ePAG representative

SOD ITALIA – Italian organization for septo optic dysplasia and other neuroendocrine disorders (Roma, Italy)



Main goal of WP 7





Main goal:

- ☐ To develop EndoERN clinical practice guidelines and decision-making tools for identified subject areas. Focus on knowledge gaps and guideline needs.
- ☐ Key considerations include:
 - Covering the transition from pediatric to adult endocrinology
 - Ensuring alignment with EndoERN's core objectives
 - Patient perspectives and needs will be central to the guideline development process,
 - Patients have an active involvement.
- The impact of the guidelines will be assessed, and methodological support provided.
- ☐ Review and update endorsed / appraised guidelines (MTG's will be asked to provide info)







Clinical Practice Guideline A Nordenström and others

Pubertal induction: a clinical guideline

186:6

G9-G49

Pubertal induction and transition to adult sex hormone replacement in patients with congenital pituitary or gonadal reproductive hormone deficiency: an Endo-ERN clinical practice guideline

A Nordenström¹, S F Ahmed², E van den Akker³, J Blair⁴, M Bonomi¹, C Brachet³, L H A Broersen³, H L Claahsen-van der Grinten³, A B Dessens^{10,11}, A Gawlik¹², C H Gravholt¹³,¹⁴, A Juul¹⁵,¹⁶, C Krausz¹³, T Raivio¹³, A Smyth¹³, P Touraine¹, D Vitali²² and O M Dekkers¹, 2³,²²²



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European Journal of Endocrinology, 2024, 190, G1–G14 https://doi.org/10.1093/ejendo/lvae041 Advance access publication 4 April 2024 Clinical Practice Guideline



Familial hyperaldosteronism: an European Reference Network on Rare Endocrine Conditions clinical practice guideline

Paolo Mulatero,^{1,*}® Ute I. Scholl,² Carlos E. Fardella,³ Evangelia Charmandari,^{4,5}
Andrzej Januszewicz,⁶ Martin Reincke,⁷® Celso E. Gomez-Sanchez,^{8,9} Michael Stowasser,¹⁰® and Olaf M. Dekkers¹¹®



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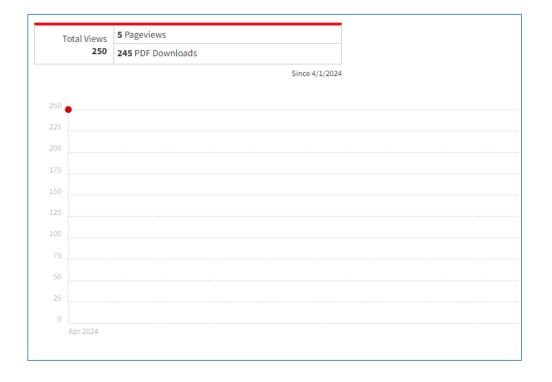






Familial hyperaldosteronism: an European Reference Network on Rare Endocrine Conditions clinical practice guideline

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Standard Operating Procedure (SOP)





- ☐ Standard Operating Procedure (SOP) to guide:
 - The process of topic selection, topics proposed by MTG's and voting procedure
 - Selection of guideline expert committee, 9-12 members with specific criteria minimum: chair, 5 experts, ePAG, methodology experts, incl representation prof society
 - Guideline Process, incl literature review and methodology
 - Finalize withing 12-18 months
 - **Dissemination** in collaboration with Work Package 2 and 6.

☐ Patient involvement in different subject areas is tailored to specific needs and existing European-level structures.



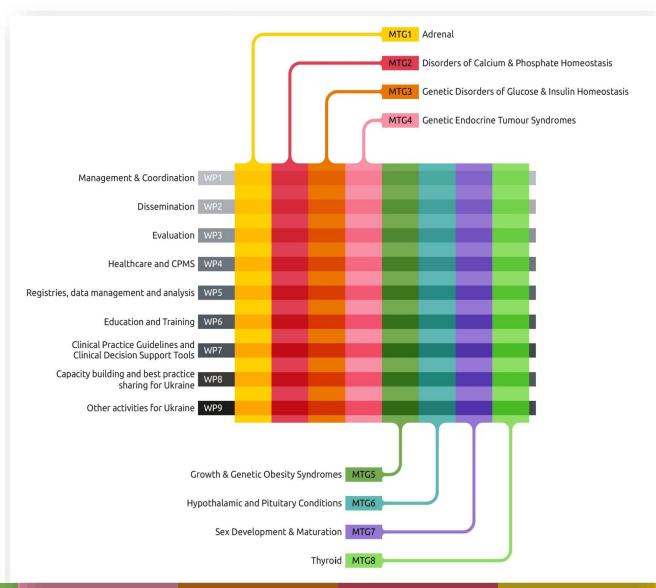
Collaboration

Work Packages 2 and 6
Vital for:

- Education & Training
- Guideline dissemination
- Development of infographics for clear communication of key guideline messages.
- ☐ Standardized presentation of guidelines will be pursued to enhance recognition
 - Publication in EJE









Guideline publications and plan





AIM:

Publish at least one guideline per year in years 2-4

2nd Guideline on Familial Hyperaldosteronism, Published April 2024, presented ECE May 2024 **3rd Guideline on Transition in collaboration with MTG 6**, initiated

- ☐ Patient involvement is a priority in the guideline development process.
 - Efforts will be made to:
 - Create lay versions, to facilitate patient access and understanding.
 - Translate guidelines into multiple languages and
- ☐ Dissemination strategies will include:
 - CME credits, downloadable slide decks etc



Assessing guideline impact





- ☐ Efforts will be made to assess the impact of the guidelines on clinical practice.
 - ☐ Beyond downloads / citations
- ☐ Feedback from clinicians on the usefulness of the guidelines, focusing on specific aspects of impact.
- ☐ Collaboration with WP5, using the registry along with MTG's, for this assessment.
 - ☐ Measures of impact
 - ☐ Pre-thinking of variables to include



Challenges to discuss

☐ New topics





☐ Patient representatives ☐ Disease specific knowledge needed ☐ National vs European patient organisations ('Disappointed that this is not payed for') ☐ Guidelines for rare diseases ☐ (next slide) ☐ Measuring impact ☐ Upfront thinking ☐ Measure of changing practice / impact Questionnaires ☐ Assessing changing practice in databases (WP6)



Guidelines for rare diseases





□ Evidence base
 □ Data are limited
 □ FH: disease rare, but many patients covered in the literature
 □ Expert opinion vs guidelines
 □ Always relevant to search for evidence
 □ Both guidelines and consensus statements require consenus (Djulbegovic JAMA 2019)
 □ Topic related

☐ Transition in puberty: what type of evidence to search for?

