

Experience of Mexican National Health System in the Development of Clinical Practice Guidelines

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Background

Clinical practice guidelines (CPGs) are proven tools that have made health care decisions more rational and decreased the gap between clinical action and valid medical information. Their implementation reduces bias in the health practitioner's decisions and contributes to improve the quality of clinical care, strengthens the patient position and that of the health professional in the care process, and improves effective communication among different decision makers.

The National Center for Health Technology Excellence, carried out an exhaustive search in literature of elements contributing to standardize the medical care services focused in diagnosis, treatment and prevention of the main pathologies afflicting the Mexican population and that would also allow the optimal planning of resources.

The National Center for Health Technology Excellence is the authority to establish in consensus with the institutions of the Mexican National Health System (MNHS) the methodology to elaborate the CPGs, promote and coordinate their integration and compilation, with the purpose of orienting the making of decisions of the persons rendering and using health services.

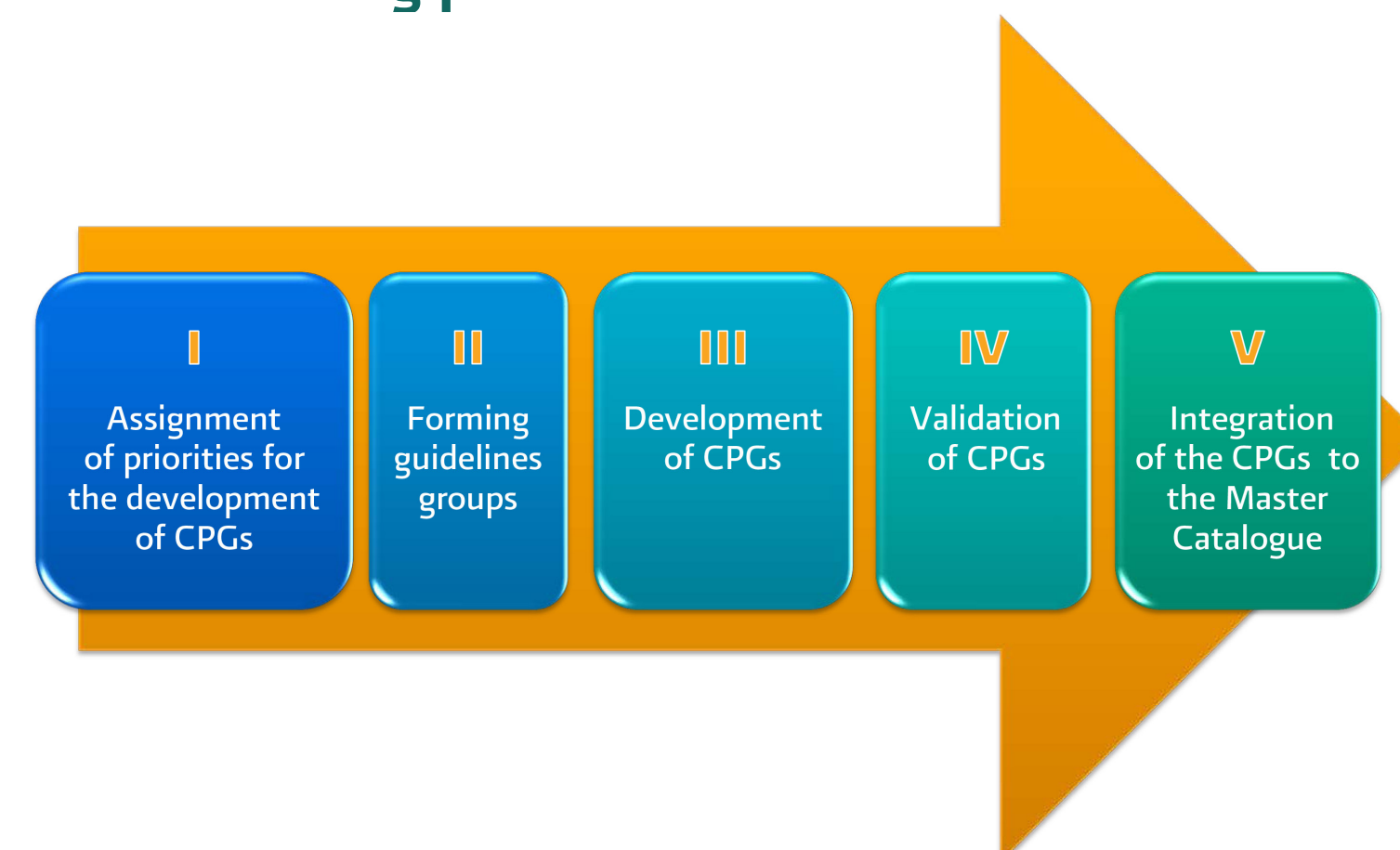
Objectives

The aim of the present poster is showing health professionals the strategies implemented by MNHS on the development of CPGs, whose purpose is to improve the quality of clinical care, the safety of our patients, as well as the optimal planning and management of resources.

Methods

Institutions of MNHS came to an agreement about the methodology for developing CPGs supported by scientific evidence.

It has the following phases:



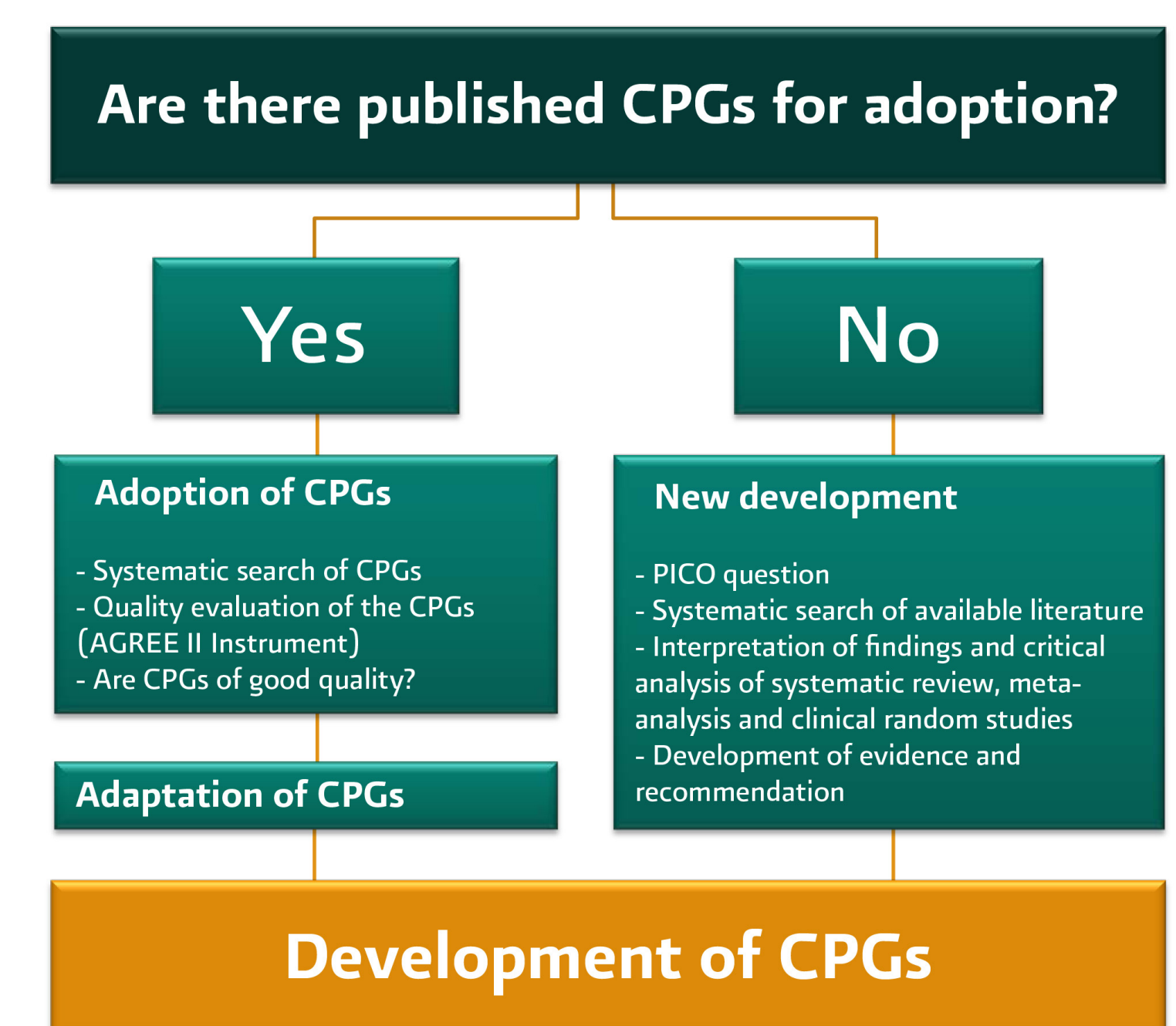
Assignment of priorities for CPGs development in the order of the following illnesses or interventions:

- Diseases and interventions of the Universal Catalogue of Health Services with greater incidence and prevalence in the country, related with hospitalization, emergency care and general surgery.
- Diseases or interventions that generally are not of high incidence, but represent a catastrophic expense for the family or the patient (Protection Fund Against Catastrophic Expenses).
- Diseases affecting children under 5 (Medical Insurance for a New Generation program).
- Conditions or diseases associated with a high frequency of sequels or adverse events and that are part of the government programs and of institutional or national priorities.
- Groups of diseases related by diagnosis and care costs.

Methodology of CPGs development

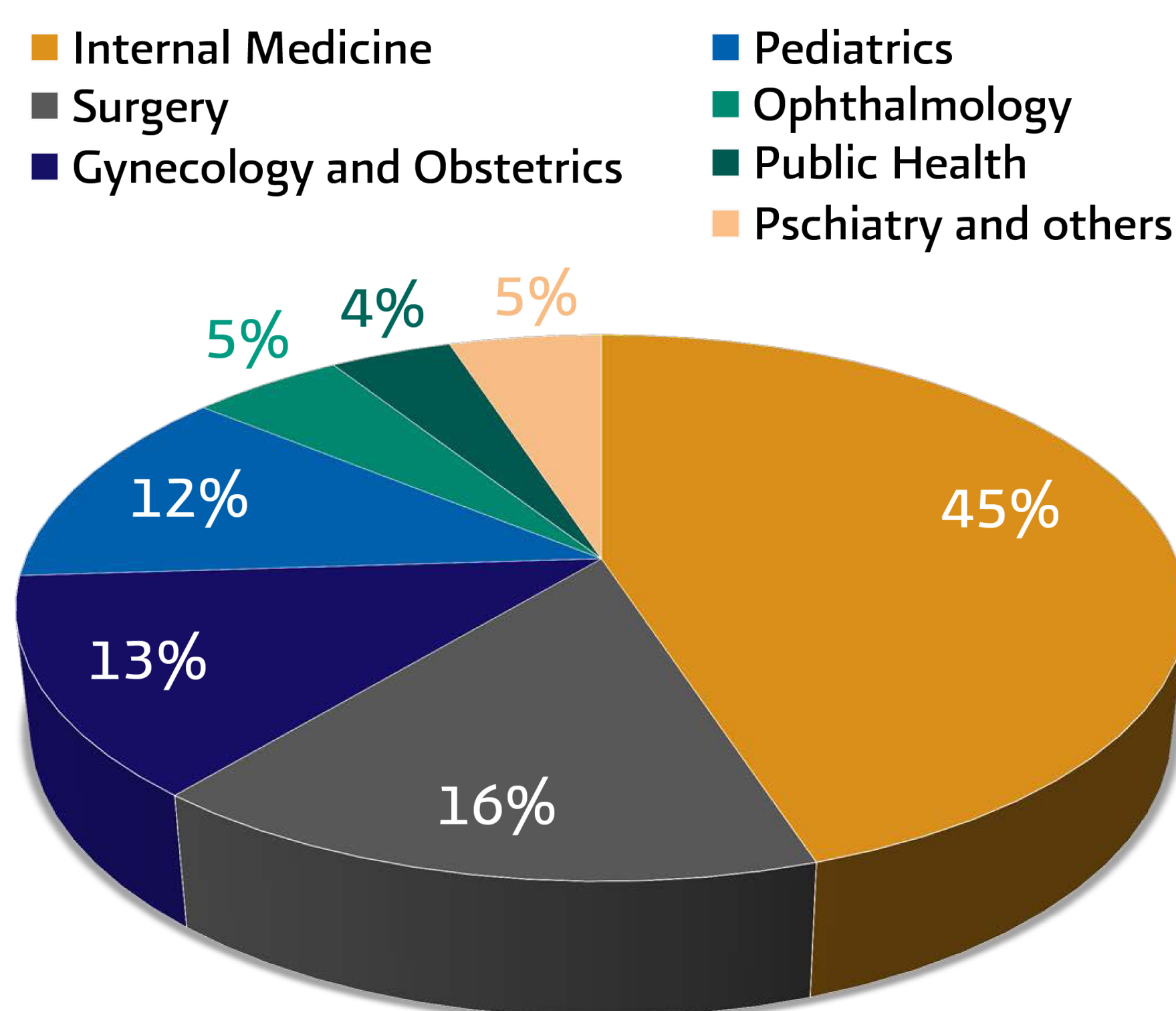
The CPGs development is about the adoption and adaptation process. The process consists of implementing a search of CPGs already published at national or international level capable of answering the scopes and objectives of the topic set forward. Afterwards they are submitted to validation through the AGREE II Instrument (Appraisal of Guidelines for Research and Evaluation), and if they have acceptable quality then they are adopted and adapted to our population.

In case no guides are located to be used as reference, the expert group develops a new guide through systematic searches of available literature and the interpretation of findings related to the population previously defined and through critical analysis of systematic review, meta-analysis and random clinical studies.



Results

The Master Catalogue of CPGs includes 422 published and distributed guides on the following medical specializations: 45% of Internal Medicine, 16% of Surgery, 13% of Gynecology and Obstetrics, 12% of Pediatrics, 5% of Ophthalmology, 4% of Public Health, and 5% of Psychiatry, Physical Medicine and Rehabilitation, Oral Health, and Otolaryngology.



Of the guides now in process, 80% are distributed in the following fields: Internal Medicine, Pediatrics, Surgery, Traumatology and Orthopedics and Gynecology and Obstetrics.

Discussion

Mexico formally started the production of CPGs in 2007, and published the first 115 guidelines in 2008. Compared with six centers of development of guidelines from North America, Europe and Oceania, Mexico is the newest country working on this.

	Master Catalogue of Clinical Practice Guidelines	National System of Health	Canadian Medical Association	Institute for Clinical System Improvement	Scottish Intercollegiate Guidelines Network	New Zealand Guidelines Group	National Health Research Council
Country	MEXICO	SPAIN	CANADA	UNITED STATES	SCOTLAND	NEW ZEALAND	AUSTRALIA
Guidelines	422	431	201	57	125	77	88
Start year of production	2008	2006	2003	2007	1995	1995	1990
Production per year	106	86	25	14	8	5	4

This is the result of effective combination of inter-institutional coordination and cooperation efforts in the MNHS, of political wills and of personal commitment from 1,876 authors shown in the forming of teams of multiple disciplines including general physicians, medical specialists and academicians, and also among experts of different institutions and of different states of the country.



The integration of the Master Catalogue of CPGs has been a priority for the National Development Plan and for the Health Sector Program in Mexico. And it must be mentioned that a fundamental condition for its success has been the commitment, the will and coordination of the people responsible for making decisions on health public policies.

Implications for guideline developers/users

The implementation of CPGs decreases the bias on the health professional decisions and contributes to improve the quality of care and security of patients.