LEVELS OF EVIDENCE FOR CLINICAL PRACTICE

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Evidence-based healthcare consists of a focused and systematic investigation, using tools from epidemiology, statistics, computing and clinical experience and skill, combined with patient preferences, to support decision-making in the clinical practice.

The scientific work that underlies the clinical setting is permeated by the evaluation of evidence and methodological guidelines. To that end, therapeutic interventions and trials need to be properly founded and evaluated. Therapy demands a base to be built on the highest level of scientific evidence.

Usually, the level of evidence is relevant to the design and nature of the study, emphasizing the systematic reviews of randomized controlled trials as the highest level of scientific evidence. Notably, systematic reviews considered durable and useful are those carried out by the Cochrane Collaboration, for constantly incorporating new evidence.

The search for evidence has been guided by their relevance and quality, thus underscoring the importance of knowing the structures and techniques for working in databases and organizing information on specific subjects. Thus, it is key to consider the importance of the clinical aspect to define the appropriate study design in order to answer to the research question.

Searching the databases requires expertise in the elaboration of clear, accurate and objective research strategies, identifying the relevant evidence. Above all, an appropriate literature search needs to detect the highest possible number of relevant publications (high sensitivity) and the lowest possible number of irrelevant publications (high specificity). The indexing process for cataloguing articles is responsible for facilitating research in these bases, each with its own listing of journals.

The review of articles found is another factor to be considered. This analysis must aim to detect studies with a sound methodology and control of bias, thus justifying the evidence levels for implementation in the clinical practice.

There are different rating systems for classifying the level of evidence in the scientific literature. In Brazil, some publications focusing on therapy, prevention and etiology/risk adapted their systems to the Oxford Centre for Evidence-Based Medicine – Levels of Evidence (2009), since it has a higher level of severity when evaluating the scientific production, established from outcomes with real meaning to the patient and society.

Knowledge on the evidence classification hierarchy can support the clinical practice of health professionals, fostering the integration of clinical experience to the best available evidence, considering safety in the interventions and ethics in all actions undertaken.

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REFERENCES

1. Drummond JP, Silva E, Katz M, Caumo W, Rother ET. Fundamentos da medicina baseada em evidências: teoria e prática. São Paulo: Atheneu; 2014.
2. Greenhalgh T. Como ler artigos científicos: fundamentos da medicina baseada em evidências. Porto Alegre: Artmed; 2008.
3. Stevens, KR. The impact of evidence-based practice in nursing and the next big ideas. Online J Issues in Nursing [Internet]. 2013 [cited 2015 Set 17];18(2):4-14. Available from: http://nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol-18-2013/No2-May-2013/Impact-of-Evidence-Based-Practice.