

Berücksichtigung kontextueller Aspekte bei der Übertragung von Evidenz

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IQWiG-Herbst-Symposium, Köln, 25.11.2017

Thesen

1. Kontext ist mehr als „Gedöns“
2. Die Zuordnung zu Intervention oder Kontext ist (oft) eine Frage der Perspektive
3. Es gibt tragfähige Methoden kontextuelle Aspekte bei der Übertragung von Evidenz zu berücksichtigen





1. Kontext ist mehr als „Gedöns“



Cluster-RCT: Malariakontrolle mit einem Insektenrepellent



Intervention



Kontrolle



Vergleich → **Ergebnis**



Kroeger A, Gerhardus A, Kruger G, Mancheno M, Pesse K. The contribution of repellent soap to malaria control. Am J Trop Med Hyg. 1997;56(5):580-4.

Cluster-RCT: Malariakontrolle mit einem Insektenrepellent



Intervention



Vergleich

→ **Ergebnis**



Kontrolle



Cluster-RCT: Malariakontrolle mit einem Insektenrepellent



Intervention



Kontrolle

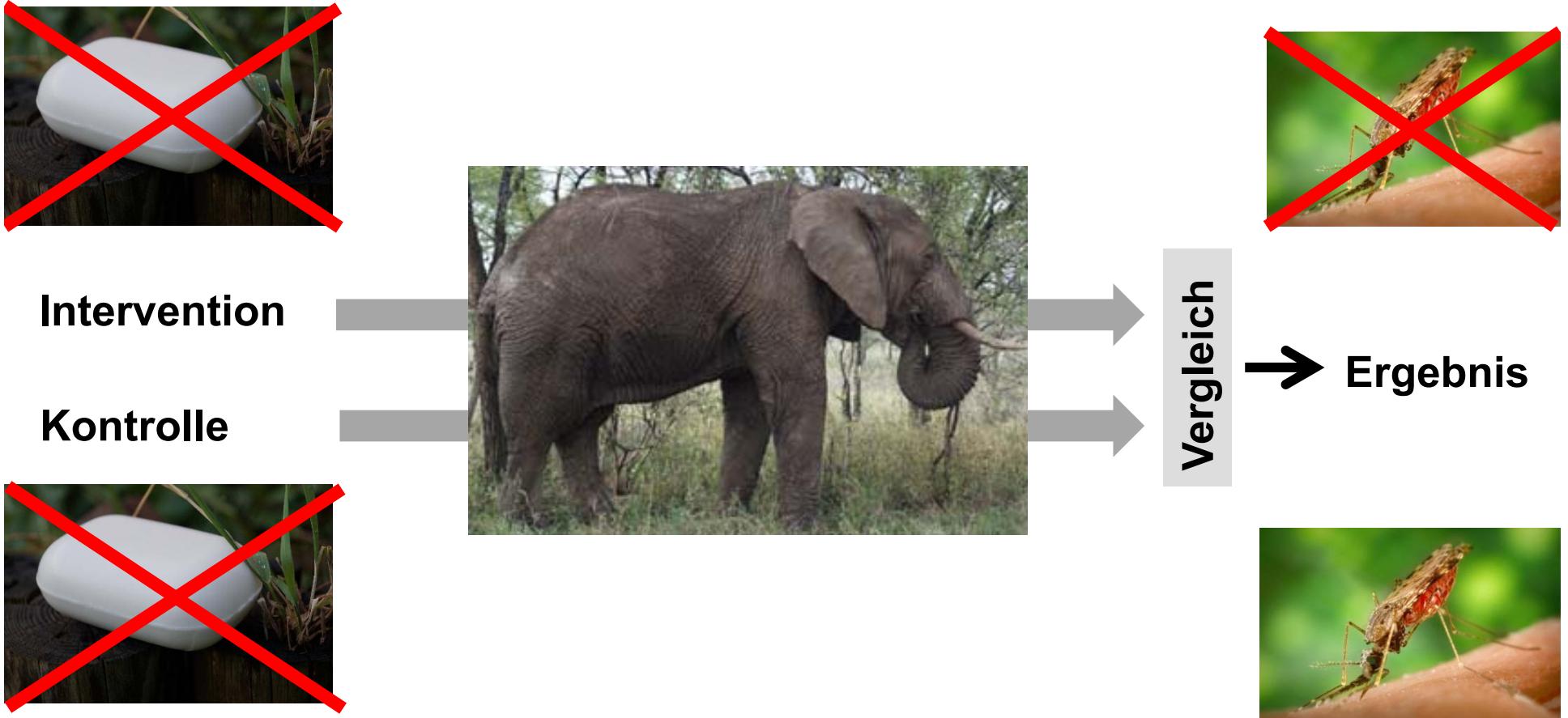


Vergleich

→ **Ergebnis**

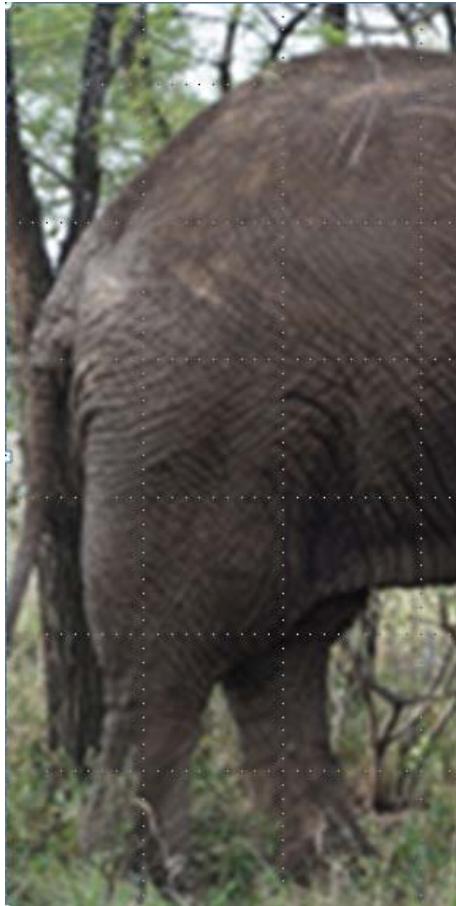


„The elephant in the room“ – Kontext

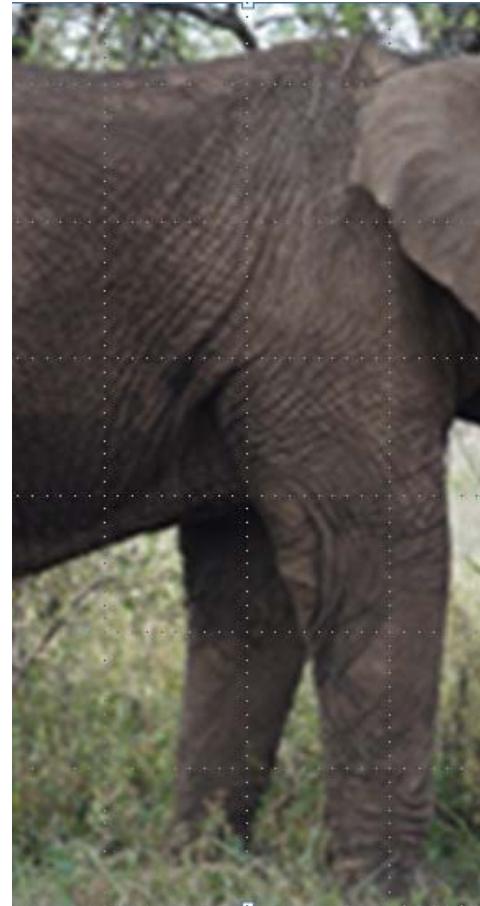


Kontext \triangleq

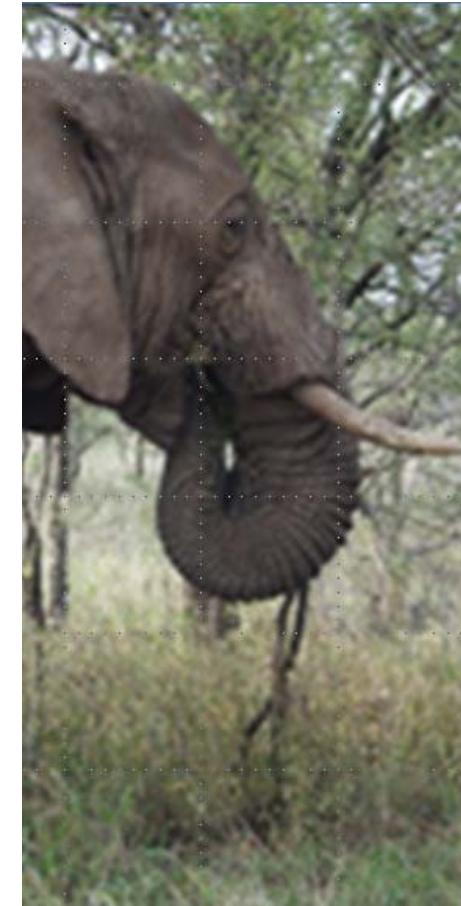
Kontext



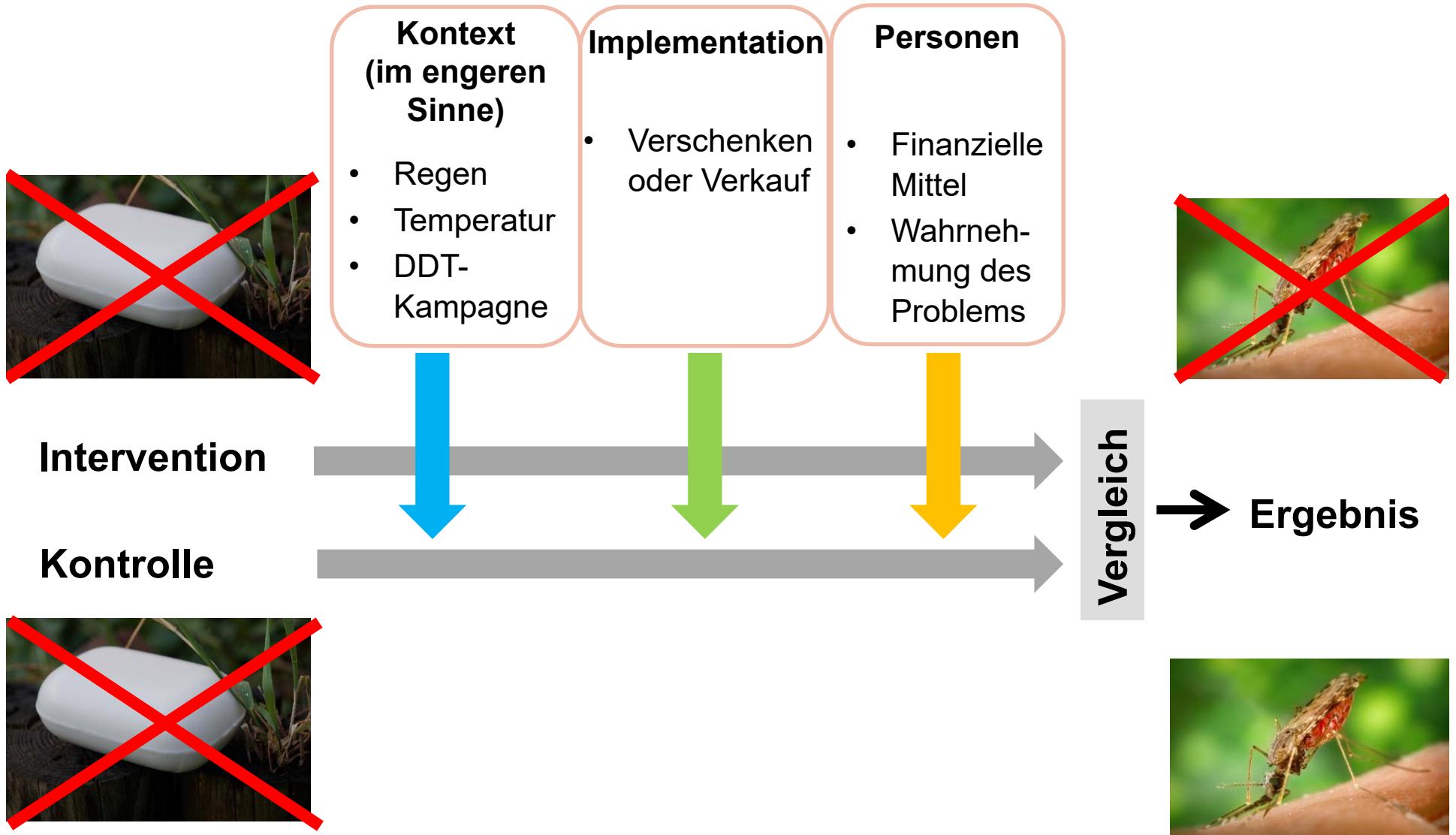
Implementation



Personen



„The elephant in the room“ – Kontext



2. Die Zuordnung zu Intervention oder Kontext ist (oft) eine Frage der Perspektive







Don't let Blood Pressure Guidelines Raise Yours

By H. Gilbert Welch, Op-Ed contributor, New York Times

<https://www.nytimes.com/2017/11/15/opinion/blood-pressure-guidelines.html>

New York Times,
15. Nov. 2017

Blood pressure is an exceptionally volatile biologic variable — blood pressure changes in response to activity, stress and your surroundings, like being in a doctor's office. In short, how it is measured matters. For the study, blood pressure was taken as an average of three measurements during an office visit while the patient was seated and after five minutes of quiet rest with no staff members in the room.

When was the last time your doctor measured your blood pressure that way? While this may be an ideal way to measure it, that's not what happens in most doctors' offices. A blood pressure of 130 in the Sprint study may be equivalent to a blood pressure of 140, even 150, in a busy clinic. A national goal of 130 as measured in actual practice may lead many to be overmedicated — making their blood pressures too low.

3. Methoden zur Berücksichtigung kontextueller Aspekte bei der Übertragung von Evidenz



Kontext und Übertragung: Schritte

1. Ein Modell der Intervention konstruieren
(„Wirkmodell“, „Logic Model“, „Theoretisches Modell“, etc.)
2. Kontextfaktoren (ggf. mit Hilfe von Frameworks) identifizieren
3. Priorisieren/Reduzieren
4. Bewerten

Kontext und Übertragung: Schritte

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3 Beispiele

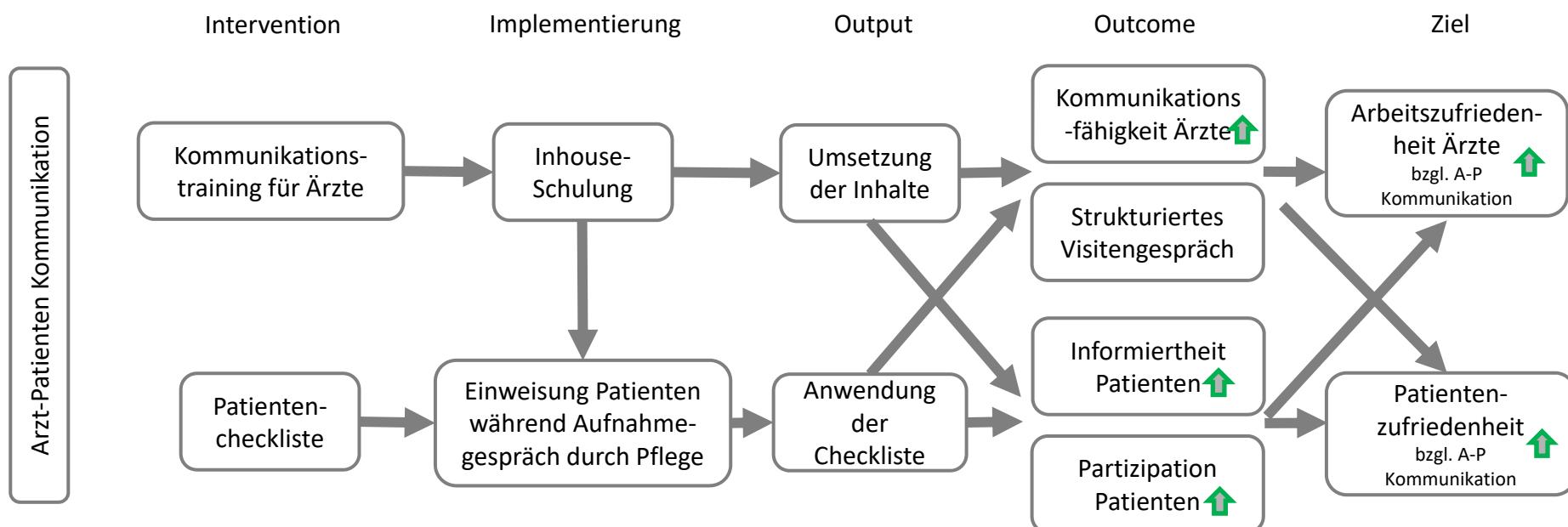


Beispiel 1: Projekt Modellvisite

Christin Chairsell, Ella Reich, Rieke Barbek, Vera Strohmann

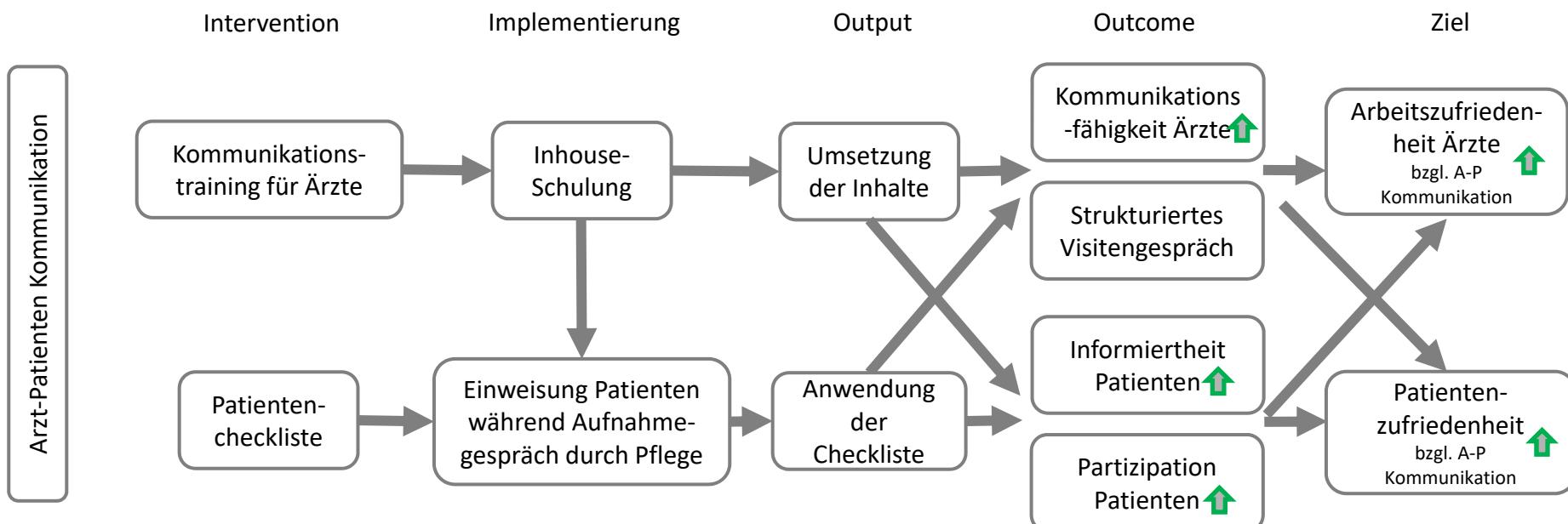
Master Public Health – Gesundheitsversorgung, -ökonomie und –management
Universität Bremen

Projekt Modellvisite: Verbesserung der Arzt-Patienten-Kommunikation während des Visitengespräches



Methoden zur Identifikation von relevanten Kontextfaktoren

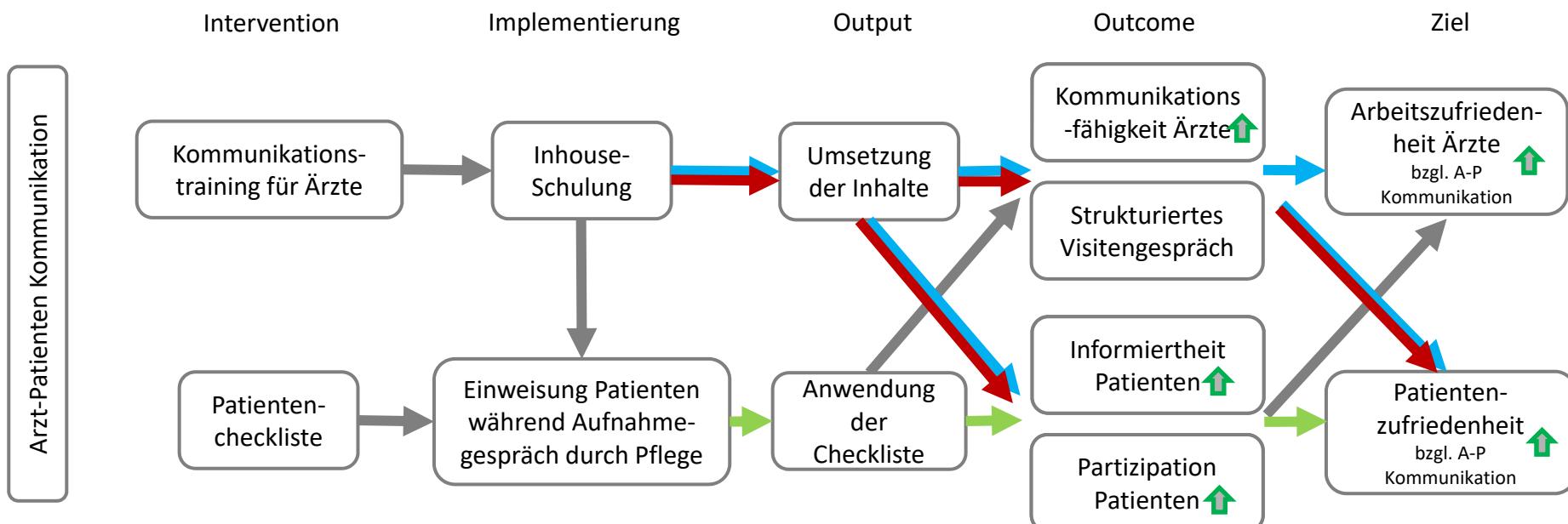
- Teilnehmende Beobachtung
- Interviews mit Expert_innen



Integration der Kontextfaktoren in das Wirkmodell

Kontext/ Einflussfaktoren:

- Motivation Ärzte
- Zeitmangel Ärzte
- Ausmaß Erkrankung Patienten



Beispiel 2: INTEGRATE-HTA

<http://www.integrate-hta.eu/>



Welcome

INTEGRATE-HTA is an innovative, three-year FP7 project that ended in December 2015. Using palliative care as a case study, this project aimed to develop concepts and methods that enable a patient-centred, comprehensive assessment of complex health technologies.

The methodological guidances, the executive summary of the case study, an introduction to the guidances as well as the poster presentations on each of these guidances are now available in the [downloads section](#) of this website.



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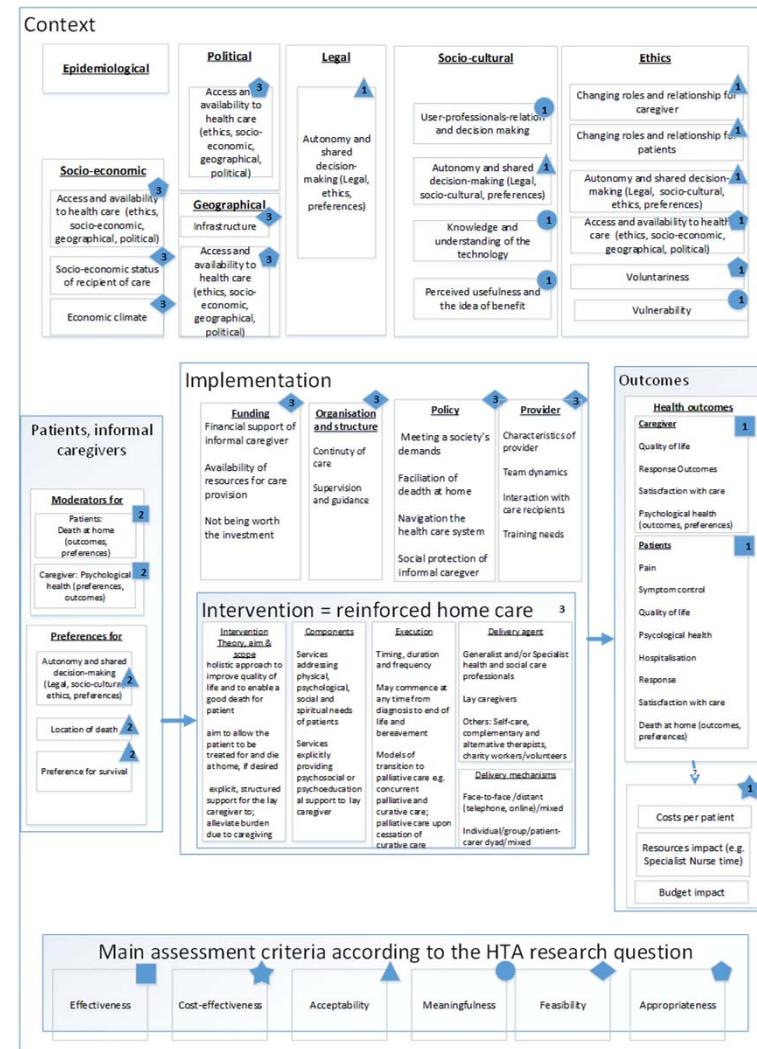
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Gert Jan van der Wilt
Philip Wahlster
Vivienne (Viv)Walker
Sue Ward
Kim Weistra

This project is co-funded by the European Union under the Seventh Framework Programme (Grant Agreement No. 306141)



Stakeholder advisory panels

Stakeholder advisory panels unterstützen die Entwicklung eines „system-based logic model“



Effektmoderatoren und Präferenzen

Anleitung zur Identifikation und kritischen Bewertung von Studien zu
Moderatoren von Interventionseffekten und von Patientenpräferenzen

Guidance for the assessment
of treatment moderation
and patients' preferences

4

*EDITORS: Ralph van Hoorn, Marcia Tummers,
Wietske Kievit, Gert Jan van der Wilt*

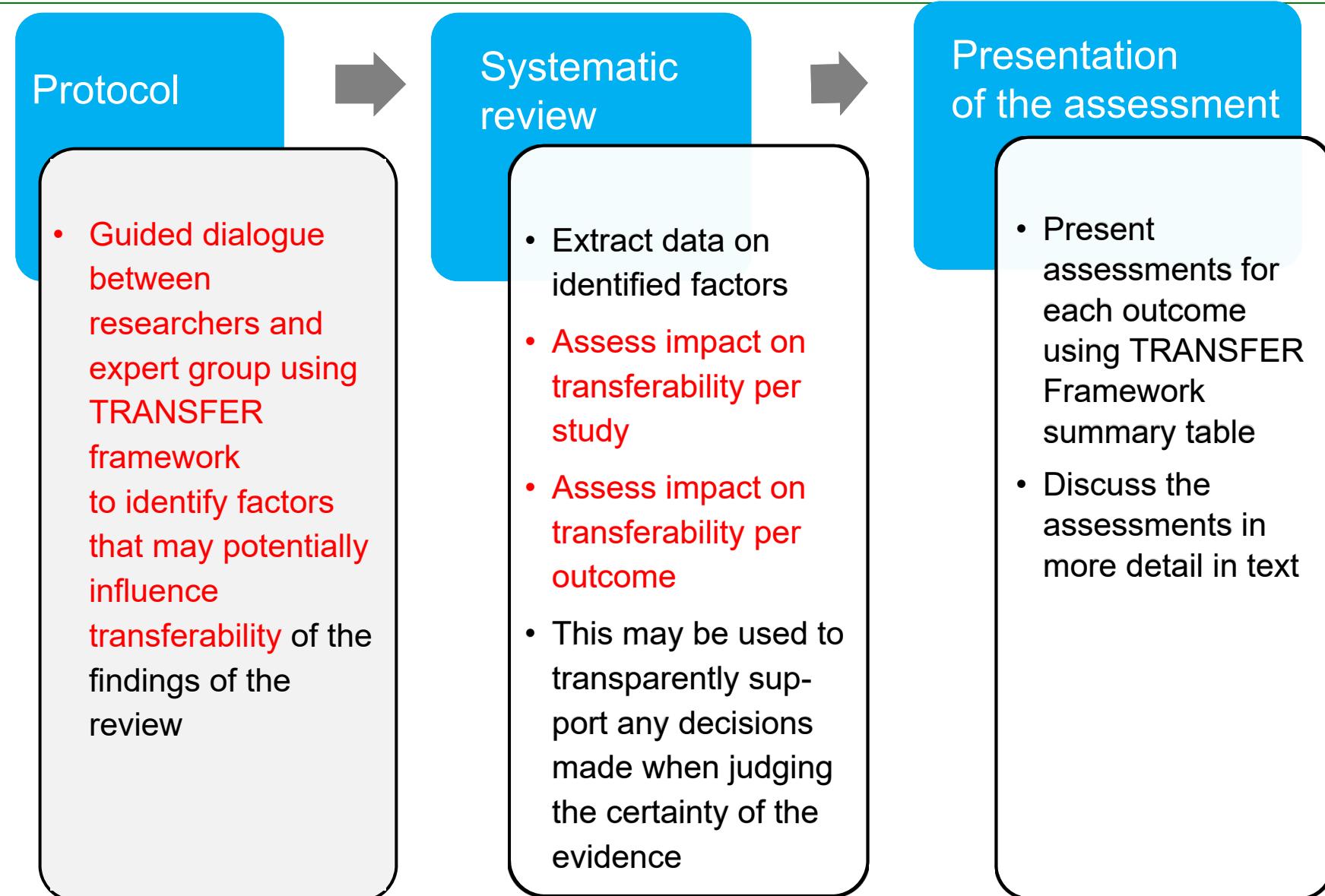


Beispiel 3: TRANSFER-Framework

Heather Menzies Munthe-Kaas, Heidi Nøkleby

Knowledge Centre for the Health Services
Norwegian Institute of Public Health

Transfer Framework



Frameworks zur Bewertung der Übertragbarkeit



ELSEVIER

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EVALUATING THE RELEVANCE, GENERALIZATION, AND APPLICABILITY OF RESEARCH

Issues in External Validation
and Translation Methodology

LAWRENCE W. GREEN

University of California at San Francisco

RUSSELL E. GLASGOW

Kaiser Permanente Colorado

JOURNAL OF CLINICAL EPIDEMIOLOGY 64 (2011) 1198–1207

Cambon et al. BMC Public Health 2013, 13:1184
<http://www.biomedcentral.com/1471-2458/13/1184>



Open Access

RESEARCH ARTICLE

A tool to analyze the transferability of health promotion interventions

Linda Cambon^{1*}, Laetitia Minary^{1,2,3}, Valery Ridde⁴ and François Alla^{1,2,3}

Abstract

Background: Health promotion interventions are often complex and not easily transferable from one setting to

Assessing applicability when comparing medical interventions: AHRQ and the Effective Health Care Program

David Atkins^a, Stephanie M. Chang^{b,*}, Gerald Gartlehner^c, David I.
Evelyn P. Whitlock^e, Elise Berliner^b, David Matchar^{f,g}

^aDepartment of Veterans Affairs, Office of Research and Development, Health Services Research and Development,

^bCenter for Outcomes and Evidence, Agency for Healthcare Research and Quality, Rockville, MD,

Health Promotion International, Vol. 21 No. 1
doi:10.1093/heapro/dai025
Advance access publication 25 October 2005

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How do we know when research from one setting can be useful in another? A review of external validity, applicability and transferability frameworks

Helen Burchett, Muriah Umoquit¹, Mark Dobrow¹

Department of Global Health and Development, Faculty of Public Health and Policy, London School of Hygiene and Tropical
UK; ¹Cancer Services and Policy Research Unit, Cancer Care Ontario, Toronto, Canada

Applicability and transferability of intervention in evidence-based public health

SHUHONG WANG, JOHN R. MOSS and JANET E. HILLER

Department of Public Health, University of Adelaide, Adelaide, Australia

SUMMARY

The context in which public health programmes operate

approach to bridging this gap. A list of attributes that

THE NEW YORK TIMES BESTSELLER

THINKING,
FAST AND SLOW



DANIEL
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"[A] masterpiece . . . This is one of the greatest and most engaging collections of insights into the human mind I have read." —WILLIAM EASTERLY, *Financial Times*

International Journal of Technology Assessment in Health Care (2017) Schwerpunktheft zu integrierter Bewertung von komplexen Interventionen

International Journal of Technology Assessment in Health Care, 0:0 (2017), Page 1 of 3.

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doi:10.1017/S026442317001040

Editorial

HOW TO AVOID GIVING THE RIGHT ANSWERS TO THE WRONG QUESTIONS: THE NEED FOR INTEGRATED ASSESSMENTS OF COMPLEX HEALTH TECHNOLOGIES

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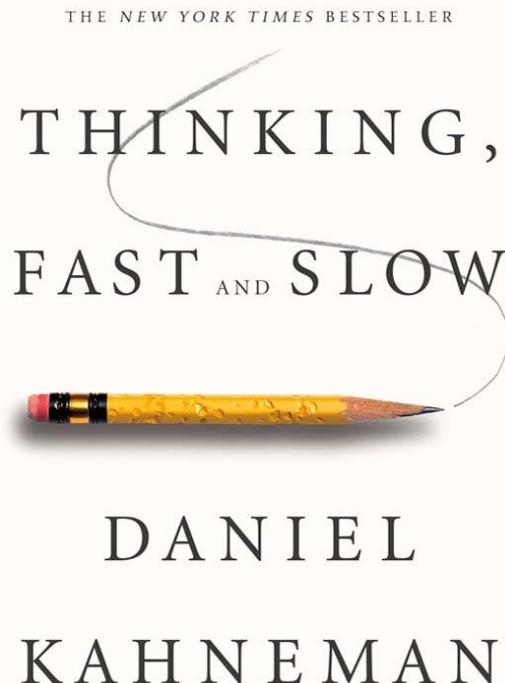
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Health technologies are becoming increasingly complex and contemporary health technology assessment (HTA) is only

political winner?" (1). As a result, we often end up answering the questions that we can answer however these are not necessarily



"[A] masterpiece . . . This is one of the greatest and most engaging collections of insights into the human mind I have read." —WILLIAM EASTERLY, *Financial Times*

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Bildnachweis und Kontakt



James Gathany, CDC. <https://phil.cdc.gov/details.aspx?pid=7861>



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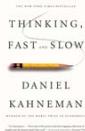
<https://pixabay.com/de/k%C3%A4sefondue-fondue-essen-k%C3%A4se-2803840/>



Integrated health technology assessment for evaluating complex technologies (INTEGRATE-HTA)



Palliative Care Advisory Group, University of Sheffield



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