

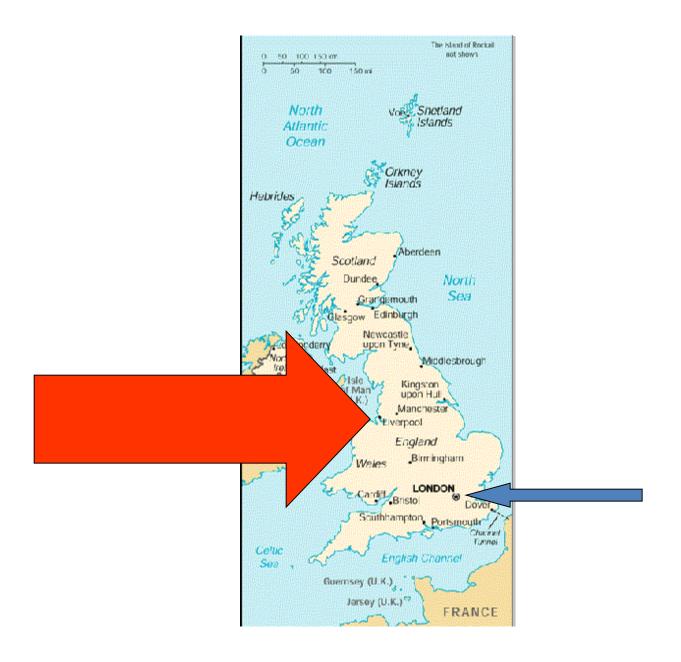
INTRODUCTION TO GUIDELINES

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What are guidelines?

Statements that help make decisions in particular circumstances

a small but nevertheless a real difference in age incidence in the two sexes.

(To be concluded in next week's issue)

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EPISIOTOMY

BY

J. D. S. FLEW, M.D., M.R.C.O.G.

During the training of the medical student and pupil midwife in the labour ward much stress is laid upon the prevention of perineal tears, and to a great extent their skill at delivery is judged on the results obtained by them in this direction. Whilst agreeing that, in general, an intact perineum is better than a torn one, this statement needs qualification and consideration before it can pass unchallenged. Lubin (1932) has stated: "It is presupposed that a patient without a lacerated perineum fares better than her more unfortunate sister in so far as puerperal morbidity, comfort, future pathology, and disability are concerned." The damage incurred by the patient in order to maintain the integrity of her perineum must be considered.

Disadvantages of a Torn Perineum

What are the possible disadvantages of a torn perineum?

620 Nov. 11, 1944

Results

In 135 consecutive primigravid private patients delivered per vaginam I find the following results:

Normal delivery without episiotomy, 63 cases	46.7%
Episiotomy performed in 72 cases	53.3%
Of the episiotomy cases 52 had a normal delivery, and there-	
fore the total normal delivery rate (115 cases in 135) is	81.1%
Among the remainder, all of which had episiotomy performed,	10 (0)
there were 17 forceps deliveries	12.6%
The remaining 3 cases comprised 2 extended breech and 1	•
perforation of a hydrocephalic head	

The relatively low forceps rate for primigravidae in private practice I attribute almost entirely to the episiotomy rate of









Days of the Empire

Telling people what is best for them

An example of Appropriate Health Education for the Punjab

From the British Colonial Service



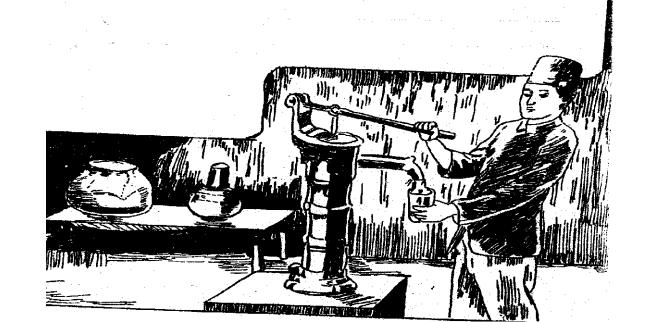
DRINK PLENTY OF PURE WATER HALF AN HOUF BEFORE, OR ONE HOUR AFTER MEALS RATHER THAN WITH MEALS.

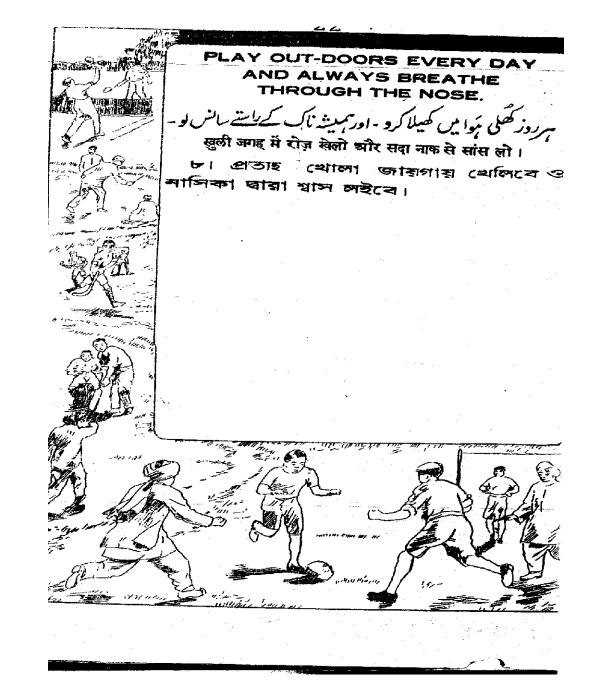
صاف پانی خوب ہو۔ گرکھالے کے ساتھ پاتی پینے سے بہتر ہے کہ کھالے سے

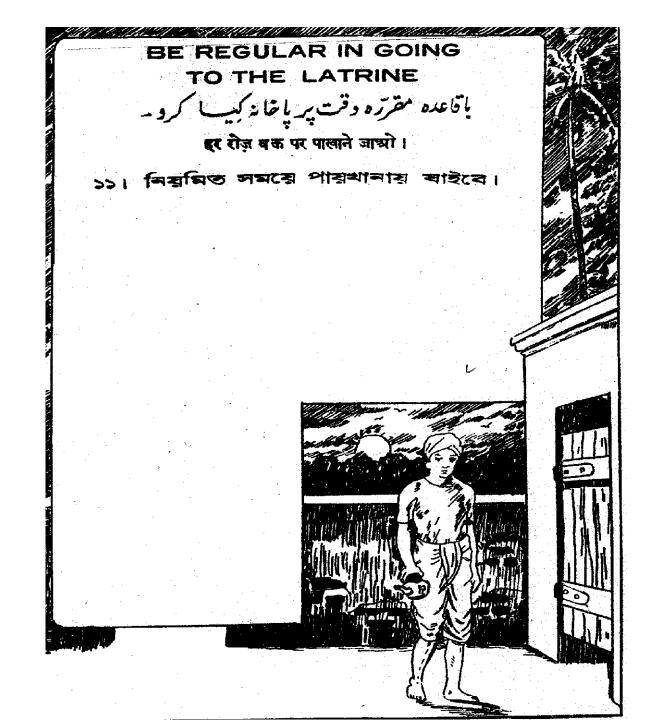
ادھ گھنڈ پہلے یا ایک گھنڈ بعد پانی پیا جائے

स्वच्छ पानी, खाना खाने के साथ के बनिस्वत, खाने के आपे घन्टा पहिले या एक घन्टे पीछे खुव पीओं।

৭। খাইবার সময় জলপান না করিয়া খাওয়ার আথ ঘণ্টা পূর্বে বা এক ঘণ্টা পরে প্রচুর পরিমাণে নির্মাল জল পান করিবে।













The big idea

Health care decisions based on reliable summaries of all the relevant, available research

The science

Researchers work hard to minimise bias in primary studies

When they come to reviews....



Rationale for systematic reviews of effects

- Many trials done
- Scientific process required
- Scientific principles ignored when reviewing
- Good empirical data to demonstrate "traditional" reviews are misleading

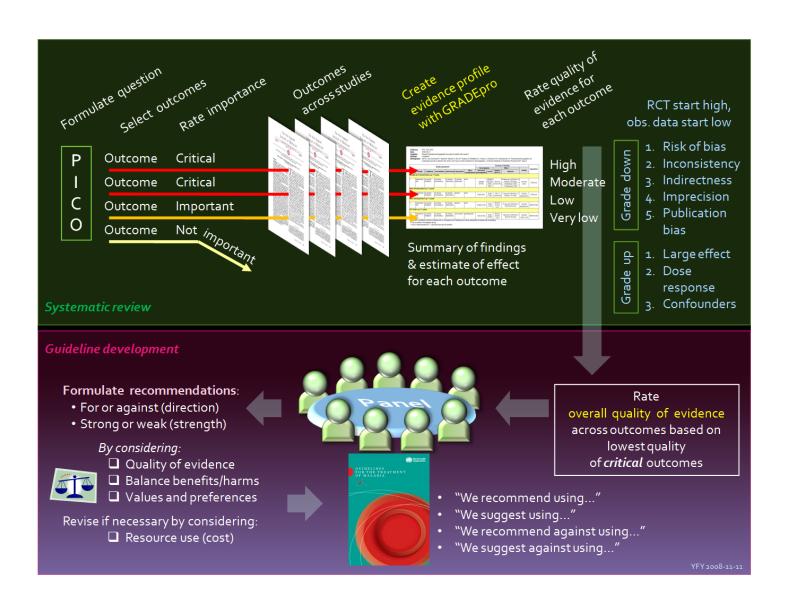


"Most WHO guidelines did not meet most of the AGREE criteria'

'Systematic reviews and concise summaries are rarely used for developing recommendations'.

'Processes usually rely heavily on experts rather than representatives of those who will have to live with the





What are guidelines?

systematically developed statements to assist practitioners and patients make decisions about appropriate health care for specific circumstances.

Three areas

What is a good systematic review?

 What is the process from moving from a systematic review to a recommendation?

 What are some of the components of a robust, transparent guideline development process?