Clinical practice guidelines are the cornerstone of physicians’ revalidation which is now mandatory in France (since 1 July 2005). We have therefore studied whether or not guidelines published by the national body in charge of this policy are current.

The website of the national agency contains 433 documents on clinical practice, quality assessment, tutorials, etc. The mean (SD) age of the documents was 64.8 (42.2) months. Only 11 documents were updated versions. We printed out 37 guidelines issued between January 2002 and May 2005. The date of issue was missing for one, while only 28% indicated when the bibliographic search ended (year without month and day). The year of issue was 1 year after the year of the bibliographic search for 38%, and 2 years or more for 24%. Updating was planned for four of the guidelines (two without a date and two at 5 years but without justification). However, neither the procedure nor standing committee for updating were documented for regularly updated literature analysis, information on adherence to the guidelines, and physicians’ observations.

Clinical practice guidelines are regarded as powerful tools for achieving effective health care, and production of guidelines was identified as a solution to get them adopted in practice. In 2002, promoting the Appraisal of Guidelines, Research and Evaluation (AGREE) instrument was top of the list of projects of the Guidelines International Network (G-I-N), a non-profit organisation which aims to improve the quality of health care.

The AGREE instrument has 23 criteria. Because clinical practice guidelines are a perishable product, we urge G-I-N to adopt and use first the WHISKY statement (Wise Healthcare Instructions Should be Kneaded Yearly). Items for implementation of this statement include: (1) the full date of the end of the bibliographic search; (2) the presence of a standing committee with appropriate funding; and (3) an expiration date to preclude inappropriate use. Indeed, URCAMIF, the main French regional care trust (Paris and suburbs), published in September 2004 an evaluation of colon cancer treatment using a clinical practice guideline issued in March 1998. Regional care trusts using obsolescent guidelines may deny the use of new treatment strategies, leading to rationing of health care. Finally, obsolescence promotes unfair commercial competition between pharmaceutical companies.

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