

Methods An initial list of items has been developed based in a systematic review done for our team about the guidance in updating handbooks. The working group has reviewed the initial list and reached consensus about the items to include. Through a survey, we will present the initial list to a multidisciplinary group of international experts and we will ask them about what is the relevant information that needs to be reported in an updated CPG, and about the elements to be included in a high-quality updating process.

Results These results will give us insight in what elements are required to be reported in an updated CPG. Additionally, we will gain information about what kind of elements include a high-quality updating process.

Discussion and Implications This checklist will help people responsible for updating CPGs, in conducting and reporting their update in a high-quality manner. Ultimately this might results in more up-to-date recommendations and more valid CPGs.

P331 EVALUATION OF QUALITY OF CZECH NEUROLOGY CLINICAL PRACTICE GUIDELINES USING AGREE II INSTRUMENT

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Background The quality of guidelines has been variable. Evidence-based clinical practice guidelines should be of the highest possible quality, which has to be systematically evaluated. Obj TRiADS, Research Methodology Group.

Objectives We have evaluated quality of new set of CPGs developed by Czech neurological society between 2009 and 2011 using AGREE II instrument.

Methods Six CPGs developed by Czech neurology society were assessed using AGREE II instrument by 4 independent assessors. Uncertainties and missing information were solved by the authors. Expert opinion on the evaluation process and outcomes were obtained.

Results All evaluated CPGs were of high quality with average of 93.5% for total score domain. The CPGs had high scores in the Clarity and recommendations and Applicability (99.6%), Scope (99.0%), Rigour of development (97.6%) and Stakeholder involvement (97.1%). The lowest score was in Editorial independence (47.5%).

Discussion The overall quality of neurology CPGs was high because of the methodology and support for developers was robust, systematic and standardised. Only the editorial independence scored low. The statement of conflict of interest is missing in all the CPGs as it is not a part of the methodology guidelines.

Implications for Guideline Developers/Users High quality CPGs can be developed even in a small country with limited budget if the methods of development are well designed, implemented and evaluated.

P334 CHALLENGES AND ADVANTAGES ADAPTING RECOMMENDATIONS: GPC BREAST CANCER

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Background Development of a high-quality Clinical Practice Guideline (CPG) involves spending a significant amount of resources. Frequently, similar strategies are used around the world to achieve similar results. A method to utilise resources in a more efficient manner and to avoid the unnecessary duplication of efforts is to adapt existing guidelines. However, the methodological diversity of CPGs, specific regional conditions, and difficulties in the implementation of recommendations, impose a systematic approach for its adaptation that constitute an important methodological challenge, that must take into account the similarities between a *de novo* development and an adaptation of guidelines. The process of adaptation requires systematic and transparent activities that disclose the considerations made to adjust the recommendations to a specific context.

Methods The development of the GPC for breast cancer follows the steps proposed in the Methodological Guideline for the development of GPCs in the Colombian Health System.

Results The systematic search retributed 176 GPCs, 48 (27%) of which were qualified with the DELBI instrument as “highly recommended”. The Guideline Development Group (GDG) elaborated 41 questions, 30 (73%) were adapted following the methodology proposed by the ADAPTE collaboration. The remaining 11 (27%) developed *de novo*; 12,000 titles and publication summaries have been reviewed, of which 130 have been included and qualified with the system proposed for GRADE Working Group. The results take into account the challenges implied in the CPG adaptation processes.

P340 SOURCES OF INFORMATION FOR DEVELOPMENT OF CLINICAL PRACTICE GUIDELINES IN JAPAN

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Background A Systematic search for literature is the basis of systematic review for development of trustworthy clinical practice guidelines (CPGs). Recently, standard method of literature search has been established. However, it is not clear what sources of information are used for development of CPGs in Japan.

Objectives The aim is to clarify what sources of information are used for development of CPGs in Japan.

Methods We reviewed Japanese CPGs that have been selected by MINDS (Medical Information Network Distribution Service) through process of screening and evaluation in 2011-2013, and abstracted description about sources of information used in these CPGs in February 2012.

Results A total of 88 Japanese CPGs selected by MINDS in 2011-2013. 65 (73.9%) CPGs used Medline, 29 (33.0%) used Cochrane database of systematic reviews, and 51 (58.0%) used Ichushi. Related CPGs was used in 30 (34.1%) CPGs. Hand search was used in 56 (63.6%) CPGs. There was no clear description of source of information in 18 (20.5%) CPGs.

Discussion Medline was used in most CPGs, and Cochrane database of systematic reviews was used in a relatively small number of CPGs. Ichushi, which is a database of domestic medical