international collaboration and building capacity in guideline development methodology and implementation.

**P196 UPDATING THE EVIDENCE FOR CPGS: THE USEFULNESS OF RSS FEEDS**

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**Background** Scientific knowledge is in constant evolution and even if Clinical Practice Guidelines (CPGs) get out of date in five years time, there is a lack of standardised method for an efficient updating process.

**Context** A proposal used to update efficiently the bibliographic searches during the development of a CPG on childhood asthma management is described.

**Description of Best Practice** Bibliographic searches were performed in Medline, Embase and All EBM databases using Ovid, and in BMJ update database. Search strategies and RSS-feeds were created and saved when possible. E-mail alerts for those searches carried out in databases with no RSS services were also created. All the RSS-feeds were centralised in a Netvibes web portal and organised into tabs (one tab by clinical question). New alerts were revised periodically during the guideline development process and new references incorporated in the guideline when relevant. RSS-feeds could be created for Medline and Embase searches. The centralization of RSS-feeds in a Netvibes portal facilitated the reviewing process of the latest published articles by clinical question. The review of the email-alert services generated for those sources with no RSS services was more time-consuming.

**Lessons for Guideline-Developers-Adaptors-Implementers-and/or-Users** The management of RSS-feeds is considered as a more effective tool to check and follow all the new references published during the guideline development process, being useful also after the CPG publication. Nevertheless, not all databases allowed the creation of RSS feeds, an issue that should be considered by their managers, and in all cases, the updating process has to be supported by professionals.

**Methods** In this retrospective study, we assessed guideline adherence with regard to 1) the use of the prognostic model and 2) the right treatment decision. Data were collected from medical records.

**Results** In this abstract we present the preliminary data of ten clinics. At the GIN conference we will have the results of all 25 participating clinics. So far we included 208 couples with unexplained infertility. In 54% of the couples the prognostic model was used. In 69% of the couples the right treatment decision was primarily made. However, ultimately, 41% of all couples received unnecessary treatment.

**Discussion** This study shows that adherence to the guideline regarding treatment policy is not optimal. Despite the guideline recommendations, more than one third of couples are exposed to unnecessary treatment and risks.

**Implications for Guideline Developers/Users** Implementation of the guideline is not optimal. To improve guideline implementation a multifaceted strategy has to be developed and evaluated.

**P198 ADHERENCE TO INFERTILITY GUIDELINES WITH REGARD TO TREATMENT POLICY**

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**Background** Nowadays, prognostic models are increasingly being used in reproductive medicine. One of these models calculates the chances of conception for couples with unexplained infertility and subsequently indicates the right treatment policy. The Dutch national network guideline on infertility recommends the use of this prognostic model to prevent unnecessary treatment. This strategy is supported by international guidelines on the management of infertility (ESHRE and NICE).

**Objectives** The aim of this study is to evaluate guideline adherence regarding treatment policy for couples with unexplained infertility in 25 Dutch clinics.

**Methods** In this retrospective study, we assessed guideline adherence with regard to 1) the use of the prognostic model and 2) the right treatment decision. Data were collected from medical records.

**Results** In this abstract we present the preliminary data of ten clinics. At the GIN conference we will have the results of all 25 participating clinics. So far we included 208 couples with unexplained infertility. In 54% of the couples the prognostic model was used. In 69% of the couples the right treatment decision was primarily made. However, ultimately, 41% of all couples received unnecessary treatment.

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