TECHNOLOGY ASSESSMENTS & SYSTEMATIC REVIEWS

Cranberries for preventing urinary tracting

Cranberries (usually consumed as cranberry juice) have been used widely for several decades to try and prevent urinary tract infections. Cranberries contain a substance that can prevent bacteria from sticking on the walls of the bladder. This may help prevent bladder and other urinary tract infections. This review identified ten studies (with 1,049 participants) comparing cranberry products with placebo juice or water. There was some evidence to show that cranberries can prevent recurrent infections in women. However, the evidence for other groups was less clear, and there is evidence that it is not effective in people who need catheterisation. Many people in the trials stopped drinking the juice, suggesting that it may not be a popular intervention. In addition, it is not clear how long cranberry juice needs to be taken to be effective or what the required dose might be.

Jepson RG, Craig JC. Cranberries for preventing urinary tract infections. Cochrane Database of Systematic Reviews 2008, Issue 1. Art. No.: CD001321. DOI:

10.1002/14651858.CD001321.pub4.

Abstract available at:

http://www.mrw.interscience.wiley.com/cochrane/clsysrev/articles/CD001321/frame.html

Hand washing for preventing diarrhoea

Diarrhoea is a serious global public health problem, particularly in low-income and middle-income countries. Persistent diarrhoea can also contribute to malnutrition, reduced resistance to infections, and sometimes impaired growth and development. The organisms causing diarrhoea can be transmitted from infected faeces to people through food and water, person-to-person contact, or direct contact. Hand washing after defecation and handling faeces, and before preparing and eating food can reduce the risk of diarrhoea. This review looked at trials of interventions to increase the use of hand washing in institutions in high-income countries and in communities in low- or middle-income countries, and found that hand washing can reduce diarrhoea episodes by about 30%. This significant reduction is comparable to the effect of providing clean water in low-income areas.

Ejemot RI, Ehiri JE, Meremikwu MM, Critchley JA. Hand washing for preventing diarrhoea. Cochrane Database of Systematic Reviews 2008, Issue 1. Art. No.: CD004265. DOI: 10.1002/14651858.CD004265.pub2.

Abstract available at:

http://www.mrw.interscience.wiley.com/cochrane/clsysrev/articles/CD004265/frame.html

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http://www.cochrane.org/podcasts/review_summaries/mp3/cranberry.mp3

http://www.cochrane.org/podcasts/review_summaries/mp3/hwreview3.mp3

Capsule colonoscopy: PillCam® Colon

The PillCam® Colon capsule is an ingestible miniature camera that captures images of the colon's inner lining. The main patient group for capsule colonoscopy would likely be individuals who have positive or suspicious test results from routine colorectal cancer screening, who cannot undergo, or cannot be adequately investigated, with conventional colonoscopy. These individuals include frail elderly patients, pregnant women, and patients with suspected bowel obstruction, perforation, or inflammation of the colon. One problem associated with the technology is that viewing the capsule endoscopy images is time consuming. Further enhancements to the software system used to view the images may address this issue.

Full-text article available at:

http://cadth.ca/media/pdf/E0034_PillCam-Colon_cetap_e.pdf

GUIDELINES

Food allergy: a practice parameter

Food allergy, as defined for the purposes of these guidelines, is a condition caused by an IgE-mediated reaction to a food substance. These guidelines, established by the American Academy of Allergy, Asthma and Immunology and the American College of Allergy, Asthma and Immunology contain an algorithm that presents the major decision points for the appropriate evaluation and management of patients suspected of having food allergy. The guidelines aim to improve the quality of care for patients by providing the practising physician with an evidence-based approach to the diagnosis and management of IgE-mediated (allergic) food reactions.

Food allergy: a practice parameter. Ann Allergy Asthma Immunol. 2006 Mar; 96(3 Suppl 2):S1-68.

Full-text article available at:

http://www.jcaai.readyportal.net/file_depot/0-10000000/20000-30000/27387/folder/63948/Food_ Allergy_2006.pdf

Diagnosis and treatment of low back pain: a joint clinical practice guideline from the American College of Physicians and the American Pain Society

Low back pain is the fifth most common reason for all physician visits in the United States. Many patients have self-limited episodes of acute low back pain. However, up to one third of patients report persistent back pain of at least moderate intensity one year after an acute episode, and one in five reports substantial limitations in activity. The purpose of this guideline is to present the available evidence for evaluation and management of acute and chronic low back pain in primary care settings. The target audience for this guideline is all clinicians caring for patients with low back pain of any duration, either with or without leg pain.

Full guidelines available at:

http://www.annals.org/cgi/content/full/147/7/478

Screening for carotid artery stenosis

The most feasible screening test for severe carotid artery stenosis is duplex ultrasonography. Good evidence indicates that this test has moderate sensitivity and specificity and yields many false-positive results. A positive result on duplex ultrasonography is often confirmed by digital subtraction angiography, which is more accurate, but can cause serious adverse events. Noninvasive confirmatory tests, such as magnetic resonance angiography, may also be inaccurate.

Thus, both the testing strategy and the treatment with carotid endarterectomy can cause harm. A testing strategy that includes angiography will itself cause some strokes. A testing strategy that does not include angiography will cause some strokes by leading to carotid endarterectomy in people who do not have severe carotid artery stenosis. The United States Preventive Services Task Force concludes that for individuals with asymptomatic carotid artery stenosis, there is moderate certainty that the benefits of screening do not outweigh the harm, and recommends against screening for asymptomatic carotid artery stenosis in the general adult population.

Summary of recommendations available at: http://www.ahrq.gov/clinic/uspstf/uspsacas.htm United States Preventive Services Task Force recommendation statement available at: http://www.ahrq.gov/clinic/uspstf07/cas/casrs.pdf

Ministry of Health Clinical Practice Guidelines

The Ministry of Health has recently published their guidelines on diagnosis and management of Parkinson's disease and asthma.

Parkinson's disease

Parkinson's disease is a gradually progressive neuro-

degenerative disorder which affects movement or the control of movement, including speech and body language. In a community-based survey, the prevalence of Parkinson's disease in Singapore was found to be 0.3% for the population aged 50 years and above. As Singapore's population is ageing rapidly, the burden of Parkinson's disease is expected to increase. These clinical practice guidelines have been produced to familiarise doctors with the key features of Parkinson's disease, and to provide an overview of evidence-based management of Parkinson's disease.

Full guidelines available at:

http://www.moh.gov.sg/mohcorp/publications.aspx?id=18144

Management of asthma

Asthma is a chronic disease characterised by recurrent attacks of breathlessness and wheezing, which vary in severity and frequency from person to person. Often under-diagnosed and under-treated, asthma creates a substantial burden to individuals and families, and possibly restricts the individuals' activities for a lifetime. In order to deal effectively with the increasing burden of asthma, this set of guidelines updates the previous edition released in 2002 to include the latest evidence from scientific literature. Apart from updating the sections on diagnosis and treatment, the key change is in asthma management, which now focuses on achieving control of asthma. To assess asthma control, a simple and robust tool, the Asthma Control Test, is recommended in this set of guidelines.

Full guidelines available at:

http://www.moh.gov.sg/mohcorp/uploadedFiles/ Publications/Guidelines/Clinical_Practice_Guidelines/ Asthma%20CPG%20booklet.pdf

EVIDENCE-BASED TOPICS

Canadian Medical Association Handbook on clinical practice guidelines

This handbook aims to provide up-to-date, evidence-based, experience-driven guidance on how to use clinical practice guidelines most effectively to improve the care of patients. The target audience is individuals and groups interested in the development, adaptation, implementation and evaluation of clinical practice guidelines, including healthcare practitioners, healthcare administrators, healthcare policy-makers and groups, organisations and societies involved in clinical practice guidelines development, adaptation or implementation. *Full text available at:*

http://www.cma.ca//multimedia/CMA/Content_Images/ClinicalResources/PDF/English/CPGHandbook.pdf

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