



TARGET

TECHNOLOGY ASSESSMENTS, REVIEWS, GUIDELINES & EVIDENCE-BASED TOPICS

TECHNOLOGY ASSESSMENTS & SYSTEMATIC REVIEWS

Dietary advice for the prevention of type 2 diabetes mellitus in adults

Prevention of type 2 diabetes mellitus in adults is a far better option than treatment, to alleviate pressure on healthcare providers and resources. The authors reviewed the evidence regarding the efficacy of a diet-only intervention for prevention of type 2 diabetes mellitus and found that dietary advice appears to be effective in reducing the risk of diabetes mellitus by 33% compared to a control group over six years. Dietary intervention also appears to beneficially effect indicators of metabolic control after 12 months. However, more well-designed, long-term studies are required before conclusions can be made into the best dietary advice for the prevention of diabetes mellitus in adults.

Nield L, Summerbell CD, Hooper L, Whittaker V, Moore H. Dietary advice for the prevention of type 2 diabetes mellitus in adults. Cochrane Database of Systematic Reviews 2008, Issue 3. Art No: CD005102. DOI:10.1002/14651858.CD005102.pub2.

Abstract available at:

<http://www.mrw.interscience.wiley.com/cochrane/clsysrev/articles/CD005102/frame.html>

Podcasts of Cochrane reviews can be downloaded from this link:

http://www.cochrane.org/podcasts/review_summaries/mp3/issue3_2008_exercise.mp3

Hip protectors in long-term care: a clinical and cost-effectiveness review and primary economic evaluation

Hip protectors consist of an underwear-type garment with pockets in which protective pads are inserted on each side over the greater trochanter. In the event of a fall, the shell disperses the force away from the hip and into the surrounding tissue. Hip protectors are effective at reducing the risk of hip fractures in long-term care facility residents, with a relative risk of 0.77. A combination of alendronate and hip protectors results in the greatest reduction in disease burden compared to no treatment or hip protectors alone. Compared to no intervention, hip protectors are a cost-effective treatment option for women over 70 years of age and living in long-term care facilities.

Brown A, Coyle D, Cimon K, Farrah K. Hip protectors in long-term care: a clinical and cost-effectiveness review and primary economic evaluation. Ottawa: Canadian Agency for Drugs and Technologies in Health; 2008.

Full-text article available at:

http://www.cadth.ca/media/pdf/13015_Hip_Protectors_Long_Term_Care_tr_e.pdf

GUIDELINES

Antibiotic prophylaxis in surgery

This set of guidelines updates the previous edition published in 2000 and addresses risk factors for surgical site infection, benefits and risks of antibiotic prophylaxis, indications for surgical antibiotic prophylaxis as well as recommendations on administration of intravenous prophylactic antibiotics. New topics include non-intravenous routes of administration, multiresistant carriage in patients undergoing surgery and recommendations for common surgical procedures in children.

Scottish Intercollegiate Guidelines Network (SIGN). Antibiotic prophylaxis in surgery. Edinburgh: SIGN; 2008.

Full guidelines available at:

<http://www.sign.ac.uk/pdf/sign104.pdf>

Diagnosis and management of chronic kidney disease

Chronic kidney disease (CKD) is a long-term condition caused by damage to both kidneys. It is usually irreversible and can result in a need for dialysis or transplantation. Early detection of CKD can establish if kidney disease is likely to be progressive, allowing appropriate treatment to slow progression. This guideline covers the risk factors for CKD and includes recommendations for diagnosing CKD and slowing its progression. The management of complications of CKD, such as anaemia and bone disease, and evidence for the best psychological and social support for patients with CKD are also discussed.

Scottish Intercollegiate Guidelines Network (SIGN). Diagnosis and management of chronic kidney disease. Edinburgh: SIGN; 2008.

Full guidelines available at:

<http://www.sign.ac.uk/pdf/sign103.pdf>

Diabetes - insulin pump therapy

Insulin pumps are small devices worn outside the body, and they continuously deliver insulin into the body through a very thin tube or needle inserted under the skin. The insulin can be delivered at a set rate throughout the day, and can be increased when it is needed, e.g. at meal times. This guidance provides recommendations for the use of insulin pump therapy and updates recommendations for this technology, which was first published in 2003. Key changes have been the recommendations on the use of continuous subcutaneous insulin infusion in children younger than 12 years of age with type 1 diabetes mellitus.

Diabetes - insulin pump therapy: continuous subcutaneous insulin infusion for the treatment of diabetes (review). London: National Institute for Health and Clinical Excellence; 2008.

Full-text article available at:

<http://www.nice.org>

[uk/Guidance/TA151/Guidance/pdf/English](http://www.nice.org/uk/Guidance/TA151/Guidance/pdf/English)

Guidelines for adolescent depression in primary care (GLAD-PC): I. Identification, assessment, and initial management

Major depression in adolescents is recognised as a serious psychiatric illness with extensive acute and chronic morbidity and mortality. In primary care, as many as two in three depressed youth are not identified by their primary care clinicians and do not receive any kind of care. These clinical practice guidelines aim to assist primary care clinicians in the management of adolescent depression by addressing identification, assessment, and initial management of adolescent depression in the primary care setting.

Zuckerbrot RA, Cheung AH, Jensen PS, et al. Guidelines for adolescent depression in primary care (GLAD-PC): I. Identification, assessment, and initial management. Pediatrics 2007; 120:e1299-312.

Electronic copies: available from the *Pediatrics* journal website.

Print copy of the full guidelines available from Rachel A Zuckerbrot, MD, Columbia University, Division of Child Psychiatry, Department of Psychiatry, 1051 Riverside Drive, Unit 78, New York, NY 10032. Email: raz1@columbia.edu

Guidelines for adolescent depression in primary care (GLAD-PC): II. Treatment and ongoing management

Major depressive disorder (MDD) in youth is often underidentified and undertreated in primary care settings. Although MDD management guidelines have been developed for specialty care settings, significant practice and clinician differences exist between the primary and specialty care settings that do not allow a simple transfer of guidelines from one setting to another. This guideline describes the recommendations regarding treatment, ongoing management, and follow-up for adolescent depression, along with the supporting empirical evidence for these recommendations.

Cheung AH, Zuckerbrot RA, Jensen PS, et al. Guidelines for adolescent depression in primary care (GLAD-PC): II. Treatment and ongoing management. Pediatrics 2007; 120:e1313-26.

Electronic copies: available from the *Pediatrics* journal website.

Print copies: Available from Amy H Cheung, MD, University of Toronto, Department of Psychiatry, 33 Russell St, 3rd Floor Tower, Toronto, Ontario, Canada M5S 2S1. Email: dramy.cheung@gmail.com

EVIDENCE-BASED TOPICS**Understanding evidence-based healthcare: a foundation for action**

This is an online training course developed by the United States Cochrane Center to help consumer advocates understand the fundamentals of evidence-based healthcare concepts and skills. The course is a suitable introduction of this field for non-medical professionals. It was designed to provide consumer advocates with the tools they need to:

- Successfully navigate the world of medical information;
- Critically appraise research studies;
- Influence the creation of responsible public policy in healthcare; and
- Help the people they serve to make good healthcare choices based on the best-available evidence.

Registration is open and free of charge. Participants are encouraged to do the course at their own leisure by registering at the following website:

<http://apps1.jhsph.edu/cochrane/CUEwebcourse.htm>

TARGET is a quarterly news summary that seeks to bring evidence-based publications to the attention of SMJ readers. If the publications are available on the internet, URL links are provided. This news summary is published in collaboration with the Health Technology Assessment Branch of the Ministry of Health, Singapore.

Disclaimer: The information we provide is not intended to serve as a standard of medical advice, diagnosis, or treatment. Each physician is ultimately responsible for the management of his/her unique patient in the light of clinical data presented by the patient and the diagnostic and treatment options available.