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Need for the Development of Indonesian Clinical Practice Guideline

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Need for the Development of Indonesian Clinical Practice Guideline

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Editorial

To date clinical practice guideline (abbreviated as CPG) becomes a need in surgical care since they are statements that include recommendations intended to optimize patient care that are informed by a systematic review of evidence and an assessment of the benefits and harms of alternative care options.¹ Above definition were revised that defined a CPG as systematically developed statements to assist practitioner and patient decisions about appropriate healthcare for specific clinical circumstances; which has contributed in changing the concept of guidelines to modern one.^{2,3} In accordance with report from Institute of Medicine (IOM) in 1992, the CPG (hereafter referred to as guidelines) are one of the foundations of efforts to improve healthcare.³

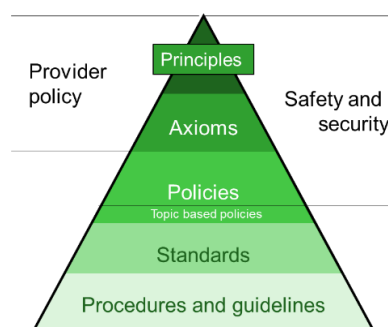
A guideline is addressed to escort clinicians when dealing with difficult cases of which have a high risk to mortality and treatment failure that managed with a great of variation. It is aimed to unify the perception of clinicians of multidiscipline, but not to eradicate the variations.⁴ This guideline includes the experts from disciplines involved in the management of a clinical entity and other stakeholders, background, current concepts, the scope, clinical questions, methodology, grading system, executive summary, recommendations and its rational, and certainly the references.^{5,6} Its current is achieved by the process of periodically updating.^{5,7}

The guidelines originally consist of *guide + lines* were the instructions for guiding purposes only, as advice(s) on how to act in a given situation. As it developed in systematic manner based on highly selected and criticized evidence, then the recommendations of a guideline referred to as a quality assurance in surgical care. Guidelines recommendations are the tools for healthcare professionals to develop strategies for quality improvement in case deviations from desired processes or outcomes are identified by the measurement of quality indicators.⁸ Perceptively, it should be noted that a recommendation is non-mandatory control, is not a policy (which is the rules for fair and consistent staff treatment and ensure compliance), and is not a procedure (which is a step by step instructions for implementation), and is not a standard (which is quantifiable low level mandatory controls). Guidelines refers to pronouncements, statements, or

declarations that suggest or recommend specific professional behavior, endeavors, or conduct some medical (surgical) intervention.⁸

In the implementation in Indonesia, there's a confusing terminology of CPGs in Bahasa which is (should be translated as) 'Panduan Praktik Klinik' (PPK). In accordance with 'Standar Pelayanan Kesehatan' (Indonesian standard of Health care) published by the consortium of health care, Ministry of Health Republic of Indonesia, the CPGs attributed to 'Pedoman Pelayanan Nasional Kesehatan' (PPNK) where as in the development, and the format is a CPGs, indeed. PPK, clinical pathways, protocols, and algorithm are the rundowns of a PPNK which are to be implemented in the hospitals. Thus, a PPNK approved by the Ministry of Health covers a nationwide while as the others covers only in a single hospital that may be found different to another.⁹

A CPGs differs from a standard in that standard is mandatory and may be accompanied by an enforcement mechanism. This standard is, a step higher on the hierarchy.



Guidelines are aspirational in intent; to facilitate the continued systematic development of the profession and to help ensure a high level of professional practice.¹⁰ It was emphasized that guidelines are not intended to be mandatory or exhaustive and may not be applicable to every professional and clinical situation. They are not definitive and they are not intended to take precedence over professional judgment. Guidelines are developed for quality assurance of surgical care management, to improve the appropriateness of care, to improve cost-effectiveness, and to served educational tools. Thus, guidelines implies to the best practice.¹¹

As it was previously mentioned, a quality CPG developed by experts in an advisory board assigned by association of a professional of a multidiscipline involved, academic, or mixed; which is systematically developed in accordance with the current system, namely Grading of Recommendations Assessment, Development, and Evaluation (GRADE).^{4,12,13} A quality CPG accommodates the regionally-specific characteristics in the recommendations. They were reviewed internally and externally prior to the dissemination,^{4,14} evaluated, and periodically updated.¹⁵

Surgical care in Indonesia predominate by Indonesian-specific characteristics which is delayed presented cases, and advanced one; both in the rural and the centers. There were many reasons (geographic-, socio- culture-, economic issues) to be responsible for this characteristic. Another issue found related to this characteristic is the issues of medical vs. non-medical (traditional, the alternatives, believes) treatment, medical vigilance, and medical vs. surgical management of a disease entity. It might be the reason of why an established CPG is difficult to be implemented, or adopted in the region. Thus, a clinical practice guideline (CPG) of this Indonesian-specific characteristics is the solution, and urgently required to reduce mortality rate that remains as a common problem.

The need of CPG is clear. CPG bridges the evidence to clinical practice of surgery and offers recommendations assist clinicians to provide surgical care of the best quality.^{10,16,17} By delivering the best quality of surgical care then we are running the clinical governance to achieve the quality improvement.¹⁸⁻²³ Since to develop an Indonesian surgical CPG *de novo* encountered a problem due to inadequacy of data as common found in all developing countries, then the options to adopt, or to adapted an established CPG is likely the best option.²⁴⁻²⁸ Thus, why have to wait for tomorrow?

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