

European Commission Initiative on Breast Cancer (ECIBC): Development of good practice statements

Good practice statements represent recommendations that the Guidelines Development Group (GDG) feels are important, although they are not adequate for a formal certainty of evidence rating according to the Grading of Recommendations Assessment, Development and Evaluation (GRADE) working group.

GRADE suggests that, prior to making a good practice statement, the following questions should be explicitly addressed:

- 1. Is the statement clear and actionable?
- 2. Is the message really necessary in regard to actual health care practice?
- 3. After consideration of all relevant outcomes and potential downstream consequences, will implementing the good practice statement result in large net positive consequences?
- 4. Is collecting and summarising the evidence a poor use of a guideline panel's limited time and energy (opportunity cost is large)?
- 5. Is there a well-documented clear and explicit rationale connecting the indirect evidence?

The answers to all questions 1-5 should be 'yes' in order to proceed with the development of a good practice statement.

For each of the good practice statements developed by the ECIBC's GDG, the formal documentation, including the replies to each of these questions, is readily available.

The good practice statements are clearly distinguished from the rest of the recommendations and are worded differently. The words "we recommend" for strong recommendations and "we suggest" for conditional recommendations are not used. Instead, the statement "ungraded good practice statement" is used in parenthesis after each good practice statement.

Reference:

Guyatt GH, Alonso-Coello P, Schünemann HJ, Djulbegovic B, Nothacker M, Lange S, Hassan Murad M, Akl EA. Guideline panels should seldom make good practice statements: guidance form the GRADE Working Group. Journal of Clinical Epidemiology 2016; 80: 3-7.