Renaissance or reformation for evidence based medicine?

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LETTERS

CRISIS IN EVIDENCE BASED MEDICINE

Renaissance or reformation for evidence based medicine?

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We welcome the new directions for evidence based medicine sketched out by Greenhalgh and colleagues on behalf of the Evidence Based Medicine Renaissance Group.[1] However, we wonder whether their movement will represent a renaissance—a sweeping intellectual revival for evidence based medicine—or a reformation—the breakaway of a group of concerned followers from orthodoxy to form a separate school of thought. Meaningful, far reaching change will require a cooperative refocusing of the evidence based medicine movement. We would like to pick up on two crucial impasses identified in their article—multimorbidity and the distortion of the evidence base by financial interests[1]—and illustrate the roles that different stakeholders must fulfil.

The first challenge is multimorbidity, which increasingly describes typical patients. Yet, most clinical trials exclude patients with multiple diseases.[2] Publishers and regulators should demand that investigators match the trial population to the target population for the intervention. Of course, increasing representativeness also increases heterogeneity. This heterogeneity in patient characteristics and preferences demands heterogeneity in clinical management across patients—an unavoidable consequence of individualising care.[3] Certain financial incentives and the prescriptive nature of practice guidelines of the past promoted standardisation rather than judgment and flexibility.[4]

Another serious problem is the distortion of the evidence base by financial interests. Greenhalgh and colleagues indicate the need to study hidden biases in sponsored research.[1] However, these biases will remain hidden unless doctors, publishers, and regulators demand full access to raw study data, the registration and publication of all trials, and the complete independence of study investigators in designing and executing industry funded trials. Furthermore, given the social context of medical evidence, educators must train doctors to assess the trustworthiness of evidence, guidelines, and continuing education,[5] not only the methodological rigor of studies.

Evidence based medicine was originally described as a revolution in medicine. Its renaissance will require changes in research and practice that are no less radical.

Competing interests: None declared.

Full response at: www.bmj.com/content/348/bmj.g3725/rr/760879.

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