

---VA Health Care Technology Watch---February 2001---
---Notes on Evidence-Based Health Care
---by the VA Technology Assessment Program, PCS, Boston

This periodic e-mail presents current notes on a range of evidence-based assessments, systematic reviews, and reports on therapies and other interventions relevant to VA populations. Please forward it to anyone you know who might be interested. Three sections contain information: **Blue text is info on VA TAP projects and reports, green text is info on reports from other national and international agencies, and purple text is for web based information resources.**

VA TAP Reports:

The TAP has produced many reports on current topics. You can find these reports in full on the TAP web page: <http://www.va.gov/vatap/publications.htm>

Assessment Reports & More from Other Agencies:

From the Agency for Health Care Research and Quality:

--Evidence Report/Technology Assessments:

Number 19. Management of Acute Exacerbations of Chronic Obstructive Pulmonary Disease. <http://www.ahrq.gov/clinic/epcsums/copdsum.htm>

--Evidence Report/Technology Assessment:

Number 25. Efficacy of Interventions To Modify Dietary Behavior Related to Cancer Risk. <http://www.ahcpr.gov/clinic/epcsums/dietsumm.htm>

Under its Evidence-based Practice Program, the Agency for Healthcare Research and Quality (AHRQ) is developing scientific information for other agencies and organizations on which to base clinical guidelines, performance measures, and other quality improvement tools. These institutions review all relevant scientific literature on the clinical care topics and produce evidence reports and technology assessments, conduct research on methodologies and the effectiveness of their implementation, and participate in technical assistance activities.

Clinical Highlights: Routine Preoperative Testing Before Cataract Surgery.

Key Finding: Routine preoperative testing before cataract surgery does not improve patients' health or clinical outcomes, according to a study sponsored by the Agency for Healthcare Research and Quality (AHRQ).

<http://www.ahcpr.gov/clinic/precataract.htm> The Study of Medical Testing for Cataract Surgery was conducted as part of the Cataract Patient Outcomes Research Team,

led by Oliver D. Schein, M.D., M.P.H., of the Wilmer Eye Institute, Johns Hopkins University.

From the Centers for Disease Control: Strategies for Reducing Exposure to Environmental Tobacco Smoke, Increasing Tobacco-Use Cessation, and Reducing Initiation in Communities and Health-Care Systems. November 10, 2000/Vol. 49/No. RR-12. <http://www.cdc.gov/mmwr/PDF/rr/rr4912.pdf>

See if you want to AGREE--A New International Collaboration: A new international collaboration of researchers and policy makers who seek to improve the quality and effectiveness of clinical practice guidelines by establishing a shared framework for their development, reporting and assessment has formed. So who are the **AGREE**-able participants? The **AGREE** collaboration has the participation of a core of European countries: Denmark, Finland, France, Germany, Italy, the Netherlands, Spain, Switzerland and the United Kingdom as well as Canada, New Zealand and the USA. See if you **AGREE**: <http://www.agreecollaboration.org/>

Web based information resources you can use:

Recent Articles:

Serum folate and cardiovascular disease mortality among US men and women. Loria CM, Ingram DD et al. Arch Intern Med. 2000;160:3258-3262. **Addresses the Question:** What is the relation between serum folate and cardiovascular mortality? **The Answer:** Low serum folate concentrations are associated with an increased risk of CVD mortality among adults who do not have diabetes. Folate has been linked to cardiovascular disease (CVD) through its role in homocysteine metabolism. The objective of this prospective study was to assess the relationship between serum folate and CVD mortality. A national probability sample consisting of 689 adults who were 30 to 75 years of age and did not have a history of CVD at baseline and were part of the Second National Health and Nutrition Examination Survey were the subjects of this study.

<http://archinte.ama-assn.org/cgi/reprint/160/21/3258.pdf>

Worried that: CELL PHONES = BRAIN TUMORS? Here's the evidence:

Epidemiological evidence on health risks of cellular telephones. Kenneth J Rothman. Lancet 2000; 356:1837-40. **Addresses the Question:** Where can I find the current epidemiological evidence on health risks of cellular phones? **The Answer:** According to this review in the Lancet by renowned epidemiologist Rothman there is no clear evidence of an association with cellular phone use and brain tumours or other malignancies. It may be too soon to issue a verdict on the health risks from cellular telephones, especially in view of changing technology. It is possible that better information may emerge from the Interphone project and some other large studies in progress. Based on the epidemiological evidence available now, the main public-health concern is clearly motor vehicle collisions, a behavioral effect rather than an effect of radiofrequency exposure as such.

The NEJM has a early release paper on this topic which found that the data do not support the hypothesis that the recent use of hand-held cellular telephones causes brain tumors, but they are not sufficient to evaluate the risks among long-term, heavy users and for potentially long induction periods. *Cellular-Telephone Use and Brain Tumors* by Peter D. Inskip, Robert E. Tarone, Elizabeth E. Hatch, Timothy C. Wilcosky, William R. Shapiro, Robert G. Selker, Howard A. Fine, Peter M. Black, Jay S. Loeffler, Martha S. Linet, can be accessed at: <http://content.nejm.org/cgi/reprint/344/2/79.pdf>

Tramer MR. A rational approach to the control of postoperative nausea and vomiting: Evidence from systematic reviews. Part I. Efficacy and harm of antiemetic interventions, and methodological issues. *Acta Anaesthesiologica Scandinavica* 45: 4-13, February 2001.

Tramer MR. A rational approach to the control of postoperative nausea and vomiting: Evidence from systematic reviews. Part II. recommendations for prevention and treatment, and research agenda. *Acta Anaesthesiologica Scandinavica* 45: 14-19, February 2001.

Food for Thought:

"...no man is an island. He must have a support system which without he cannot function." *Carl Yastrzemski, Hall of Fame speech, 1989*

"If you don't know where you are going, you are likely to end up somewhere else." *Yogi Berra*

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