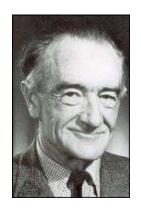
實證醫學簡介

台北市立聯合醫院師資培育中心實證醫學小組 台北市立聯合醫院中興院區復健科 林政宜醫師

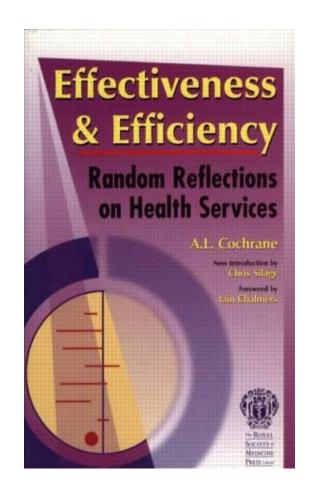
Medical education in 20th century

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Medical humanities
Bioinformatics
Patient-centered care
Problem-based learning
(PBL)
Evidence-based medicine
(EBM)
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Professor Archibald Leman Cochrane, CBE FRCP FFCM, (1909 - 1988)

- Archie Cochrane 是當時英國內科醫師及著名的流行病學專家,他對於流行病學發展的偉大貢獻,以致 Cochrane Collaboration 以他的名字命名以表達對他的敬意
- 1972年出版的著作- Effectiveness and Efficiency: Random Reflections on Health Services 明確的提出以下重要論述
 - 由於資源終將有限,因此應該使用 已被證明有明顯效果的醫療保健措 施
 - 來自於隨機對照試驗(Randomised Controlled Trials, RCTs)的證據,比其他任何證據更為可靠



實證醫學的發展背景

·實證醫學"此一名詞自1992年加拿大McMaster大學Gordon Guyatt教授所領導的小組正式命名後即引起全世界對實證醫學的關注,並成為一種新的醫學教學模式

1996年英國牛津大學David Sackett教授對實證醫學的含義做了進一步的闡釋,認為實證醫學是基於現有的最佳研究證據結合臨床經驗及病人的價值取向整合後,所制定的醫療決策

爾後英國牛津大學衛生科學研究院院長Muir Gray更進一步闡明應用實證醫學的精神於衛生政策的制定上

Lancet曾把Cochrane Collaboration比做臨床醫學的人類基因組計畫

網址: http://www.cochrane.org

The Origins of Evidence-Based Decision Making

Variation in service delivery and clinical practice between clinicians, hospitals or countries

Gaps between what was known and what was done

- Failure to start interventions that did more good than harm at reasonable cost
- Failure to stop interventions that had been shown to be of low value

Economic pressures

- Population ageing
- New technology
- Rising expectation

The UK National Health Service Research and Development programme

Many "Leaks" from research & practice



If 80% achieved at each stage then 0.8 x 0.8 z 0.8 = 0.21

Is bed rest ever helpful?

A systematic review of trials*

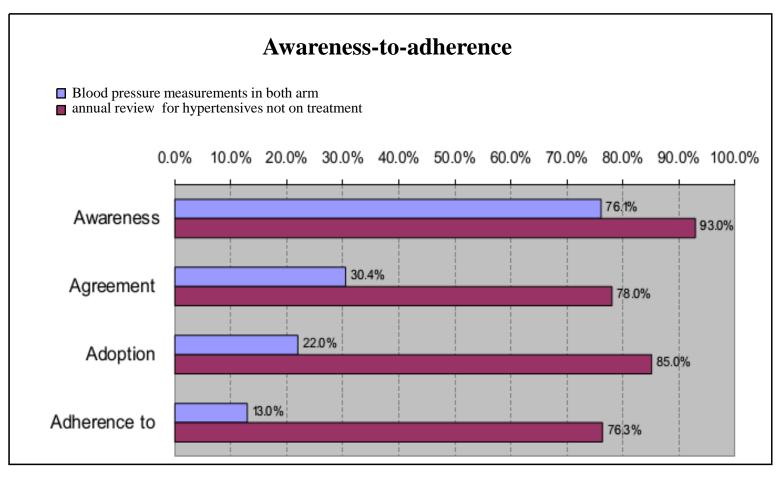


- 10 trials of bed rest after spinal puncture
 - no change in headache with bed rest
 - Increase in back pain
- Protocols in UK neurology units 80% still recommend bed rest after LP

Serpell M, BMJ 1998;316:1709–10

...evidence of harm available for 17 years preceding...

What do GPs think about measuring BP in both arms? Survey of 500 UK GPs



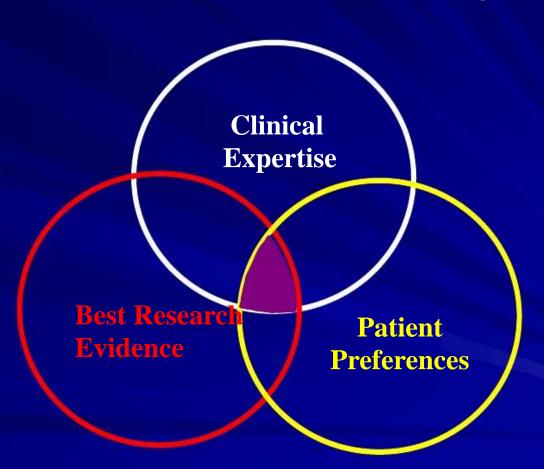
實證醫學是什麼?

以流行病學和統計學的方法,從龐大的醫學資料庫 中嚴格評讀、綜合分析並找出值得信賴的部分,並 將所能獲得的最佳文獻證據,應用於臨床工作中, 使病人得到最佳的照顧。

Fieldm & Lohrm報告中發現醫師每天所作的決策中:

- 4%是有強而有力的臨床研究證據所支持
- 45%是有謹慎的臨床研究證據,且醫師間有一定程度的共識
- 51%不但缺乏有力的證據支持,在醫師間亦無共識,屬 灰色地帶

EBM Decision Making



EBM does not mean everything!

But EBM is something that change our clinical thinking & behaviors, then improved our clinical performance !!!



EBM is the process <u>begins</u> and <u>ends</u> with patients !!!!