Practising EBM in primary care

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This issue of the Malaysian Family Physician focuses on the practice of Evidence Based Medicine or as it is widely known, EBM. The term was coined in 1992 by Gordon Guyatt who called it "an approach to practising medicine in which the clinician is aware of the evidence in support of her clinical practice, and the strength of that evidence." It represented a shift in clinical thinking from the old paradigm which assumed that clinical experience was sufficient for obtaining knowledge, that appropriate treatment could be determined by physiological basis alone, that authority was important and that good medical training and common sense was all that was needed to appraise medical literature.¹

In Malaysia, a study conducted in 2004 showed that although 80% of primary care doctors were aware of EBM, only 33% had heard of the Cochrane Database of Systematic Reviews and a dismal 7% had conducted a Medline search.² Another study conducted in two Malaysian hospitals in 2007 showed that only 16% of doctors felt able to differentiate a good study from a not-so-good one 'often' or 'all the time'.³ Although these are not recent studies, it appears that awareness and practice of EBM in the country is limited.

Yet, these challenges in the promotion of EBM in Malaysia should not detract us from practising the core values of EBM, that is, the use of best evidence from research to inform clinical practice. In his review, Teng CL shows that there exists variation in practice from recommendations based on evidence as seen from studies conducted in Malaysia.⁴ This article should remind us, the clinicians, of the importance of performing regular audits to ensure good practice.

Two other articles in this issue highlight methods of teaching and practicing EBM. Lai NM explains his approach in teaching EBM by offering two examples – the first, a step-by-step method on teaching question formulation and the second, teaching translation of evidence into practice. Glasziou P brings EBM to life with his article on the key indicators of evidence based practice. He reminds us that awareness and skills in EBM are not enough; action based on evidence is the cornerstone of evidence based practice.

This issue showcases two clinical practice guideline updates, EBM case commentaries and a Journal Club which we hope would keep the readers updated on the best evidence that are relevant to clinical practice. The Malaysian Family Physician will continue to publish these in future issues as part of the regular features.

References

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