## PRACTICAL GUIDES AND CLINICAL RECOMMENDATIONS - WHY ARE THEY IMPORTANT?

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This issue of Acta Reumatologica Portuguesa presents two articles with orientations and guidance devoted to clinical practice: «Prophylaxis of hepatitis B reactivation with immunosuppressive therapy in rheumatic diseases. Orientations for clinical practice» from J Nunes et al and «Physiotherapy in rheumatoid arthritis: development of a practice guideline» by EJ Hurkmans et al.

The first one is a joined publication from Gastroenterology/Hepatology and Rheumatology and discusses a very hot and challenging subject, hepatitis B virus (HBV) infection reactivation in patients undergoing immunosuppressant therapy. Authors begin by saying that the reactivation of infection with hepatitis B virus is a potentially serious complication of immunosuppression, but can be identified and efficiently prevented. They also give a well documented background, tables and figures describing the natural stages of chronic hepatitis B virus infection, the diagnostic markers in hepatitis B virus infection, the definitions and diagnostic criteria used in HBV infection and the mechanism of HBV reactivation in patients under immunosuppressant therapies. The paper was then structured based on practical questions and answers: Who should be screened for HBV infection? How to screen? The differences between HBV therapy, prophylaxis and monitoring. Which rheumatic patients should start therapy and/or prophylaxis of HBV reactivation? When to start and to stop prophylaxis? Which drugs should be used? The answers to these questions established the rationale for the recommendations and practical guide issued. The summary at the end is simple and clear, what makes this article very useful for clinical practice.

The second article constitutes a practice guideline developed in Netherlands also with collaborations from different fields (Rehabilitation, Ortopedics and Rheumatology), and it was presented with the aim of improving the quality of the physiotherapy management in patients with rheumatoid arthritis (RA). The recommendations were developed based on current scientific evidence and best practice using the International Classification of Functioning, Disability and Health (ICF) and the ICF core sets for RA. At the end this physiotherapy practice guideline includes seven recommendations on the initial assessment, treatment and evaluation for patients with RA.

These articles represent two examples of how useful and practical recommendations can be. Ideally, guidelines should be supported by a thorough systematic literature review, should include, in its discussion and elaboration, experts from the different areas that are relevant for the debated issue, should be relevant for clinical practice, should previously identify the groups of physicians to be targeted, should be simple, practical and easily understandable, should have an implementation plan and a plan for the future evaluation of their impact in clinical practice and should be reviewed whenever new knowledge and evidence imply changes on the previous standard of care.

It is not an easy task to put together all these conditions but when it succeeds the output can constitute a major help to daily practice.

Sometimes legal issues related with guidelines are raised. Are guidelines a rule? Should they be mandatory? If physicians choose not to follow the guidelines could they be accused of malpractice?

Can recommendations be more harmful than useful?

In my personnel point of view, recommendations and practical guides are unique in the sense that they potentially gather the most relevant published body of information, assign the level of evidence, process and summarize it, and translate the output into simple and useful practical sentences and guidance. However, they should also be looked as general guides; in fact, the individual patient can show specific features for which general guidelines do not always apply. But in the end recommenda-

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tions and guiding documents can be an outstanding support for physicians in their daily practice. Enjoy these 2 articles!

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## References

- Nunes J, Marinho RT, Fonseca JE, Pereira da Silva JA, Velosa J. Prophylaxis of hepatitis B reactivation with immunosuppressive therapy in rheumatic diseases. Orientations for clinical practice. Acta Reumatol Port. 2011;36:110-118.
- Hurkmans EJ, van der Giesen FJ, Bloo H et al. Physiotherapy in rheumatoid arthritis: development of a practice guideline. Acta Reumatol Port. 2011:36:146-158.