Evaluating Clinical Practice Guidelines for Treating and Managing Vestibular Schwannoma

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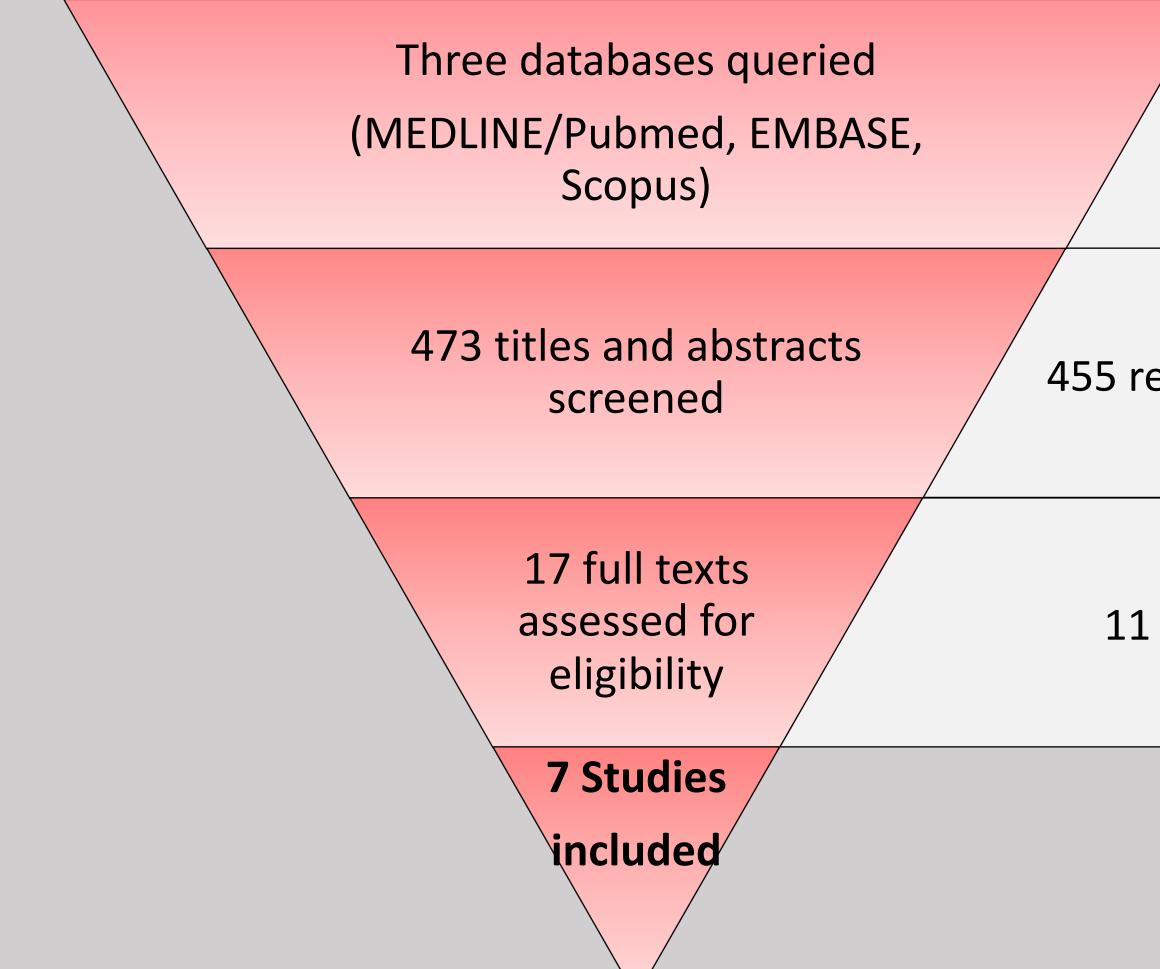
BACKGROUND

- **Vestibular schwannomas** are uncommon neoplasms mainly arising rom the vestibular component of cranial nerve VIII.¹
- Management include observation, microsurgical resection, stereotactic radiosurgery, and combinations thereof.¹

Objective: Utilize the AGREE-II instrument to appraise the quality of Clinical Practice Guidelines (CPGs) for Vestibular schwannoma treatment & management

METHODS

- Literature search performed inception 10/2022; PRISMA guidelines followed
- AGREE-II instrument assesses the quality and rigor of CPGs via 6 domains: Scope and Purpose, Stakeholder Involvement, Rigor of Development, Clarity of Presentation, Applicability, and Editorial Independence²
- A total of 23 total items to be scored graded on a 7- point scale (1strongly disagree; 7-strongly agree) based on completeness and quality of reporting
- 4 reviewers independently reviewed & scored each CPG
- Domain scores calculated with threshold for "satisfactory" to be >60%
- High quality = > 5 satisfactory, Average = 3-4, Low = < 3
- Interclass Correlation Coefficient (ICC) measured



References

- doi:10.1093/neuros/nyx586

785 records resulted

455 records screened out

11 studies excluded

Quality Appraisal of Included CPGs using Scaled Domain Scores

	Scope & Purpose	Stakeholder Improvement	Rigor of Development	Clarity of Presentation	Applicability	Editorial Independence	Average Score (Mean)	Overall Quality
NIH	100	76.38	26.04	84.72	44.79	0	55.32	Average
BAO	100	98.617	85.52	100	92.71	6.25	80.50	High
ISRS	84.72	47.22	70.31	93.05	26.04	50	61.89	Average
CNS	94.44	88.89	92.71	97.22	91.67	100.00	94.16	High
EANO	97.22	56.94	55.73	91.66	39.58	93.75	72.48	Average
EANS	84.72	62.5	70.83	100	43.75	100	76.97	High
FSRO	81.94	27.77	8.33	56.94	4.17	10.42	31.60	Low
Mean	92.66 ± 8.40	62.30 ± 22.30	59.52 ± 32.43	88.69 ± 14.95	43.90 ± 27.24	51.49 ± 46.33		

NIH = National Institutes of Health, BAO = British Association of Otorhinolaryngologists, ISRS = International Stereotactic Radiosurgery Society, CNS = Congress of Neurological Surgeons, EANO = European Association of Neuro-Oncology, EANS = European Association of Neurological Societies, FSRO = French Society for Radiation Oncology

Intraclass Correlation Coefficients (ICC)s for AGREE II Domains								
		95%						
AGREE II		Confidence	ICC					
Domain	ICC	Interval	Reliability					
Scope and purpose	0.943	0.815-0.989	Excellent					
Stakeholder involvement	0.962	0.874-0.993	Excellent					
Rigor of development	0.99	0.968-0.998	Excellent					
Clarity of Presentation	0.975	0.919-0.995	Excellent					
Applicability	0.974	0.918-0.995	Excellent					
Editorial independence	0.988	0.961-0.998	Excellent					

Olson JJ, Kalkanis SN, Ryken TC. Congress of Neurological Surgeons Systematic Review and Evidence-Based Guidelines on the Treatment of Adults With Vestibular Schwannomas: Executive Summary. Neurosurgery. 2018;82(2):129-134. Brouwers MC, Kho ME, Browman GP, et al. AGREE II: Advancing guideline development, reporting and evaluation in health care. C Can Med Assoc J. 2010;182(18):839-842. doi:10.1503/cmaj.090449

FINDINGS

- 2 CPGs were developed in t
- 4 CPGs were developed in E France, 2 European)
- 3 CPGs were high quality, 3 aver IOW
- Highest domain scores: "Scope Purpose" and "Clarity and Presentation"
- Lowest domain scores: "Applica and "Editorial Independence"
- ICC scores for all 6 domains rang from 0.937-0.983
 - Indicating high level of interagreement

he USA
Europe (UK,

CONCLUSION

osA be (UK, rage, 1 and bility"	 Most CPGs regarding vS treatment and management are of average to high quality Societies may increase CPG quality by improving the rigor of development, applicability, and editorial independence
ged rater	 LIMITATIONS Accuracy & validity not assessed Subjective grading Addressed by implementing calculating ICC

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