

National Institute of Clinical Studies

Ms Slutsky's visit is sponsored  
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# NICS Visiting Experts Program

NICS is Australia's national agency for closing gaps between best available  
evidence and current clinical practice.

NICS is funded by the Australian Government.



TURNING EVIDENCE INTO ACTION



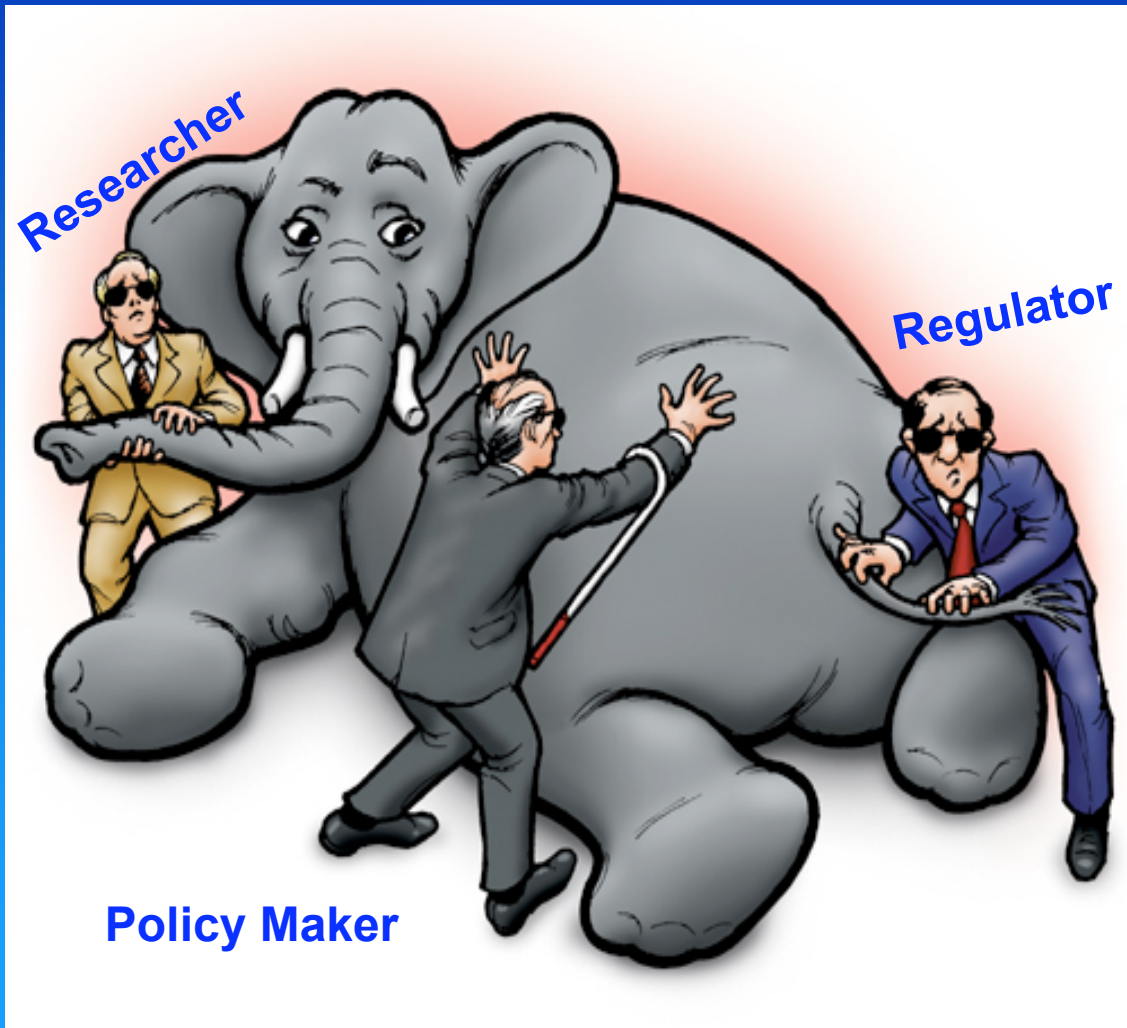
# Getting Your Research into Policy

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Jean Slutsky

Director, Center for Outcomes and Evidence

U.S. Agency for Healthcare Research and  
Quality





# Uses of Evidence for Decisionmaking

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- Product approval
- Product purchasing and formulary selection
- Benefit and coverage decisions
- Practice guidelines
- Quality review and improvement
- Clinician/patient decision-making
- Choosing plans or providers
- Organizational and management decisions
- Program financing and priority setting



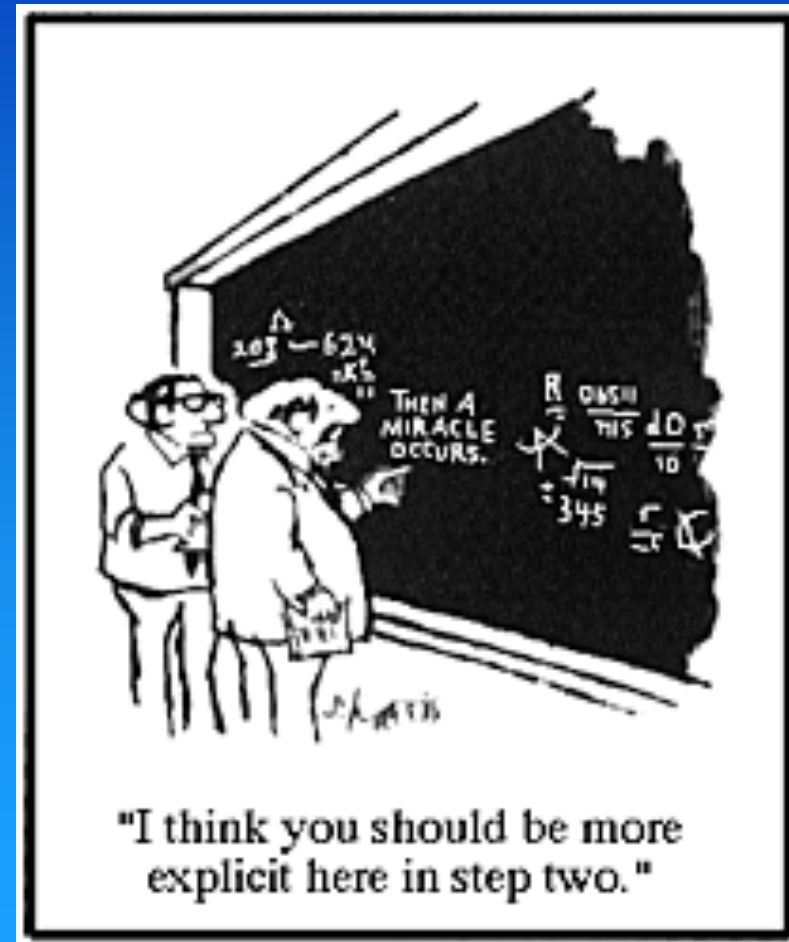
# Types of Decisions

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- Public policy
  - *Do we fund heart transplants?*
- Systems policy
  - *Where do we “locate” heart transplant services?*
- Clinical policy (“EBM”)
  - *Who should receive heart transplants?*

# Policymakers on Researchers

- They take forever to answer even the simplest question(s). Then they're late with the results.
- What is this stuff they write? Who can understand it?
- They work in their "ivory towers" and produce impractical or irrelevant ideas and recommendations.
- They're always hedging. I can't get a straight answer.
- They don't answer the question I thought I asked
- They take little responsibility for the implications of their findings.





START TALKING JACKSON. YOU'VE GOT THREE FLOORS TO JUSTIFY YOUR EXISTENCE



# Researchers on Policymakers

- They don't ask researchable questions.
- They don't accept uncertainty. They don't accept that reducing uncertainty costs more money.
- They don't appreciate the influence of "publish or perish" on my life.
- They want unrealistic turn-around for results.
- They expect me to drop everything and deliver results for policy input.
- They want "bottom line" answers to take them off the policy hook.
- They can't be trusted with my results - may misinterpret or misuse my results.



*"I've been reading the trashiest scientific abstract."*



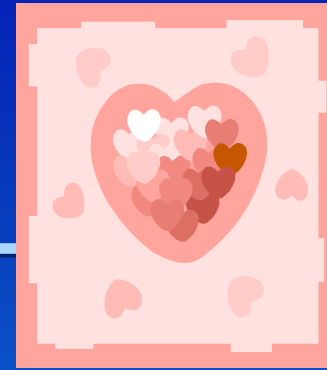
# If Researchers Ruled the World

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- Food in grocery stores would be alphabetized
- Holiday sales would be advertised in peer reviewed journals
- School room size would be directly related to sample size needed for NNL (numbers needed to learn)



ISO



Well developed systematic review, enjoys good health and doing the right thing, in search of perfect partner to make things happen and enjoy life.



# Conclusion From Systematic Review

Overall, antibiotics were more effective than placebo, reducing the risk of clinical failure by about 25 to 30 percent within 7 to 14 days after treatment initiation ( $p < 0.01$ ). However, symptoms improved or were resolved in 65 percent of patients without any antibiotic treatment at all (95% CI, 40- 91%). Amoxicillin-clavulanate, compared to antibiotics in the cephalosporin class, was 41 percent more effective in reducing clinical failure within 10 to 25 days after treatment initiation ( $p = 0.01$ ). In absolute terms, this means treating 100 patients with antibiotics in the cephalosporin class will lead to 3.5 more failures (95% CI, 0.86 to 6) as compared to amoxicillin-clavulanate.



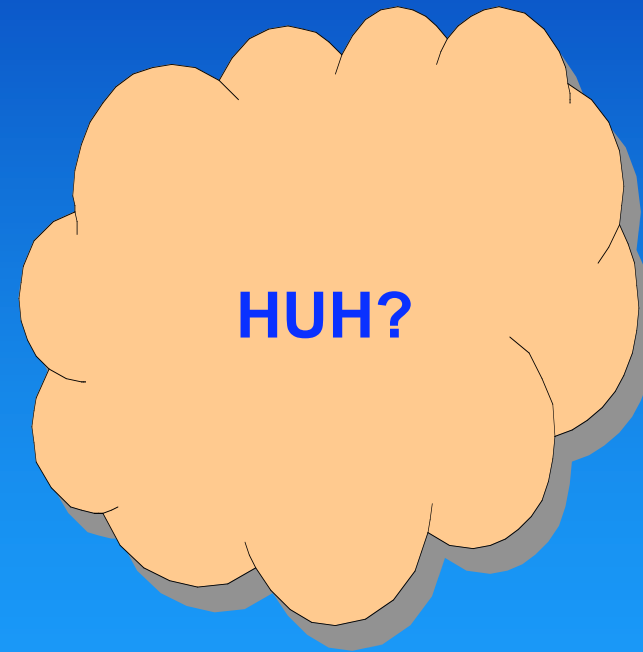
# Challenge for You

Systematic review for  
use

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.....  
.by people who don't  
do systematic  
reviews





# Sagan Effect

One of the most frequently cited reasons for scientists' reluctance to talk to the press is the so-called Carl Sagan effect, that is, renowned scientist Carl Sagan was criticized by his fellow scientists who assumed that because Sagan was spending so much time communicating with the public, he must not have been devoting enough time to his research.

J. Hartz and R. Chappel, *Worlds Apart: How the Distance Between Science and Journalism Threatens America's Future*. Nashville, TN: Freedom Forum First Amendment Center, 1997.



# Fact or Fiction

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Throughout his career, Sagan averaged a scientific peer-reviewed paper per month.

Michael B. Shermer (August 2002). *Social Studies of Science* 32/4:489-525.



# It is Hard to Change Beliefs

Popularization...is traditionally seen as a low status activity, unrelated to research work, which scientists are often unwilling to do and for which they are ill-equipped...Essentially, popularization is not viewed as part of the knowledge production and validation process but as something external to research which can be left to non-scientists, failed scientists or ex-scientists ...

Richard Whitley (1995), 'Knowledge producers and knowledge acquirers: popularizations as a relation between scientific fields and their publics,' in Terry Shinn and Richard Whitley (eds.), *Expository Science: Forms and Functions of Popularization*. Dordrecht/Boston, MA: D. Reidel Publishing



# Tips for Getting Research into Policy

Be clear on who the novice is...

- Start developing the answer years before being asked the question
- Remember the difference between being an advocate and a policy expert
- Remember the difference between a point estimate and a confidence interval
- Do not show off

Mitch Greenlick in *Health Services Research* 40:2 (April 2005)



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# Looking for Love in all the Wrong Places

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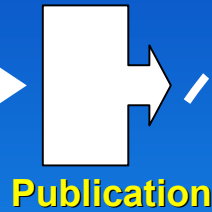
“I have gotten calls for two things from health services researchers: data and money. I have gotten two calls – only two – from health services researchers asking me what is important to the state and what they can do to help inform state health policy.”

Bruce Goldberg in *Health Services Research* 40:2 (April 2005)

# Supply-Side Research Paradigm

Research world:

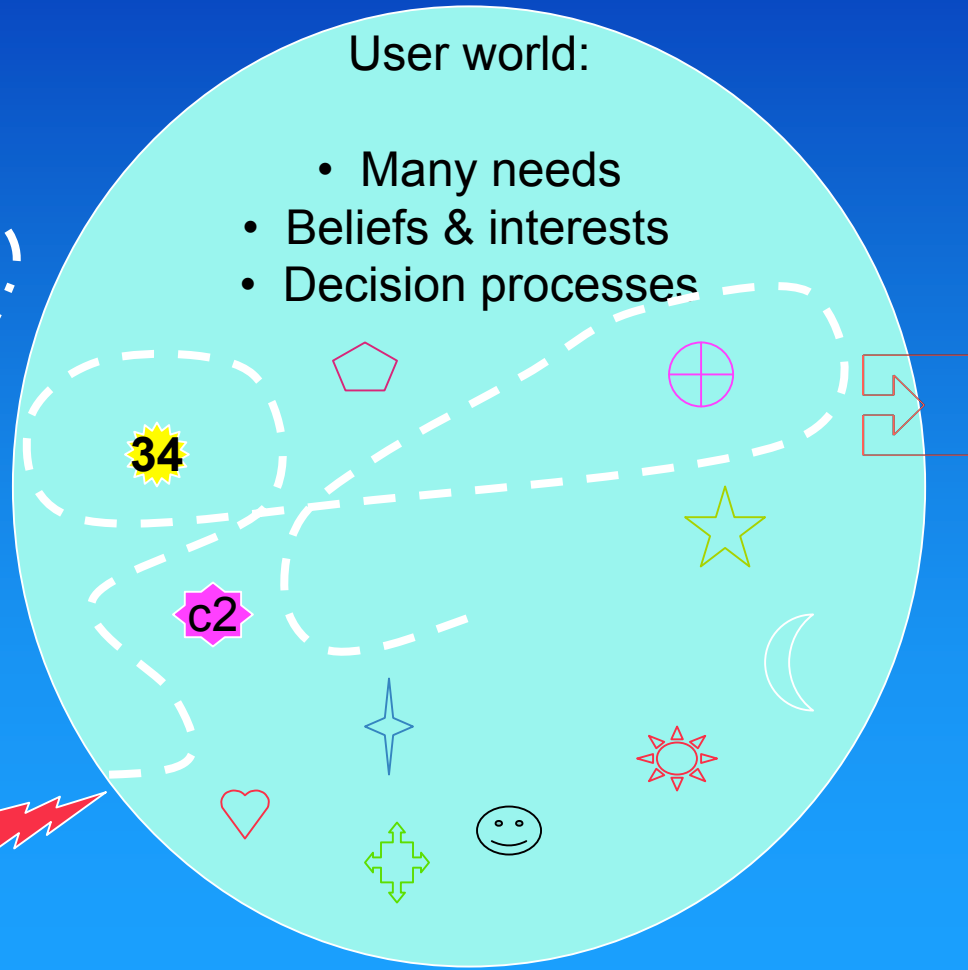
- Questions
- Hypothesis
- Study



User world:

- Many needs
- Beliefs & interests
- Decision processes

*The winding road to a receptor site*



# Demand/Supply Side Model

