

GRADE – something to know!

The aim of guidelines is to inform clinicians what the quality of the underlying evidence is and whether recommendations are strong or weak. Yet, it is crucial to know and acknowledge on how solid the ground is on which you are standing to make up your mind regarding diagnosis and treatment of your patient.

Confusion has nurtured our understanding what evidence really is. There are multiple systems for grading evidence and recommendations. There is, however, one system you should know and if ever possible apply: the GRADE system. Note that you should not consider any “modified GRADE approaches”, but instead the **GRADE system established by the GRADE working group**.

I will lead you through the important steps to understand the principle that you may be able to apply it in your clinical work in the future. For now, just remember the simple and straight forward **4 levels of the actual GRADE system** and what they mean with an example from sports medicine for each level:

Level of Evidence	Definition	Example
High quality	Further research is very unlikely to change our confidence in the estimate of effect	Treatment of asthma by inhaled steroids
Moderate quality	Further research is likely to have an important impact on our confidence in the estimate of effect and may change the estimate	school based physical activity interventions are effective at increasing cardio-metabolic risk factors
Low quality	Further research is very likely to have an important impact on our confidence in the estimate of effect and is likely to change the estimate	Ginko biloba to prevent acute mountain sickness
Very low quality	Any estimate of effect is very uncertain	Eating disorders predict dropout from sports

In the next newsletter you will hear about how the levels are build up and about important features of studies that you have to consider as they lead to a downgrading of a certain level of evidence.



«My grades could be better if the school had a data driven, evidence based curriculum in the classroom.»

Ref. Guyatt GH et al. GRADE: an emerging consensus on rating quality of evidence and strength of recommendations. BMJ 2008; 335-6