About this E-Bulletin
This e-bulletin is published by Health Quality Ontario (HQO). It is designed to keep you up-to-date on the research and reporting activities of HQO's Evidence Development and Standards Team (formerly the Medical Advisory Secretariat) and the work of the Ontario Health Technology Advisory Committee (OHTAC).

Where to Find It
The Ontario Health Technology Assessment Series can be accessed on HQO's website.

To subscribe to the e-bulletin, write to Subscriptions@hqontario.ca

Questions and Comments We welcome your questions and comments. You can write to Evidence Development and Standards Team at MASinfo@hqontario.ca and OHTAC at OHTACinfo@hqontario.ca.

Making Evidence Relevant | June 2012

Open for Public Comment

Epilepsy Care in Ontario: Updated Research and Recommendations

About 30% of people in Ontario with epilepsy continue to have seizures despite optimal drug treatment. In some of these patients, surgery is potentially an option to control the number of seizures they experience. Patients are carefully selected for surgery based on their frequency of seizures, location of seizure in the brain and type of seizures. There is good evidence to indicate that surgery is an effective and safe option for some patients with drug-refractory epilepsy.

Following an initial evidence-based analysis by the former Medical Advisory Secretariat and at the request of OHTAC, the Programs for Assessment of Technology in Health (PATH) Research Institute conducted a field evaluation in collaboration with the Centre for Brain Behaviour at the Hospital for Sick Children in Toronto. The field evaluation explored the barriers to accessing epilepsy surgery in Ontario. Based on the findings, OHTAC requested the creation of a Provincial Epilepsy Strategy Working Group to provide additional centre-specific data and a front-line perspective.

The working group report spurred the creation of an OHTAC Expert Panel on a Provincial Strategy for Epilepsy Care in Ontario. Their efforts produced a report on the current state of care for refractory epilepsy in Ontario and recommendations for a provincial strategy. OHTAC recommended that the report of the Expert Panel be used as a resource in developing a provincial approach to addressing epilepsy care. OHTAC posted its draft recommendation about epilepsy care, and related research and reports, and asked for comments from healthcare professionals and members of the public. The consultation

generated a very positive response.

Building on the original field evaluation, HQO's Board of Directors requested that further research be conducted to analyze the costs associated with implementing the proposed epilepsy strategy. The results are now posted for public comment.

Final Postings of Reports and Recommendations

The following final evidence-based analyses and OHTAC recommendations have been published in the Ontario Health Technology Assessment Series.

Investigating Risks Associated with Multiple Intravenous Infusions

The Ontario Health Technology Advisory Committee (OHTAC) engaged the Health Technology Safety Research Team (HTSRT) to conduct an analysis of risks and mitigation strategies associated with the administration of multiple IV infusions to a single patient. HTSRT worked in close collaboration on this project with the Institute for Safe Medication Practices Canada.

To date, the study team has completed two phases of work:

- Phase 1a: Situation Scan
- Phase 1b: Practice and Training Scan

Nine recommendations for Ontario hospitals emerged from the observational work done in Phase 1b. The Multiple IV Infusions Expert Panel reviewed these recommendations and OHTAC has approved them. Following a period of professional and public consultation, the Phase 1b report and OHTAC recommendations were finalized and have been published in the Ontario Health Technology Assessment Series.

Free Webinar on Multiple IV Infusion Safety

On May 30, a webinar on Multiple IV Infusion Safety was hosted jointly by the Association for the Advancement of Medical Instrumentation (AAMI) Foundation's Healthcare Technology Safety Institute, the Infusion Nurses Society, the Institute for Safe Medication Practices (ISMP) and ISMP Canada. The session focused on the nine recommendations mentioned above and the speakers were Andrea Cassano-PichÃ© and Mark Fan, both human factors engineers with the HTSRT, and Christine Koczmara, RN, a senior analyst with ISMP Canada. View the archived webinar.

24-Hour Ambulatory Blood Pressure Monitoring in Hypertension

Accurately measuring blood pressure can be challenging. While blood pressure varies for most people naturally throughout the day, some individuals may exhibit "white-coat hypertension" where blood pressure registers as high while at the doctor's office but is otherwise normal in everyday life.

24-hour ambulatory blood pressure monitoring technology involves recording an individual's blood pressure every 15-30 minutes during usual activities over a 24-hour period. Currently this device is not insured in Ontario but it is available in most large urban centres through selected specialists and/or family physician groups.

HQO's Evidence Development and Standards team conducted a systematic review of the evidence of the clinical effectiveness of this technology for managing hypertension and commissioned its research partner - the Toronto Health Economics and Technology Assessment (THETA) Collaborative - to develop an economic analysis. The final report and OHTAC recommendations are now available for download.

Transcatheter Aortic Valve Implantation for the Treatment of Aortic Valve Stenosis

Transcatheter Aortic Valve Implantation (TAVI) - a minimally invasive procedure - was developed to provide an option for patients not considered eligible for surgical replacement of the aortic valve due to advanced age or other co-morbidities. HQO's Evidence Development and Standards team conducted a systematic review of the literature about the clinical effectiveness of TAVI and the Programs for Assessment of Technology in Health (PATH) Research Institute developed an economic model for Ontario. The purpose of the model was to estimate the cost-effectiveness and cost-utility of TAVI compared to surgical and medical management.

OHTAC's final recommendations and the evidence-based review are now available for download.