A critical group appraisal of: periprocedural antithrombotic management for lumbar puncture using the AGREE II Instrument

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Comments

Domain 1. Scope and Purpose
Item 1

- Appraiser 1: This guideline aims to create recommendations for the peri-procedural management of antiplatelets and anticoagulants when a lumbar puncture is performed in order to standardise clinical practice within neurology.
- Appraiser 2: Clear objectives in place

Item 2

- Appraiser 1: The overall question is posed at the introduction, and then this is further broken down into more specific categories.
- Appraiser 2: The question is specifically described and if further divided into specific categories in the paper

Item 3

- Appraiser 1: The guideline discusses which patient populations the recommendations apply to.
- Appraiser 2: This is very clear

Domain 2. Stakeholder Involvement

Item 4

- Appraiser 1: The guideline authors are from the neurology and haematology fields.
- Appraiser 2: Authors include neurologists and an hematologist

Item 5

- Appraiser 1: This guideline has been approved by the Association of British Neurologists.
- Appraiser 2: The opinion of the Association of British Neurologists has been sought

Item 6

- Appraiser 1: The guideline described that it should be used to guide neurological clinical practice.
- Appraiser 2: The target users is well defined - anyone involved in undertaking Lumbar Puncture

Domain 3. Rigour of Development

Item 7

- Appraiser 1: Specific systematic search methods were not included as this was not felt to be able to be done within the word count and reference limit for the proposed journal.
- Appraiser 2: There is dearth of evidence/guidelines on this topic. A formal systematic review was therefore not undertaken; however, the paper has included all relevant literature on the topic and it is very unlikely that a specific systematic search would
have yielded any extra information.

**Item 8**

- Appraiser 1: The most up to date guidelines relevant to this topic have been included.
- Appraiser 2: All relevant up to date guidelines have been included

**Item 9**

- Appraiser 1: The strengths and weaknesses of the available evidence are discussed in detail.
- Appraiser 2: These are discussed in detail

**Item 10**

- Appraiser 1: The available evidence is summarised and then presented as an overall recommendation for each specific topic.
- Appraiser 2: The paper is a distillate of all available evidence on the topic and specific recommendations are presented.

**Item 11**

- Appraiser 1: The recommendations consider the complex nature of patients and discusses the potential variables when considering risk versus benefit.

**Item 12**

- Appraiser 1: The recommendations follow on from the summarised evidence.

**Item 13**

- Appraiser 1: The guideline has been externally peer reviewed through submission to the practical neurology journal.
- Appraiser 2: Has been peer reviewed through submission to the practical neurology journal

**Item 14**

- Appraiser 1: Updating the guideline as new evidence emerges is mentioned, however a specific date has not been set for this.
- Appraiser 2: A specific deadline has not been set but a clear mention is made about the fact that the guideline will need to be updated based on emerging evidence.

**Domain 4. Clarity of Presentation**

**Item 15**

- Appraiser 1: Each recommendation is specific to certain circumstances.
- Appraiser 2: The recommendations are clear and focused.
Item 16

- Appraiser 1: The guideline discusses the varying approaches to the management of anticoagulants and antiplatelets before suggesting an overall recommendation.
- Appraiser 2: Alternative options of management are detailed.

Item 17

- Appraiser 1: Key recommendations are in bold typeface, bullet pointed, at the end of each section.
- Appraiser 2: These are all bullet pointed at the end of each section.

Domain 5. Applicability

Item 18

- Appraiser 1: The guideline discusses the complex nature of some patients, and that if they fall out of the parameters of the guideline then they may need to be discussed locally with haematology or cardiology services.
- Appraiser 2: Given the complexity of the procedure, barriers are identified and readers are advised to discuss with local hematology or cardiology teams when the scenario falls outside the recommendations in the guidelines.

Item 19

- Appraiser 1: A visual summary is provided for ease of use in applying the guidelines in a clinical setting.
- Appraiser 2: A clear visual summary is included.

Item 20

- Appraiser 1: The guidelines do not discuss resource implications as this are not thought to be particularly or potentially significant.
- Appraiser 2: This has not been addressed as extra resources are not required, given the fact that this is a routinely performed clinical activity in practice. The recommendations aims to improve quality of existing practice.

Item 21

- Appraiser 1: The recommendations in the guideline could potentially be audited.
- Appraiser 2: A criteria has not been provided but an audit could easily be undertaken based on the recommendations.

Domain 6. Editorial Independence

Item 22

- Appraiser 1: No funding was received.
- Appraiser 2: The study has received no funding.
Item 23

- Appraiser 1: There are no competing interests.
- Appraiser 2: No competing interests.

Overall Assessment

- Appraiser 2: This paper summarizes the existing literature on the topic and offers recommendations to guide periprocedural antithrombotic management for lumbar puncture, based on the analysis of best available evidence or available evidence where best evidence is not available. This paper will have significant impact on clinical practice.

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