



Is there still a role for national and regional clinical practice guidelines?

¿Aún existe un papel para las guías de práctica clínica nacionales y regionales?

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Clinical practice guidelines are intended to provide evidence-based guidance to a wide range of health-care professionals regarding the best way to deliver the most up-to-date and appropriate medical care. In oncology, clinical practice guidelines are widely utilized by clinicians when making therapeutic decisions across all tumor types, with many of these guidelines, such as those published by the National Comprehensive Cancer Network becoming a mandatory reference for oncologists in training learning how to treat a new disease, and for experienced oncologists who want to know what the best therapeutic choices are for a given clinical scenario. Adherence to clinical practice guidelines has been shown to improve clinical outcomes for patients across various malignancies, since it allows for the provision of evidence-based care¹. Guideline-concordant provision of cancer care may also lead to the avoidance of under- and over-treatment, and it serves as a barrier for the implementation of “creative” oncological approaches, which may lead to harm and to unnecessary expenditures.

The effectiveness of clinical practice guidelines is not only dependent on the quality of the information on which they are based, but also on how feasible it is to implement them in everyday clinical practice. Most clinical practice guidelines in oncology are based on evidence obtained from clinical trials which are often undertaken in high-income settings and, in many cases, using drugs that are not available in low- and middle-income countries such as Mexico. In addition, many

international guidelines assume a wide availability of diagnostic and therapeutic assets that may not be easy to obtain in resource-limited settings. Other factors that may lead to a low adherence or low applicability of recommendations include patient characteristics, complexity of suggested interventions, and issues related to payment models across institutions.

In Mexico, the Mexican Society of Oncology (SMeO) has led the way in the creation of clinical practice guidelines, in many cases partnering with other organizations to gather multidisciplinary teams that can work together in guideline development. In the past, many of these guidelines have been published in the Mexican Journal of Oncology, with some being in the list of the most downloaded manuscripts of our journal². We recently evaluated the adherence to one of those guidelines, the *Consenso Mexicano sobre Diagnóstico y Tratamiento del Cáncer Mamario* (Mexican Consensus on Diagnosis and Treatment of Breast Cancer) among members of SMeO, with initial results presented at the 2021 San Antonio Breast Cancer Symposium³. Interestingly, we found that a large proportion of cancer care providers adhered to the recommendations of the Consensus, and that a significant number, particularly those working at public institutions, used it as their main clinical practice guideline for the treatment of breast cancer. Interestingly, the main obstacles for its implementation included logistical barriers and the lack of multidisciplinary teams and resources³. These results highlight the relevance of creating and publishing

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national clinical practice guidelines considering the local setting, including the utilization of stratified recommendations considering the various health-care settings and resources, taking advantage of input from local physicians and policy makers.

In the months and years to come, our editorial team plans on expanding and strengthening the publication of clinical practice guidelines for various types of cancer in the Mexican Journal of Oncology, starting with the publication of the Mexican guidelines for the treatment of small cell lung cancer, which will be made available online in the second half of this year. In addition, we eagerly wait for the 2023 Breast Cancer Consensus, which has also made the Mexican Journal of Oncology its home, and of further guidelines created by SMeO and other organizations. As we move forward, we encourage groups and societies working on clinical practice guidelines across Latin America to consider the specific needs of cancer care providers in our region who may utilize them as their main reference, and to be mindful of the applicability of guideline

recommendations to diverse settings with differing resources. Likewise, we particularly welcome submissions illustrating the implementation of high-quality cancer care in Mexico and in other countries in our region, mostly those providing guidance regarding the implementation of multidisciplinary clinics and programs in both private and public institutions. It is through this sharing of successful cancer care experiences that we will be able to create the appropriate environment and obtain the proper interdisciplinary knowledge to move oncology forward across our region.

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