CareSearch: Supporting Knowledge Translation in Palliative Care

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CareSearch Project
Today’s Presentation

- Introduce Knowledge Translation
- Overview of CareSearch
- Website content & development
  - eg, library related research
  - Contribution of library & information profession
- A moment’s reflection
What am I?

Research
Utilisation

Diffusion of Innovation

Quality Improvement

Knowledge Transfer

Evidence Based Medicine

Evidence Based Practice

Knowledge Brokering

Evidence Implementation

Evidence Translation
Knowledge Translation

“All steps between the creation of new knowledge and its application and use to yield beneficial outcomes for society”

CIHR, 2004
Knowledge Translation

- Broader than health
- Acknowledges complexity
- Multiple players
- Multiple pathways, multi-directional
- Emphasis on quality and evidence
Knowledge Translation in Health

- Better health outcomes
- $560 billion NHMRC funding yet … gaps exist
- Knowledge translation is highly relevant
Knowledge Translation and CareSearch

- CareSearch palliative care knowledge network
- Complex strategy that supports knowledge translation
- Embeds understanding of KT in design and content, emphasis on multiple players, roles, and pathways, quality & evidence
Welcome to CareSearch. CareSearch is an online resource of palliative care information and evidence. All materials included in this website are reviewed for quality and relevance.

What's New... on CareSearch?
in the community?
in the literature?

Quick Links
Using CareSearch
Indigenous
GPs
ComPAC
PCC4U

What is Palliative Care
For Patients and Families
Finding Services
Clinical Practice
Finding Evidence
Education
Research Resources
Professional Groups
About CareSearch

Proudly linked to:
CareSearch
Introduction
Audio Version
Flinders University
HON@CODE
HEALTH Insite

CareSearch is funded by the Australian Government Department of Health and Ageing as part of the National Palliative Care Program.
Last updated on 26 May 2008
All KT processes
tailored for different users, e.g., Databases & Resources
High quality, reputable sites for consumers
High quality, reputable ‘EB’ sites for healthcare professionals
The Story of PubMed Searches

• A microcosmic example of supporting KT
• What is the best Medline search strategy for palliative care literature?
• Rigorous methodology produced the ‘best search’ = evidence generation
• Usable in the real world? eg, octogenarian
The Story Continues …

• Could a searcher generalise this evidence about searching?
• Yes, if
  – an OVID user
  – general medical journals only
  – knew to over-ride default options
• So, more research led to revisions
  – PubMed, all fields, all journals, palliative journals
The Next Step

What good is a vaccine if no-one is vaccinated?

What good is validated search strategy if no-one uses it?

Evidence Generation → Evidence Generalisation → Evidence Implementation
Evidence Implementation

• How could we facilitate uptake of evidence about how to search for palliative care literature?
• Website strategies
### Databases and Resources

These links provide access to freely available, public resources that are largely relevant to palliative and supportive care.

<table>
<thead>
<tr>
<th>General</th>
<th>Cochrane Library, PubMed Clinical Queries, PubMed, TRIP database</th>
</tr>
</thead>
<tbody>
<tr>
<td>Palliative care</td>
<td>PubMed Topic Searches, Palliative &amp; Supportive Care Specialist Library, CareSearch Grey Literature, CareSearch Review Collection, Share Zedek Cancer Pain &amp; Palliative Care Database, Run the PubMed Palliative filter</td>
</tr>
<tr>
<td>Complementary Medicine</td>
<td>National Center for Complementary and Alternative Medicine (US), Memorial Sloan Kettering Cancer Centre, About Herbs, Botanicals &amp; Other Products (US), American Cancer Society, Complementary &amp; Alternative Methods for Cancer Management (US)</td>
</tr>
<tr>
<td>Online Free Journal Collections</td>
<td>Free Medical Journals, Geneva Foundation for Medical Education and Research</td>
</tr>
</tbody>
</table>
50+ common topics embedding evidence and expertise
User choices; Our evidence combined with others’ evidence
Immediate access to relevant research evidence – 2 clicks
Dyspnoea (shortness of breath) is described as 'an uncomfortable awareness of breathing'. [1] It is a subjective symptom which may not correlate with measurable physical abnormalities such as hypoxia. Treating the dominant cause of breathlessness, including the contributing co-morbidities, is likely to be more effective, but is not always possible.

Shortness of breath becomes more frequent in patients as their disease progresses. [2] It is associated with a poorer prognosis. [3] and is usually multifactorial in patients with advanced disease.

What is known:

1. Evidence supports the use of either oral or parenteral opioids for relieving of dyspnoea. There is no evidence to support the use of nebulised opioids. [4]
2. A recent meta-analysis has shown that oxygen does not improve symptom dyspnoea in cancer patients who are mildly or non-hypoxaemic, although it is a sub-population who do experience benefit. [5] A systematic review found evidence for the benefit of oxygen in patients with dyspnoea and advanced from any cause, although the numbers studied were very small. [6]
3. If drainage of a malignant pleural effusion is required and is clinically apparent evidence supports the effectiveness of thoracoscopic talc pleurodesis. [7]
4. Research from small trials supports non-pharmacological interventions including breathing re-training, activity planning and adaptation strategies, counselling and relaxation. [1] A recent Cochrane review has not identified strong evidence to support these interventions; however, most studies were not done in a palliative care setting.
User can tailor the search & readily combine with best evidence about finding palliative care literature.
What the user doesn’t see …
eg, hiccups in palliative care
What’s New in the Literature

This page enables you to quickly review recent additions to the palliative care literature base found in PubMed. These three searches automatically limit the retrieved items to palliative care articles using the palliative care filter.

- Last 3 Months
- Last 4 weeks
- Last 7 Days

Related CareSearch pages:
- Related Term Searches
- CareSearch Review Collection

This page was created on 19 May 2006.
Summary re PubMed Searches

- Robust evidence generalised to the real world, combined with professional searching expertise
- Address varying needs/knowledgebase of users
- Multiple points of access
- Emphasis on quality/evidence
Interface with our Profession

- **NAG Group**
  - Prue Deacon, Jill Buckley-Smith

- **Team members**
  - Desley Reid-Orr, Ruth Sladek & their professional networks eg, Cheryl Hamill, Jess Tyndall

- **Reviewers**
  - Catherine Voutier, Dagmar Cookes, Maureen Bell

- **Library services**
  - SRGH, SFU, document delivery services
Interface with our Profession

• Professional journals
  – JMLA, HILJ their editors, editorial boards, reviewers and readers

• Online collaborators
  – >20 contributors to Finding Australian Content …

• Library websites & bibliographic systems
  – eg, PubMed, government department websites

• Invisible library & information workers behind many websites & services
  – eg, CareSearch blurb, Canada & AliaHEALTH
“… we have got to see ourselves as part of a very big picture, and not part of a little box … there is a mindset that says I do the work, I deliver my library services and I do a good operational job. A large number of our colleagues don’t lift their sights above that and say, actually, I’m part of a very large profession that has a fundamental impact on social, educational and economic processes, and I need to re-engage with the whole of that …”

(Bob McKee, CE, CILIP)
Some Final Thoughts

- We are fundamentally integrated in KT activities
- The challenge: potential and actual roles
- In search of genesis …
- KT provides a framework to reflect on depth and breadth of our value, and roles as individuals and in the landscape.
Questions?
CareSearch would like to thank the many people who contribute their time and expertise to the project including members of the National Advisory Group and the Knowledge Network Management Group.

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www.caresearch.com.au