

AHCPR & Duke to Produce Headache Evidence Reports

CCGPP, FCER & CHIROPRACTIC CONSORTIUM ASKED TO NOMINATE REVIEWERS

Editorial Staff

The Agency for Health Care Policy and Research (AHCPR), an agency within the U.S. Department of Health and Human Services, was created in December of 1989 to, among other goals, facilitate the "development of practice guidelines and measurements of quality care." Chiropractic's first involvement with the AHCPR was a chiropractic cost comparison paper presented by Reed Phillips, DC, PhD, then acting president of Los Angeles College of Chiropractic.¹

When the AHCPR announced its intentions to develop practice guidelines for acute low back disorders,² many in the chiropractic profession accepted the news with a distinct sense of uneasiness. But for the first time in our history, chiropractic researchers Scott Haldeman, DC, MD, PhD, and John Triano, DC, MS, were included as members of this federally funded, multidisciplinary guideline panel.³

The release of the AHCPR's clinical guidelines, Acute Low Back Problems in Adults, sparked numerous positive articles in popular publications across North America. Thus, when the Agency announced the formation of a headache guideline panel to include a chiropractor (John Triano, DC,MS),⁴ the profession was hopeful about the potential outcome.

But suddenly, the AHCPR came under fire from a surgical group calling itself the Center for Patient Advocacy.⁵ This group was extremely effective in their efforts to lobby the U.S. Congress, and was eventually successful in causing the AHCPR to abandon their role in the development of clinical guidelines. This caused the headache panel to shutdown, though they had already produced the first draft of the guidelines for the diagnosis and treatment of headache.⁶

Now, almost a year later, the Center for Health Policy Research and Education at Duke University and the AHCPR are inviting nominations for peer reviewers of an AHCPR-sponsored evidence report on the diagnosis and treatment of chronic headache pain. The evidence report will be a systematic review and analysis of the English language literature on migraine and tension-type headache, and will make use of the work of the original headache panel. This report will be produced in seven installments:

1. acute drug treatment of migraine (including emergency treatment);
2. acute drug treatment of tension-type headache;
3. preventive drug treatment of migraine;
4. preventive drug treatment of tension-type headache;

5. behavioral treatments (relaxation training, biofeedback, and cognitive-behavioral/stress-management therapy) and physical treatments (cervical spinal manipulation, mobilization/physical therapy, and acupuncture) for migraine and tension-type headache;
6. diagnostic testing for headache patients (particularly neuroimaging);
7. cost of headache.

The seven component reports will be free-standing documents, each with an introductory section describing the methodology used in identifying and screening the literature in that area, and analyzing the data obtained from the literature, along with a complete list of references.

While these reports will not be in the form of guidelines, but the results of the literature searches, they can be used by various private and public sector organizations as the basis for practice guidelines and other quality improvement instruments.

The seven component reports will undergo separate peer reviews of approximately one month each, expected to be completed by the middle of next year. Of the 35 organizations contacted, only three chiropractic organizations were asked to nominate reviewers: the Council for Chiropractic Guidelines and Practice Parameters, the Foundation for Chiropractic Education and Research, and the Consortium for Chiropractic Research.

While it is not certain how these reports will be published, they are certain to be of interest. From the mammoth headache medication companies, to the health care providers, and ultimately to the consumer, this is an issue that ultimately affects almost everyone.

References

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