



Canadian Task Force on Preventive Health Care

Developing and disseminating clinical practice guidelines for primary preventive care based on systematic analysis of scientific evidence.



Message From the Chair

Greetings! In this issue, I am pleased to announce the release of our newest clinical practice guideline. In March 2017, the CMAJ published the CTFPHC’s *Recommendations on hepatitis C screening for adults*. For more information about the hepatitis C guideline, systematic review, and associated KT tool, please visit the [CTFPHC hepatitis C guideline page](#).

As always, we appreciate your interest in the CTFPHC and we encourage you to stay up to date on our work by visiting our website at www.canadiantaskforce.ca.

Sincerely,

Marcello Tonelli, MD SM
Chair, CTFPHC

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About Us

The Canadian Task Force on Preventive Health Care (CTFPHC) is composed of experts who develop recommendations for clinical preventive services delivered by Canadian primary care practitioners. The CTFPHC is responsible for prioritizing the topics that will be reviewed and works with the Global Health and Guidelines Division (GHGD) of the Public Health Agency of Canada to define the analytic framework and scope of each topic. In the preparation of evidence reviews and the development of recommendations for each topic, the CTFPHC collaborates with two evidence review and synthesis centres and the GHGD. The CTFPHC also leads knowledge translation (KT) activities to promote guideline reach and uptake.

Release of the CTFPHC's Hepatitis C Screening Guideline

In March 2017, the CMAJ published the CTFPHC's fourteenth guideline. This latest guideline addresses screening for hepatitis C virus in adults. Hepatitis C is a virus that attacks the liver and can cause liver disease. It can be transmitted to others directly through blood-to-blood contact. Less common modes of transmission include vertical transmission, high-risk sexual contact, unsterilized tattoo or piercing equipment, and occupational exposure. It is estimated that 3% of the world's population has a chronic HCV infection. It is estimated that approximately 0.64%-0.71% of Canadians (220,000 – 245,000 people) have chronic HCV and approximately 44% of those individuals may be undiagnosed. Not all individuals with chronic HCV infection will develop cirrhosis or signs of symptoms indicative of liver disease.

The CTFPHC recommends against screening for hepatitis C in adults who do not present any risk factors for hepatitis C. This is a strong recommendation based on very low quality of evidence. The CTFPHC determined its recommendations given the low prevalence of HCV in Canadians who are not at elevated risk for HCV, the lack of direct evidence on the benefits and harms of screening in all groups of the population, and the very low quality of indirect evidence. As a result, there is substantial uncertainty about the effectiveness of screening for HCV among adults in Canada.

This recommendation does not apply to pregnant women or adults who are at elevated risk for hepatitis C, such as individuals with current or history of injection drug use; individuals who have been incarcerated; individuals who were born, travelled, or resided in HCV-endemic countries; individuals who have received health care where there is a lack of universal precautions; recipients of blood transfusions, blood products, or organ transplant before 1992 in Canada; individuals with HCV exposure or anyone with clinical clues suspicious for HCV infection.

Resources

To accompany the hepatitis C guideline, the CTFPHC developed a clinician FAQ sheet. The FAQ sheet provides answers to common questions that clinicians may have about hepatitis C screening. Copies of the clinician FAQ are available to download for free on the CTFPHC website [hepatitis C guideline page](#). As always, the CTFPHC encourages members of the public to discuss screening for hepatitis C with their primary care practitioner, who is aware of their health background.

Announcements

Clinical Prevention Leaders Network Recruitment

CALL FOR APPLICATIONS

The Canadian Task Force on Preventive Health Care (CTFPHC) is currently recruiting primary care practitioners to participate in its Clinical Prevention Leaders (CPL) Network initiative.

This is a 2-year pilot initiative and research study led by St. Michael's Hospital and aimed at developing and evaluating a network of clinical prevention leaders, with expertise in CTFPHC guideline development and implementation, across Canada. The purpose of this network will be to promote the uptake of evidence-based guidelines and to address barriers to guideline implementation at a local level through educational outreach and other knowledge translation activities.

Role:

- A voluntary commitment to a 2-year term with the opportunity for extension (+1-2 years);
- Participation in 3 CPL training webinars and monthly CPL Network teleconference calls;
- Participation in self-learning and assessment activities (e.g., reading guidelines, quarterly activity logs);
- Participation in network evaluation research study (completion of a survey at the 6-months, 1-year and 2-year time points);
- Optional participation in monthly CTFPHC teleconference calls and CTFPHC in-person meetings (3 per year);
- Supporting the dissemination and use of CTFPHC KT tools and resources;
- Addressing context-specific barriers to guideline use through educational outreach activities and interactive discussion; and
- Supporting the assessment of primary care practitioner (PCP) local education and resource needs.

Benefits:

- You will earn 3 CFPC credits per hour of participation in this program;
- You will receive high-quality training on guideline development and implementation from guideline and knowledge translation (KT) experts (free of charge);
- You will have the opportunity to apply to be a full CTFPHC member;
- You may have opportunities to attend in-person meetings and to represent the CTFPHC at key conferences; and
- You will have the opportunity to shape the development of a network of leaders across Canada who will promote the use of evidence-based preventive health practices in primary care.

Risks:

- There are no anticipated risks for choosing to participate in this pilot initiative and research study

Eligibility:

- Interest in taking on a leadership role within your network and community around preventive health care;
- Former CTFPHC member status or registered primary care clinician with the CFPC;
- Minimum of 5 years of practice in a primary care setting;
- Demonstrated experience delivering educational outreach sessions (i.e., delivery of presentations/seminars aimed to increase knowledge and skills in a particular area);
- Understanding of the CTFPHC and approach to evidence-based guidelines and appreciation for the CTFPHC philosophy of weighing benefits and harms when considering population-based screening interventions;
- No significant conflicts of interest (e.g., no strong ties or affiliations with industry);
- Ability and willingness to commit to a 2-year term.

To apply:

- Complete and submit the application form found on our website at canadiantaskforce.ca/get-involved/
- Submit a copy of your updated CV;
- Submit two (2) letters of recommendation
- Please submit all of the above to info@canadiantaskforce.ca with the subject line ‘CPL Network application’

For more information on this initiative, please contact **Danica Buckland (Project Lead)** (BucklandD@smh.ca) with the subject line ‘CPL Network’.

GRADE Update

The CTFPHC develops its guidelines using the Grading of Recommendations, Assessment, Development and Evaluation (GRADE) method. This is an internationally recognized method for evaluating systematic review evidence to develop clinical practice guidelines.

As part of its KT activities, the CTFPHC is conducting a research project to identify the best ways to organize and present guideline recommendations and content to Canadian primary care practitioners. Data collection and analysis is now complete. The results will inform how the CTFPHC presents recommendations and guideline information in its guidelines and KT tools.

For more information on how the CTFPHC applies the GRADE method in its guideline development work, visit www.canadiantaskforce.ca/methods/grade.

Opportunities for Engagement**Patient Engagement in Guideline Development**

The CTFPHC engages patients in its guideline development process. Specifically, the CTFPHC recruits patients to provide input at up to three stages of the guideline development process: (1) when outcomes are selected for inclusion in the systematic review protocol; (2) when the final guideline recommendations and knowledge translation (KT) tools are developed; and (3) when patient KT tools are usability tested. The CTFPHC uses feedback provided by patients to guide the search for evidence on the harms and benefits of preventive health care interventions and to develop KT tools to accompany the guidelines.

Usability Testing of Practitioner Tools

The CTFPHC produces practitioner tools to support each of its guidelines. To ensure that the content, layout, navigation, and aesthetics of these tools are appropriate and useful for practice, we conduct usability testing with practitioners. If you are interested in reviewing and providing feedback on one of our upcoming guideline tools, please email Kavitha Thiyagarajah, research assistant, at thiyagarajak@smh.ca for more information. Note that we offer \$100 compensation for a one-hour telephone interview.

Guidelines in Progress

Forthcoming guidelines developed by the CTFPHC will focus on the following topics:

Screening for [abdominal aortic aneurysm](#)

Screening for [asymptomatic bacteriuria in pregnancy](#)

Screening for [impaired visual acuity](#)

Screening for esophageal cancer

Topic Suggestions

Is there a preventive health topic that you would like to see the CTFPHC develop a clinical practice guideline for? Let us know what you are passionate about! We accept topic suggestions on a rolling basis and would love to hear from you. To submit a suggestion, please email us at info@canadiantaskforce.ca with the subject line “Topic Suggestions”.

Suggestions for the next newsletter

Is there a subject that you would like to see addressed in the next issue of the CTFPHC newsletter? Let us know what you'd like to see covered! We accept suggestions on a rolling basis. To submit a suggestion, please email Kavitha Thiyagarajah, research assistant, at thiyagarajak@smh.ca with the subject line “Newsletter Suggestions”.