Implementation of ESC Guidelines: Is it Primarily a Scientific, Political, or Financial Matter?

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t is well known that, on a regular basis, the European Society of Cardiology (ESC) issues a range of carefully-written guidelines that cover every important part of cardiovascular medicine. Recognised experts are enlisted to carry out this important mission, spending time and effort in order that evidence-based medicine may be applied more widely within our profession.

With a view to educating its members appropriately, the ESC provides with each set of guidelines, apart from the initial and rather extensive texts, executive summaries and pocket guidelines, so that the new messages can be communicated to physicians in a clear, summarised form. At the same time, it encourages implementation by collaborating with national cardiological societies in the translation of the texts and in the education of the national cardiological communities.

Taking all into account, this ESC initiative is to be applauded, and we cannot but recognise the professionalism and tenacity of the Society when it comes to writing and disseminating these guidelines. On the other hand, however, we know that in the majority of ESC countries the guidelines are implemented to greatly varying degrees. Thus, the question arises: what stands as the main obstacle to the correct implementation of ESC guidelines? Is it a lack of knowledge and suitable education? Is it an absence of political will on behalf of national governments? Or is it a matter of inadequate financial resources?

It would be easy to reply that all the above contribute, in a proportion that varies from country to country, to the problem of guideline implementation. However, we need to focus on the differences and explore the reasons for this reality.

A lack of education?

Of course, deficient education and lack of knowledge are a problem. A large number of cardiologists, perhaps even the majority, in various European countries are unaware of significant parts of the guidelines.

There is a need, therefore, for cardiologists in every country to be continually and systematically informed concerning the guidelines, by educators with the ability and experience to communicate the main messages to their students. It must become more widely known that the guidelines have been proved to contribute to improvement in patients' quality of life and life expectancy. Finally, we must overcome the reservations of those who question or reject the guidelines without providing clear justification, simply expressing their flat disbelief, for this or that reason.

A political matter?

Of course, it is a political matter, too. More generally, most governments in ESC countries give priority to limiting health care expenditure and are aggrieved when faced with the increased expenses that the guidelines often entail.

It must be admitted here that the cost of implementing guidelines is indeed often insupportable for a significant number of countries in the European Union. It is also, however, interesting that very often the policies of some governments disregard and diverge widely from the recommendations issued by their own national cardiological societies with regard to such topics.

A financial problem?

It is true that the cost of complete implementation

of the guidelines often stands as an insurmountable obstacle for the economies of many countries of the European Union. The map of European economies shows material differences, where countries with a per capita income of €70,000 coexist besides those with a per capita income of €4,000. Such differences make it impossible to achieve a correct and uniform implementation of the ESC guidelines.

Putting these three parameters in order – education, politics, cost – I personally believe that for countries with a per capita income below €25,000 the cost is the main reason for non-implementation of the guidelines. For the richer countries, to explain the differences in implementation we must look for a combination of factors, as also applies in the case of the regional differences seen within these same, prosperous countries.

So is there any hope for improvement?

I believe there is. The ESC has as a strategic priority, not only the production of high-quality guidelines, but also their correct implementation. The national societies have shown interest and understanding with regard to the need for implementation.

What is needed is systematic and organised collaboration between national societies and the ESC and an assessment of the results on an annual basis.