




Ontario
 Health Quality Ontario

About this E-Bulletin

This monthly e-bulletin is published by Health Quality Ontario (HQO). It is designed to keep you up-to-date on the research and reporting activities of HQO's Medical Advisory Secretariat (MAS) and the work of the Ontario Health Technology Advisory Committee (OHTAC).

Where to Find It

To read all new materials from MAS and OHTAC, be sure to visit the "What's New" section of our [website](#). To subscribe to the e-bulletin, write to info@hqontario.ca.

Questions and Comments

We welcome your questions and comments. You can write to MAS at MASinfo@hqontario.ca and OHTAC at OHTACinfo@hqontario.ca.

Making Evidence Relevant | December 2011

WHAT'S NEW

Open for Public Comment: Genetic Testing for Predisposition to Dilated Cardiomyopathy

Dilated cardiomyopathy is a leading cause of arrhythmia and heart failure; however, the condition is largely under diagnosed and often discovered late in the course of disease, once clinical symptoms are present. Genetic testing is meant to identify asymptomatic family members of affected individuals who are at risk of developing dilated cardiomyopathy later in life. Identification of these high-risk family members could allow for heightened clinical surveillance and potentially, early intervention.

MAS's draft [Preliminary Evidence Review](#) of this genetic testing and [OHTAC's draft recommendation](#) are now posted for public comment for a period of three weeks. Please submit comments by January 4, 2012, to: OHTACinfo@hqontario.ca to ensure that they will be considered in the final review and recommendation.

Research Uncovers Barriers and Opportunities for Epilepsy Care in Ontario

As part of its consultation process with public and professional stakeholders, OHTAC posted a draft recommendation for epilepsy care on November 8, along with the related research and reports of the Epilepsy Strategy Working Group and the Expert Panel on a Provincial Strategy for Epilepsy Care in Ontario.

Fast Facts

- Epilepsy surgery is a potentially curative treatment for greater than 13,000 individuals in Ontario who do not respond to drug therapy.
- Less than 2% of potential surgical candidates obtain this surgery in Ontario.

Only three hospital centres in Ontario currently offer this surgery.

- A significant gap exists between ideal practice, as guided by evidence, and actual practice.

The research posted includes an evidence-based analysis by MAS of magnetoencephalography for the assessment of patients with epilepsy, and a field evaluation by the Programs for Assessment of Technology in Health (PATH) Research Institute at St. Joseph's Healthcare Hamilton in collaboration with epileptologist Dr. O. Carter Snead and his team at the Centre for Brain Behaviour at the Hospital for Sick Children in Toronto.

Based on the results of the field evaluation, a Provincial Epilepsy Strategy Working Group was formed in February 2011 to compile province-wide data and provide provincial and front-line perspectives. Co-chaired by Dr. Snead and Dr. William Shragge, the working group was a remarkable collaboration of child and adult medical services, with representatives from all of the Epilepsy Centres in the province.

The working group report was presented to OHTAC in March 2011, which spurred the creation of an OHTAC Expert Panel on a Provincial Strategy for Epilepsy Care in Ontario, co-chaired by Drs. Snead and Shragge. The panel provided a report on the current state of care for refractory epilepsy in Ontario and developed recommendations for a provincial strategy for epilepsy care.

The consultation, which was closed for comment on November 30, has generated an incredibly positive response with more than 120 submissions from professionals, advocacy groups and members of the public. Health Quality Ontario (HQO) would like to thank everyone who participated. The feedback will be taken into account by HQO, OHTAC and members of the expert panel as they finalize their recommendation and reports. We will keep you posted on next steps.

[Find out more](#)

COPD Research Provides Unusually Broad Perspective on Multiple Treatment Strategies

Chronic Obstructive Pulmonary Disease (COPD) is the fourth leading cause of death in Canada and a leading cause of morbidity. In July 2010, the Ministry of Health and Long-Term Care (MOHLTC) asked MAS to provide evidence about the clinical and cost-effectiveness of various treatment interventions for COPD.

An expert panel - chaired by Dr. Jeremy Grimshaw, Senior Scientist, Clinical Epidemiology Program, Ottawa Research Institute - provided context and guidance for the mega-analysis.

MAS completed evidence-based reviews for the following interventions: influenza and pneumococcal vaccinations; smoking cessation; multidisciplinary care; pulmonary rehabilitation and maintenance programs following pulmonary rehabilitation; long-term oxygen therapy; ventilation for acute and chronic respiratory failure; hospital-at-home care for acute exacerbations; and, telemedicine (including telemonitoring and telephone support). As well, economic analyses were prepared by the Programs for Assessment of

Technology in Health (PATH) Research Institute.

The result of this work is a COPD Framework that includes an unprecedented body of research that provides an unusually broad perspective on the clinical benefit and cost-effectiveness of multiple treatment strategies. The evidence-based analyses and OHTAC's recommendations were posted for public and professional comment in October 2011. Taking into account feedback that was received during the consultation process, OHTAC and MAS will be finalizing all reports and recommendations for posting in the winter of 2012.

[Find out more](#)

MAS Participates in Series on the Future of Canadian Healthcare

Dr. Leslie Levin, the Head of HQO's Medical Advisory Secretariat, joined a panel of thought leaders to discuss "Charting the Future of Canadian Healthcare - Building a Healthcare Economy." The session, which was held at the Toronto Board of Trade on November 22, was chaired by Peter Robertson, Vice-President and General Manager, GE Healthcare Canada and included presentations by Dr. Levin; Dr. Ann Snowden, Chair of the International Centre for Innovation; and Dr. Ilse Treurnicht, CEO, MaRS Discovery District.

Comments focused on how Canada should leverage its healthcare investment to drive growth, while ensuring innovation and timely access to care and the challenges and opportunities that lie ahead for Canadians and their healthcare system.

New Reports from MAS & OHTAC

The following MAS reports and OHTAC recommendations have been completed since the last issue of the e-bulletin was published in November, and are available for download as part of the Ontario Health Technology Assessment Series:

[Constraint-Induced Movement Therapy for Rehabilitation of Arm Dysfunction After Stroke in Adults](#)

[Corneal Collagen Cross-Linking Using Riboflavin and Ultraviolet-A for Corneal Thinning Disorders](#)