

American Dental Association evidence-based dentistry website

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In March 2009, the American Dental Association (ADA) launched a new evidence-based dentistry (EBD) website (ebd.ada.org). The site has been established to provide the dental profession with access to evidence from high-quality systematic reviews and is supported by a grant from the National Library of Medicine and the National Institute for Dental and Craniofacial Research (Grant Number G08 LM008956).

The new website is an example of the ADA's longstanding commitment to EBD and to assisting their members to base their practice on the current best evidence. This aim has been developing since the ADA adopted a formal EBD policy and definition of EBD in 2001.

The website (ebd.ada.org) has a clear and crisp professional layout (Figure 1) using the familiar colour scheme of the ADA's main website (www.ada.org). The site has four main sections:

- Systematic reviews and summaries
- Clinical recommendations
- Resources
- Suggest clinical ideas

The clinical ideas section allows people to submit clinical ideas that they feel are important to practice and a number of recent questions are also provided. This section of the site should encourage greater involvement of practitioners and it will be interesting to see how this develops and whether the questions will be used. They could possibly be used to identify guidelines or to develop a clinical answers site, along the lines of the UK's ATTRACT (www.attract.wales.nhs.uk/). Although this section may encourage involvement, however, it may also raise expectations about how quickly responses can be delivered.

The resources section has good selection of some of the key evidence-based resources. These have been subdivided into:

- Organisations
- Journals
- Databases
- Other EBD sites
- Critical appraisal and evidence analysis



Figure 1. American Dental Association's evidence-based dentistry website homepage

- Systematic reviews
- Summaries of evidence-based reviews
- Clinical recommendations/ guidelines
- Tutorials
- Glossaries of terms
- Infective endocarditis
- Pit and fissure sealants

This area will provide individuals who are investigating EBD for the first time to readily access important information, background information and tools to enable evidence-based practice. The clinical recommendations section will undoubtedly be one of the most accessed, since it contains recommendations that have been developed using a well-defined systematic process. This section currently has three clinical recommendations on:

- Professionally applied topical fluoride

All three publications are available for download from the site and the topical fluoride and sealant guidelines have been discussed previously in this journal.^{1,2}

The final section of the website deals with systematic reviews, and is the one that I personally find most interesting. Currently, it includes a database of over 1200 systematic reviews, which have been categorised into 28 topic areas (Figure 2). Assembling this database is no small task and it represents a considerable resource. There is overlap with two existing databases in the UK: the Cochrane Database of Systematic Reviews (CDSR), which includes all Cochrane reviews

of effectiveness, methodology and diagnostic test accuracy, and the Database of Abstracts of Reviews of Effects (DARE) from the Centre for Reviews and Dissemination in York. DARE complements the CDSR by assessing the quality of and summarising reviews that have not been undertaken by the Cochrane Collaboration. Both the CDSR and DARE can be searched using the Cochrane Library.

I understand that the ADA is hoping to undertake critical summaries of most of the systematic reviews on the database and they are looking to recruit and train evidence reviewers to undertake this ambitious project. This will both add to the pool of people who have been trained in skills required for an evidence-based approach and help to develop the ADA's resource.

Currently only a small number of ADA critical summaries have been completed and these are indicated on the website by a green page icon. Where they have been completed (eg, on the Cochrane reviews on recall intervals in primary care patients)³ an initial pop-up box provides a very brief summary of the reviews conclusion, critical summary assessment, and an evidence quality rating (Figure 2). This is a useful device for the busy practitioner.

Clicking on the article title then brings up the full critical summary of the article, which has both a structured abstract and commentary. The overall format has similarities with the commentaries here in *Evidence-based Dentistry* but with additional subheadings outlining importance and context, strengths and weaknesses of the systematic reviews, strengths and weaknesses of the evidence, and implications for dental practice, which improve the readability of the summary on-screen.

Where the critical summaries are not available, the reader is taken to a page where they are able to click through directly to the PubMed abstract for the article. This page (Figure 3) also has links to related resources (PubMed, DARE, Turning Research Into Practice [TRIP] and Cochrane reviews). Whereas the related resources link to PubMed on these pages again takes you to the relevant article abstract,

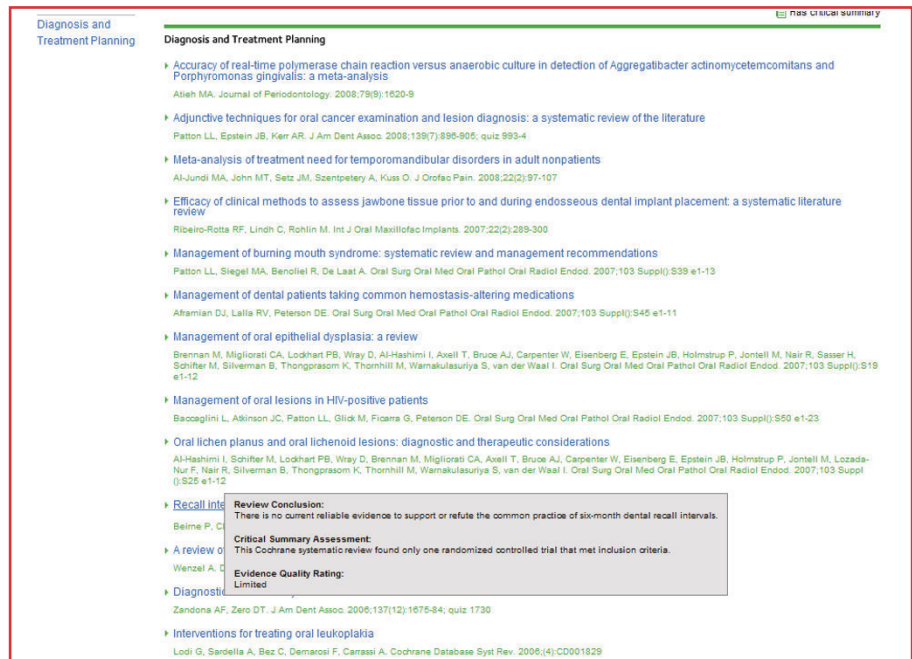


Figure 2. American Dental Association systematic reviews critical summary pop-up box

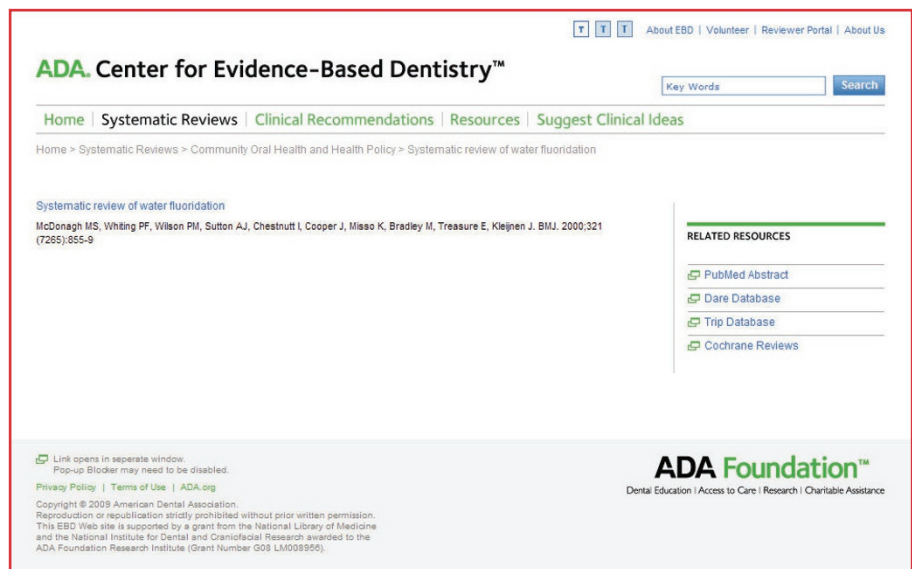


Figure 3. American Dental Association individual systematic reviews page

the DARE, TRIP and Cochrane links only direct users to the relevant database. DARE already has freely available critical summaries of many dental systematic reviews, so linking to these when they are available would be a useful addition to the ADA site. Overall, though, the ADA's website should make a significant contribution to the development of EBD in the years

to come, as it improves access to high-quality evidence.

1. Richards D. Topical fluoride guidance. *Evid based Dent* 2006; **7**: 62–64. (Erratum *Evid based Dent* 2007; **8**: 36.
2. Deery C. Pits and fissure sealant guidelines. Summary guideline. *Evid based Dent* 2008; **9**: 68–70.
3. Beirne P, Clarkson JE, Worthington HV. Recall intervals for oral health in primary care patients. *Cochrane Database Syst Rev* 2007; issue 4.

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