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IS EBM KILLING THE ART OF TREATMENT IN PSYCHIATRY?

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Evidence based medicine (EBM) is the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients. The practice of EBM means integrating individual clinical expertise with the best available external clinical evidence from systematic research. Applied to treatment in psychiatry, somatic, pharmacological and psychotherapeutic therapy as well as prevention and rehabilitation are to be assessed systematically. Evidence-based practice guidelines for the treatment of mental disorders are available in many countries and were developed based on the principles of EBM. This includes literature reviews, which are time-consuming and beyond the scope of everyday clinical psychiatrists' work capacity. Thus, evidence-based guidelines support the art of treatment in psychiatry by providing expertise.

Treatment algorithms published in treatment guidelines are often misunderstood as strict rules. In fact, guidelines cannot provide non-exceptional regulations. They imply the option to deviate from guideline recommendations. Guidelines and EBM will only be able to support clinical decision making. The "art" of making therapeutic decisions remains an essential competence of the practising psychiatrist.

Adhering to guideline recommendations in psychiatric treatment leads to optimized patient outcomes. EBM thus provides a firm basis for often complicated treatment decisions in psychiatry and critically supports the art of treatment in psychiatry. It will never kill this art but rather help it to survive as a highly specialized, scientifically based medical competence.