**Differences in the Recommendation of Laparoscopic Clinical Practice Guidelines According to the Recommendation System– Re-Evaluation Using GRADE: A Pilot Study**

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**Background:** Guidelines are essential for safe and effective treatments. They usually have multiple statements. Since the supporting information for the guidelines varies widely, the degree to which these statements are recommended also differ. We rely on recommendation systems for grading the recommendations for different statements. All recommendation systems have different grading criteria and they could potentially cause confusion and affect the quality of recommendations. Therefore, there is a need to find out the extent of variation and explore the potential reasons behind it.

**Method:** A purposive sampling on PubMed was conducted to find four different laparoscopic guidelines using different methods of grading the recommendations. Each statement was then re-evaluated using the GRADE recommendation system.

**Results:** The guidelines used GRADE, Oxford Methodology, SIGN, and ‘bespoke’ systems. The number of statements with similar strength for the different statements as the re-evaluated strengths in the four guidelines were 24.1%, 62.2%, 35.8% and 50.0% respectively.

**Conclusion:** There were a wide variety of recommendation systems for laparoscopic guidelines and there was variation between the recommendations from the guidelines using GRADE, Oxford Methodology, SIGN and the ‘Bespoke’ system when re-evaluated by GRADE. A systematic review of recent laparoscopic guidelines might provide the extent and the main reasons of the problem.