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### Panel agreement in rating the appropriateness of coronary revascularization procedures.

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#### Abstract

**Objectives:** To measure levels of agreement among experts for specific clinical indications for percutaneous transluminal coronary angioplasty (PTCA) and coronary artery bypass (CABG), using a synthesis of the evidence and a 2 –round modified Delphi process.

**Methods:** Following the RAND appropriateness method, we developed standards for the appropriate use of PTCA and CABG in order to determine how appropriately these procedures are applied in Spain. First, we developed a list of 1,866 specific clinical indications for PTCA and CABG, together with a synthesis of the evidence for each procedure. Using these documents, a Spanish expert panel, composed of interventional cardiologists, non- interventional cardiologists and cardiac surgeons, was asked to rate the appropriateness of each indication on a scale of 1 (extremely inappropriate) to 9 (extremely appropriate). Ten panellists rated the indications in two rounds, first, independently, and second, at a 2-day meeting where panelists could discuss areas of disagreement and modify the original list of indications. An indication was considered to be rated “with agreement” if no more than 2 panelists rated it outside the 3-point region containing the median (1-3; 4-6; or 7-9), while disagreement occurred if at least 3 panelists rated an indication in the 1-3 range and at least 3 panelists rated in the 7-9 range. All other indications were considered “indeterminate”.

**Results:** During the second round, the panelists modified the structure of the list of indications, resulting in 1,826 indications. Considering the indications for revascularization, regardless of procedure, 50% were rated with agreement, 13.5% with disagreement, and 36.5% were indeterminate. For PTCA and CABG, 58.6% and 58.4% of indications were rated with agreement, respectively.

**Conclusions:** The observed level of agreement among experts was low. Since an updated synthesis of the scientific evidence was provided to the panelists. The low level of agreement, may be associated with a lack of evidence, contradictory evidence, or ignoring the evidence.

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