The Hierarchy of Evidence

The Hierarchy of evidence is based on summaries from the National Health and Medical Research Council (2009), the Oxford Centre for Evidence-based Medicine Levels of Evidence (2011) and Melynk and Fineout-Overholt (2011).

I  Evidence obtained from a systematic review of all relevant randomised control trials.

II Evidence obtained from at least one well designed randomised control trial.

III Evidence obtained from well-designed controlled trials without randomisation.

IV Evidence obtained from well designed cohort studies, case control studies, interrupted time series with a control group, historically controlled studies, interrupted time series without a control group or with case-series

V  Evidence obtained from systematic reviews of descriptive and qualitative studies

VI Evidence obtained from single descriptive and qualitative studies

VII Expert opinion from clinicians, authorities and/or reports of expert committees or based on physiology


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<tr>
<th>Reference</th>
<th>Evidence level (I-VII)</th>
<th>Key findings, outcomes or recommendations</th>
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- Continuous irrigation involved irrigation with 2L of 0.5% povidone-iodine solution per 24hrs and at the same time an equal amount is drained with a little suction.  
- Vacuum drainage system involved attaching a drainage bottle with strong negative pressure -300 to -600mmHg  
- Specific ages not identified, but population consisted of 60 patients who had developed mediastinitis post open heart surgery, 29 who were treated with continuous irrigation and 31 with vacuum drainage.  
- Results found that treatment failure was more than three times as likely in the continuous irrigation group, and total hospital stay was significantly longer. |
- Article discusses: Use of Drains, Drain insertion, reinstating vacuum pressure for high pressure vacuum drains, Drain removal and Complications of vacuum drains. |
- 478 paediatric patients post cardiac surgery were involved, 237 were allocated to the redivac group, 241 were allocated to the conventional drain group.  
- Results found that high-vacuum redivac drains are as safe and effective as conventional drains in the pediatric setting, and resulted in a lower incidence of residual pleural effusions requiring drainage. |
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<tr>
<th>Surimex Postoperative Wound Drainage Training Manual Summary. <a href="http://www.surimex.com.au">www.surimex.com.au</a></th>
<th>VII</th>
<th>- Surimex is a distributor for Australia &amp; New Zealand devices, including wound drainage bottles. This webpage provides details on its products and instructions regarding drain placement, drain handling, changing bottle and removal of drain.</th>
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