

## Philippine Periodic Health Examination (PHEX) Guidelines

Various screening tests are currently available and used in the Philippines. The primary goal of screening is to detect diseases or their risk factors early in apparently healthy and asymptomatic individuals so that interventions may be instituted to reduce morbidity and mortality. The available screening tests cover a multitude of conditions, such as cancer, malnutrition, infections, congenital disorders, developmental disorders, hearing and vision disorders, cardiovascular disease, and mental health disorders.

While performing screening tests may intuitively appear beneficial, we must be cognizant of the physical and psychological harms of screening. These include the 1) potential side effects of the screening tests; 2) false positive test results leading to mislabeling and unnecessary performance of confirmatory tests which may be invasive, costly, or lead to side effects; 3) anxiety among individuals who screen positive, especially in conditions where confirmatory tests are not readily available; 4) possible stigmatization particularly in highly sensitive conditions such as sexually transmitted infections; and 5) cost, missed working or school days, and resource requirements to perform screening tests.<sup>1,2</sup> It is important to consider that the individuals who undergo screening are healthy; thus, the potential harms of screening can easily outweigh the benefits to these healthy individuals. Health screening is therefore recommended only if there is a high burden of illness, there are accurate screening and confirmatory tests, early intervention is more effective than late intervention, the tests and interventions are safe, and the cost of screening is commensurate with the benefits.<sup>2</sup>

To maximize the benefits of screening while reducing potential harm to the Filipino population, the Philippine Periodic Health Examination (PHEX) Guideline was first created in 2004.<sup>3</sup> This guideline aimed to provide evidence-based recommendations on the optimal screening practices among asymptomatic, apparently healthy Filipinos. With the rapid advancements in diagnostic technology and therapeutic interventions, and with the passage of the Universal Health Care Act of the Philippines, there was an urgent need to update and expand the PHEX guidelines.

Due to the vast scope of the PHEX guidelines, it was updated in three phases. PHEX Phase 1 was initiated in 2020 and completed by 2021. It contained 23 recommendation statements covering 15 disease conditions prioritized based on the burden of disease and availability of evidence. PHEX Phase 2 was initiated in 2021 and completed by 2022. Phase 2 consisted of seven task forces, with each task force working on specific disease areas of interest, namely, 1) Congenital and developmental disorders, 2) Neoplastic diseases, 3) Mental health and addiction, 4) Lifestyle interventions, 5) Cardiovascular disease, 6) Adult immunization, and 7) Pediatric immunization. Phase 2 produced 99 recommendations. PHEX Phase 3 was initiated in 2022 and completed by 2023. It consisted of eight task forces, namely, 1) Vision disorders, 2) Renal, metabolic, nutrition, and endocrine disorders, 3) Pediatric immunization, 4) Adult immunization, 5) Musculoskeletal disorders, 6) Infectious diseases, 7) Hearing disorders, and 8) Prenatal disorders. PHEX Phase 3 produced 133 recommendations. Currently, all the guideline recommendations are posted in the PHEX app (phex.ph).



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The topics and guideline questions were prioritized using the criteria set in the Department of Health Manual for Clinical Practice Guideline (CPG) Development.<sup>4</sup> The PHEX CPG also utilized the GRADE (Grading of Recommendations Assessment Development and Evaluation) approach specified in the DOH Manual, namely the GRADE Adolpment and GRADE Evidence to Decision Framework in the evidence synthesis and development of the recommendations.<sup>5,6</sup> Some recommendations in Phase 1 were also updated in either Phase 2 or 3. These updated recommendations were on screening for depression, developmental delay, cervical screening, and anemia.

This publication of the PHEX guidelines Phases 1 to 3 aims to facilitate the dissemination of recommendations that were formulated based on the updated evidence on the benefits and harms of screening, cost, acceptability, applicability, feasibility, and impact on equity in the Philippine setting. These PHEX guidelines intend to assist healthcare professionals, payors, policymakers, and hospital administrators in providing quality preventive care for healthy Filipinos.

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