

Lay summary on:

Conceptualizing the evidence pyramid for use in clinical practice: a narrative literature review



Ontario
Chiropractic
Association

Research summary of a peer-reviewed narrative literature review



What is this research about?

Health research is essential for improving care, but the volume and complexity of available evidence can make it overwhelming and difficult for clinicians to interpret and apply. One tool used to ease this process and help guide clinical decisions is the evidence pyramid, which ranks evidence based on study design and presumed methodological strength. However, this tool is often misunderstood as many assume only research at the top (like randomized controlled trials or systematic reviews) is useful in practice.

This review explores how the evidence pyramid is currently interpreted, its limitations and misconceptions, and contextual considerations when using the pyramid. It acknowledges the strengths of the evidence pyramid and its alignment with gold-standard research, while also recognizing its inherent limitations when applied in real-world clinical settings.



How was this research conducted?

The research team conducted a narrative literature review of articles published between 2016 and 2024. Searching three scientific databases and screening 4,699 potentially relevant articles, they identified 28 relevant articles on the evidence pyramid. Key themes were extracted and grouped into three categories: contemporary understandings, critiques, and contextual considerations to examine how evidence hierarchies are currently interpreted and applied.

What did the research team find?

Three themes emerged from this review:

1

The evidence pyramid is a guide, not a rigid tool

- It should be applied flexibly across different practice contexts and patient needs.

2

The clinical question shapes what counts as “best evidence”

- The appropriateness of evidence should be considered, rather than how “good” it is.
- Different types of questions require different kinds of evidence.

3

Evidence must be informed by multiple factors

- Clinical expertise, patient preferences, and unique patient circumstances are essential considerations to applying evidence in clinical practice.

What does this all mean?



This review emphasizes that the evidence pyramid should be used as a flexible guide – not a rigid tool – when making clinical decisions. The most appropriate evidence depends on the clinical question, context and patient-specific factors. Rather than defaulting to top-tier study designs, clinicians must use their expertise to assess the relevance and applicability of all available evidence. By clarifying how evidence hierarchies are developed, interpreted, and applied, this review supports more informed, context-sensitive decision-making that aligns with the core principles of Evidence-Based Practice (EBP).

Nolet, P. S., Emary, P. C., Murray, J., Harris, G. H., Gleberzon, B., Chopra, A., De Ciantis, M., & Overton, R. (2025). Conceptualizing the evidence pyramid for use in clinical practice: a narrative literature review. *J Can Chiropr Assoc*, 69(3).

Definitions:



Evidence Pyramid:

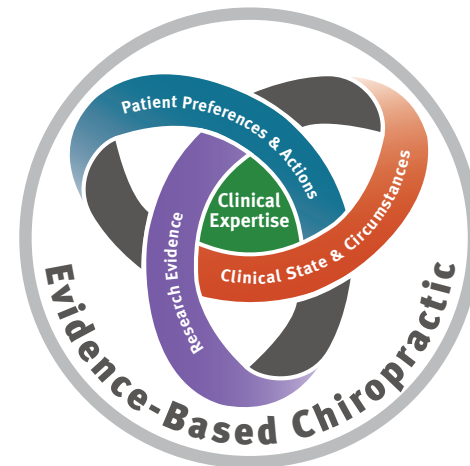
The hierarchical representation of the different types of research evidence available, ranging from the 'lowest' level of anecdotal evidence to the 'highest' level of systematic reviews and meta-analyses.

Haynes' model of Evidence-Based Practice (EBP):

A health-care model that supports clinical decisions by integrating research evidence, patient preferences and clinical circumstances – guided by clinical expertise to improve patient outcomes.

For more information:

Visit the Ontario Chiropractic Association (OCA)'s [Evidence-Based Chiropractic Care \(EBCC\)](#) for more research findings in a paper series that explores how chiropractors can integrate research evidence, clinical expertise and patient preferences to deliver high-quality care.



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