# Article information:

A 12-gene pharmacogenetic panel to prevent adverse drug reactions: an open-label, multicentre, controlled, cluster-randomised crossover implementation study - PubMed
<https://pubmed.ncbi.nlm.nih.gov/36739136/>

# Article summary:

1. This is an open-label, multicentre, controlled, cluster-randomised crossover implementation study of a 12-gene pharmacogenetic panel.

2. The study was conducted in 18 hospitals, nine community health centres, and 28 community pharmacies in seven European countries.

3. Patients aged 18 years or older receiving a first prescription for a drug clinically recommended in the guidelines of the Dutch Pharmacogenetics Working Group were eligible for inclusion.

# Article rating:

May be slightly imbalanced: The article presents the information in a generally reliable way, but there are minor points of consideration that could be explored further or claims that are not fully backed by appropriate evidence. Some perspectives may also be omitted, and you are encouraged to use the research topics section to explore the topic further.

# Article analysis:

The article is generally trustworthy and reliable as it provides detailed information on the study design and methodology used to assess the clinical utility of a pre-emptive genotyping strategy using a pharmacogenetic panel. The authors have provided clear information on the inclusion and exclusion criteria for participants, as well as details on how informed consent was obtained from all participants before taking part in the study. Furthermore, the authors have provided detailed information on the 50 germline variants tested in 12 genes and how actionable variants were identified.

However, there are some potential biases that should be noted when assessing this article. Firstly, there is no mention of any potential conflicts of interest among any of the authors or collaborators involved in this study which could lead to partiality or one-sided reporting of results. Additionally, there is no discussion of possible risks associated with genetic testing which could lead to an incomplete understanding of the implications of such testing for patients. Finally, while the authors provide detailed information on their methodology and results, they do not discuss any unexplored counterarguments or alternative perspectives which could lead to an incomplete understanding of their findings.

# Topics for further research:

* Potential conflicts of interest in research
* Risks associated with genetic testing
* Informed consent in clinical research
* Pharmacogenetic panel testing
* Implications of pre-emptive genotyping
* Alternative perspectives in research

# Report location:

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