Background - The implementation of evidence-based guidelines (EBG) into the clinical practice of primary care teams is essential to achieve quality assurance in this setting. There is a need to define the framework for deciding the effectiveness to develop and introduce clinical guidelines, as patients with diabetes and hypertension typically obtain most of their care from primary care providers (PCPs).

Objectives – to undertake a literature review on the effectiveness of guideline implementation on hypertension and diabetes in a primary health care setting.

Methods – The MESh terms used in this review were: implementation, guideline, hypertension, diabetes and primary health care. MEDLINE, Cochrane Controlled Trial Register, EMBASE, and the specialized register of the Cochrane Effective Practice and Organization of Care (EPOC) group were used as data sources. Separate analyses were undertaken for comparisons of different types of intervention.

Results – There are four types of strategies for implementing an evidence-based guideline in hypertension and diabetes: (1) educational training, including face-to-face training individual or grouped sections, manuals for self-directed learning, patient management flow-charts, practice based education and newsletters; (2) internal or external audit, including feedback reports on performance and peer review; (3) Information Communication Technology devices; (4) combination among the different kind of interventions.

Conclusion - The implementation of EBG instruments is likely to improve the process of care in diabetes and hypertension, rather than patient outcomes. Decision-makers need to integrate several approaches on the management of hypertension and diabetes.