

Core Outcome Measures in Effectiveness Trials

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Core outcome set for trials

 An agreed standardised set of outcomes that should be measured and reported, as a minimum, in all clinical trials in specific areas of health or health care

Trials

REVIEW **Open Access**

The COMET Handbook: version 1.0



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GUIDELINES AND GUIDANCE

Core Outcome Set-STAndards for Development: The COS-STAD recommendations

Jamie J. Kirkham¹, Katherine Davis¹, Douglas G. Altman², J Sean Tunis⁵, Paula R. Williamson¹*

Prinsen et al. Triak (2016) 17:449 DOI 10.1186/c13063-016-1555-2

Trials

(EcossMark How to select outcome measurement instruments for outcomes included in a "Core Outcome Set" - a practical guideline

Cecilia A. C. Prinsen1*, Sunita Vohra234, Michael R. Rose5, Maarten Boers16, Peter Tugwell7, Mike Clarke8, Paula R. Williamson and Caroline B. Terwee1

Harman et al. Traza 2013, 14:70 http://www.trlabljournal.com/content/14/1/70

Background: In cooperation with the Core Out COnsensus-based Standards for the selection of develop a guideline on how to select outcome domains) included in a "Core Outcome Set" (CC measured and reported in all clinical trials of a

Methods: Informed by a literature review to ide stakeholders. In three consecutive rounds, panelist of outcome measurement instruments, to justify t

Results: Of the 481 invited experts, 120 agreed of a systematic review and/or a literature search; 5

in a COS (consensus ranged from 70 to 99 %).

STUDY PROTOCOL

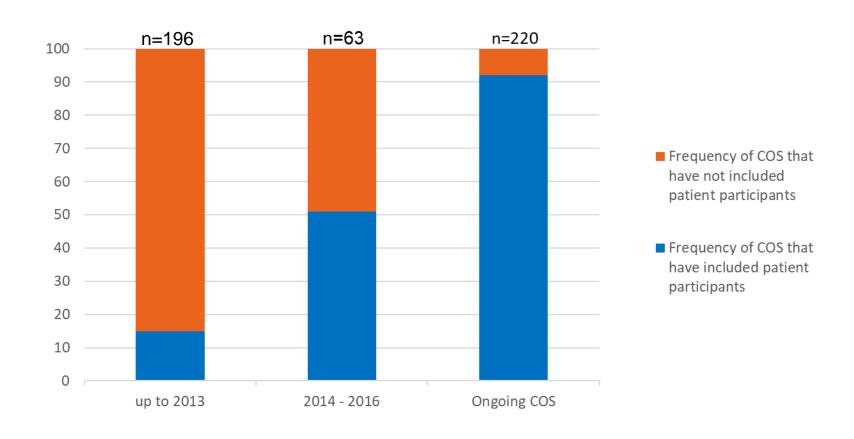
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metrodes: informed by a literature review to id:

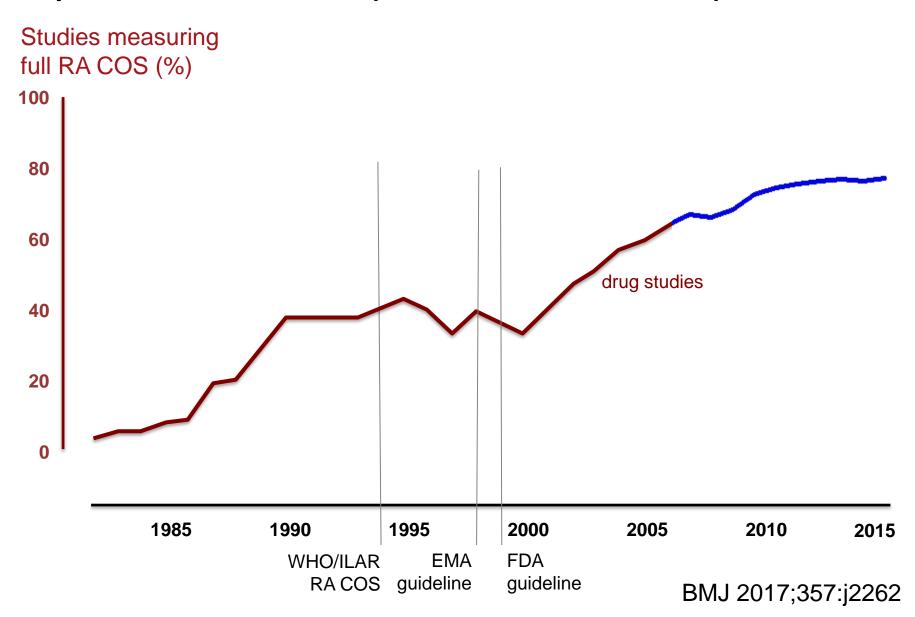
MOMENT — Management of Otitis Media with of outcome measurement instruments, to justify t as being achieved when 70 % or more of the pan Effusion in Cleft Palate: protocol for a systematic questionnaire. We reached consensus on four n review of the literature and identification of a for COS: Step 1, conceptual considerations; Step 1 means of the evaluation of the measurement pro core outcome set using a Delphi survey and Step 4, generic recommendations on the sele core

Condusions: This study resulted in a consensus-k. Nicola L. Harman¹, Iain A. Bruce², Peter Callery³, Stephanie Tiemey³, Mohammad Owaise Sharif¹,

"Doctors know about the illness, but patients know about the impact"



Improvements over time (Kirkham et al, BMJ 2017)



Examining trial reports to assess uptake

- Ankylosing spondylitis (2009) 20% uptake of full COS (>2 years after COS publication) compared to 0% uptake of full COS (up to 2 years after)
- Chronic pain (2008) looked at uptake of individual outcomes in the COS – each of the COS outcomes were used in 99%, 94%, <50%, <50%, <50%, <50%, <50%, <50%, 7%</p>
- Gout (2005) 5% uptake of full COS (acute), 0% uptake of full COS (chronic)
- Fall injury prevention (2005) 3% uptake of full COS
- Knee arthroplasty (1997) 4% uptake of full COS



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COS Uptake and Endorsement

It is important to assess the uptake and use of COS in clinical trials, and other research, in order to avoid the development of these COS contributing to the research waste which their development aims to reduce. Assessing uptake can also highlight the benefits of measuring and reporting COS in trials while allowing review and feedback to ensure ongoing relevance, and removal of barriers and facilitators to uptake.

The following organisations actively endorse the use of COS and the COMET database.

Trialists

SPIRIT 2013 explanation and elaboration: guidance for protocols of clinical trials

Trial Funders

- IN National Institute for Health Research (NIHR), UK:Guidance Notes For Completing Full Proposals
- Horizon2020:
- http://ec.europa.eu/research/participants/portal/desktop/en/opportunities/h2020/topics/sc1-pm-10-2017.html
- Deutsche Forschungsgemeinschaft (DFG) German Research Foundation
- mathematical Proposal Preparation Instructions: Clinical Trials Programme Draft Proposals
- Froposal Preparation Instructions: Clinical Trials Programme Full Proposals
- Arthritis Research UK (ARUK)
- Health Research Board (HRB)

Trial Registries

II ISRCIN

Regulatory Authorities



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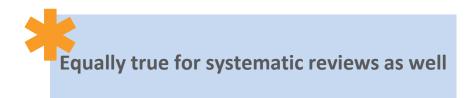
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Outcomes – from the very start



Clinical trials are only as credible as their outcomes

Tugwell, 1993





...and clinical guidelines

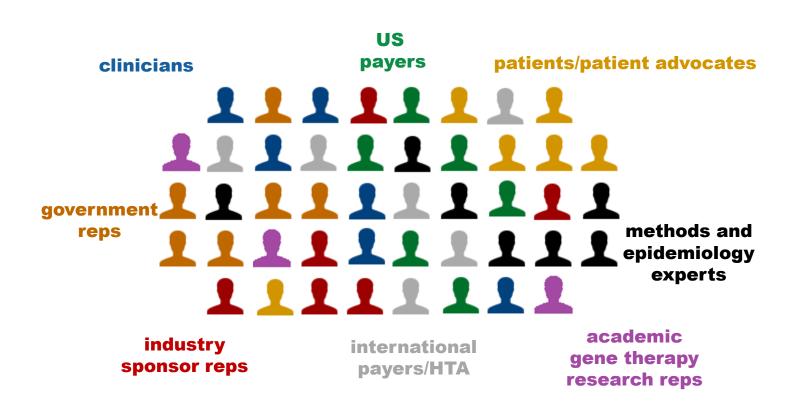


...and healthcare organisations

NICE: Hip fracture guideline 2017

- Submitted comment: "The protocol in both update questions does not include reference to the published Core Outcome Set for hip fracture which is the best guide we have for appropriate outcomes and measurement instruments for use in this population. http://www.comet-initiative.org/studies/details/274"
- Developers' response: "Thank you for your comment. The committee agreed that it was important to consider the Core Outcome Set (COS) for hip fracture in their deliberations on outcomes to consider (section 2.4 evidence to recommendations)....."

coreHEM Stakeholders





International HTA organisations identified and invited to participate - one person per organisation

International patient organisations approached with an invite to participate

International health professional association groups approached with an invite to participate

two round online Delphi Currently translated into Brazilian Portuguese Polish German

researchers approached via professional organisations plus known grant holders

Key Stakeholder Groups

People with type 2 diabetes

Healthcare Professionals

Policy makers

Researchers in the field

COS for routine care

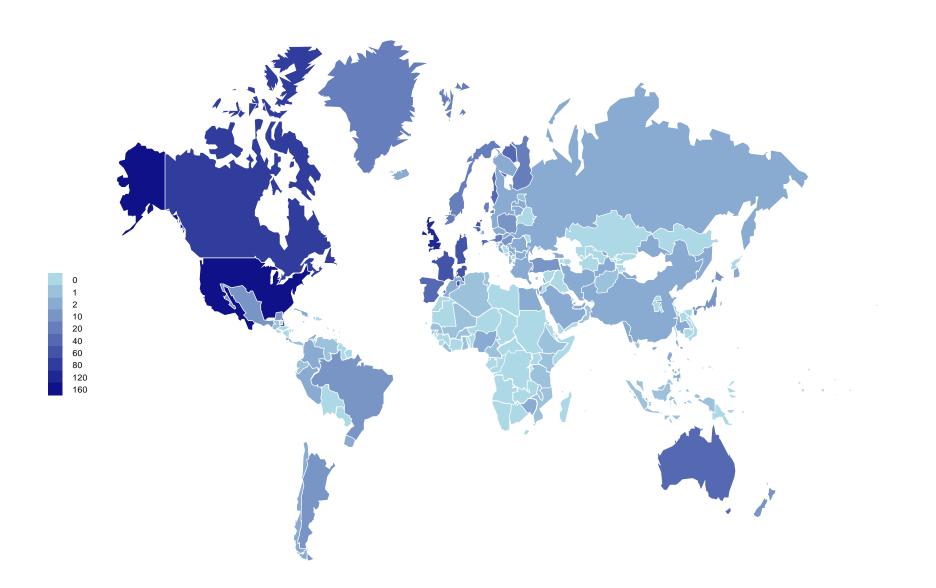
• COS for clinical research: n = 229 studies (87%)

COS for clinical research <u>and</u> clinical practice:
 n = 35 studies (13%)

Ongoing studies: 36% for research and practice

 The 2017 EULAR recommendations for a core dataset to support observational research and clinical care in rheumatoid arthritis. ARD 2018

Achieving global consensus



Save the date

We are pleased to announce the 7th Meeting of the COMET Initiative

Thursday 15th and Friday 16th November 2018

Rode Hoed, Amsterdam

More details and registration to follow





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