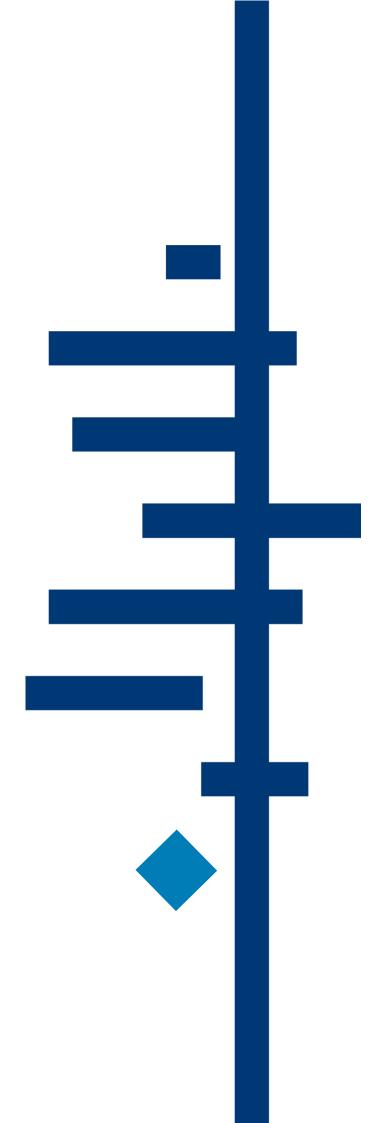


Cochrane Scientific Committee

AGENDA

27 January 2020 *Teleconference*



ATTENDEES

Karla Soares-Weiser (KSW) - Editor in Chief Ella Flemyng (EF) - Methods Implementation Coordinator Toby Lasserson (TL) – Deputy Editor in Chief

Scientific Committee members attending:

Corinna Dressler (CD) - Via GoTo Meeting

Deputy Head, Research Associate at the Division of Evidence-Based Medicine (dEBM) at the Charité – Universitätsmedizin Berlin, Germany

Donna Gilles (DG)

Editor for both the Cochrane Developmental, Psychosocial and Learning Problems Group and Diagnostic Test Accuracy Review Group, experienced mental health and disability researcher.

Julian Higgins (JH)

Professor of Evidence Synthesis at the Population Health Sciences, Bristol Medical School, at the University of Bristol, Bristol, UK, and current Senior Scientific Editor of the *Cochrane Handbook of Systematic Reviews for Interventions.*

Asbjørn Hróbjartsson (AH)

Professor of Evidence-Based Medicine and Clinical Research Methodology at the University of Southern Denmark, and Head of Research for the Center for Evidence-Based Medicine at Odense University Hospital, which hosts the secretariat of the Cochrane Bias Methods Group.

Ana Marušić (AM)

Professor of Anatomy and Chair of the Department of Research in Biomedicine and Health at the University of Split School of Medicine, Split, Croatia and founder of Cochrane Croatia.

Jane Noyes (JN)

Professor of Health and Social Services Research and Child Health, Bangor University, Wales, UK, lead Convenor of the Cochrane Qualitative and Implementation Methods Group, and a UK Cochrane Fellow.

Tomas Pantoja (TP)

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Associate Professor, Family Medicine Department, School of Medicine, Pontificia Universidad Católica de Chile and Editor of the Cochrane Effective Practice and Organisation of Care (EPOC) Group.

Philippe Ravaud (PR)

Professor of Epidemiology, Faculty of Medicine, Head of the Clinical Epidemiology Centre, Hôtel-Dieu Hospital, Paris Descartes University, France and Director of Cochrane France.

Johannes Reitsma (JR)

Associate Professor at the Julius Center for Health Sciences and Primary Care, University Medical Center Utrecht, The Netherlands and a member of both the Cochrane Diagnostic Test Accuracy Working Group and the Screening and Diagnostic Tests Methods Group.

Rebecca Ryan (RR)

Research Fellow at the School of Psychology and Public Health, La Trobe University, Australia and Joint Co-ordinating Editor of the Cochrane Consumers and Communication Group.

Christopher Schmid (CS)

Professor of Biostatistics, founding member and Co-Director of the Center for Evidence Synthesis in Health, Brown School of Public Health, US, Fellow of the American Statistical Association (ASA) and Founding Co-Editor of *Research Synthesis Methods*.

Nicole Skoetz (NS)

Scientific Co-ordinator, Working Group Standard Operating Procedures of the Comprehensive Cancer Centers, Center of Integrative Oncology Köln Bonn, and Coordinating Editor Cochrane Haematological Malignancies Group, Department of Internal Medicine, University Hospital of Cologne.

Nichole Taske (NT)

Associate Director (Methods & Economics), Centre for Guidelines, National Institute for Health and Care Excellence.

Methodological Editor, Cochrane Lung Cancer Group, UK

Scientific Committee members' apologies:

None.

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Chairs of the Scientific Committee: Ana Marušić and Philippe Ravaud

Time and date: Monday 27 January at 20.00 GMT / 21.00 CET / 15.00 EST / 17.00 CLST / Tuesday 28 January 07.00 AEDT (1 hour) Location: GoTo Meeting Meeting Chair: Phillippe Ravaud Recorded? Yes

Abbreviations:

CSC: Cochrane Scientific Committee RoB 2: Risk of Bias 2 tool LSR: Living Systematic Review ToR: Terms of Reference CSR: Clinical Study Report NMA: Network meta-analysis ECR: Early-career researcher CRG: Cochrane Review Group CRSU: Complex Reviews Support Unit

Agenda item		Details and links to documents or appendix	
1) Welcome from the Chair			
2)	Approval of previous	Approval of the minutes dated 30 September 2019 – see Paper 1 .	
	minutes		
3)	Scientific Committee	3A) Scientific Committee ECR position	
	business matters		
		Majority of CSC voted for an ECR member in a mentored position for up-and-coming ECRs in the field, where the role is observational	
		and they do not have voting rights.	
		To discuss before approval of ECR position: Comments from some CSC members highlighted that as a scientific advisory Committee,	
		should we not remove the ECR role? Instead, could we allow ECR observers to meetings so that we open the opportunity up to a much	
		larger number of individuals?	
		CARRIED OVER ACTION EF: Consider the shortlist for the Thomas Chalmers Award, the Methods Groups ECR presentations in	
		Chile, Methods Group ECR roles, and the ECR Cochrane Slack channel for promotion of the position (once confirmed)	
		<u>3B) Scientific Committee ToR – see Paper 2 and Paper 3.</u>	
		Approval of updated ToR.	

		<u>3C) Scientific Committee rotation and recruitment – see Appendix 1, Paper 3.</u>
		Confirm who is stepping down in 2020, 2021 and 2022. See Appendix 1 . We previously agreed:
		• May 2020 – three external (inc. Christopher Schmid who wants to step down) and two internal rotate off, and two external, two internal and one ECR (?) are recruited.
		 May 2021 – two external and two internal rotate off, and two external and two internal are recruited. May 2022 – two external and two internal rotate off, and two external and two internal are recruited.
		Rotation of CSC Chairs - One Chairs rotates off in 2020 and one in 2021 – ToR says: The Co-Chairs hold office for two years, with annual elections so only one Co-Chair rotates off in one calendar year.
		Open applications for new CSC members – one ECR (?), two external and two internal (depending on who is stepping down, may need to flag certain expertise).
		<u>3D) Agenda items for our full-day meeting at the mid-year Governance meetings (Sunday 29 March 2020)</u> Discuss ideas for in-person meeting in Manchester.
		3E) How can Cochrane develop processes for blue sky thinking around methods developments?
		To discuss ideas as a group. Are there certain methods priorities Cochrane would like to encourage submissions for in 2020?
		CARRIED OVER ACTION EF: Discussed with KSW the idea of an annual joint horizon-scanning paper from the Methods Executive and Scientific Committee on evidence synthesis methods
		3D) Recent project updates from the Content Strategy, inc. RoB 2, clinical study report use, prognosis reviews, rapid reviews, living
		<u>reviews, network meta-analysis, and equity.</u> Update from EF – see Paper 4.
		opuate nom Er – see Faper 4.
4)	New submission(s) for Scientific Committee Review	No further submissions.
5)	Updates on methods undergoing Scientific Committee Review	No further submissions.

6)	Methods for Scientific	No further submissions.
- /	Committee sign-off or	
	recommendation	
7)	New methodological	Discussion on considerations for future submissions (horizon scanning) – once the new process for method or tool proposals has been
	innovations for	launched, we can be more proactive.
	Cochrane's agenda?	
	-	The following methods or tools were highlighted in previous meetings and could be considered for future submissions:
		Risk of Bias due to Missing Evidence (RoBME)
		Tool for Addressing Conflict of Interests in Trials (TACIT)
		(Semi) automation methods
		Standalone qualitative evidence synthesis (following PHHSN two-year pilot)
		Use of IPD in repositories and other types of data
		Intervention Complexity Assessment tool.
		Methods for prognosis reviews.
		 Methods for addressing missing participant data.
		• Assessing the quality of evidence and presenting the results of non-randomised intervention studies (recommended by NS).
		Evaluation and validation of the RCT classifier.
		 Meta-analyses of prevalence and risk, and consider resubmitting (DG)
		QUADAS-2C extension for comparative DTA (JR)
		CARRIED OVER ACTION ALL: Consider methodological innovations or developments where a proponent could be contacted by EF to facilitate some methods submissions for future discussion
		Appendix 2 includes the Scientific Committee history for methods and tools.
		Any unanswered methodological review questions can be flagged to Mike Clarke and the Methodology Review Group to consider it for a
		future review.
;)	Meeting schedule	List of upcoming meetings:
'	5	27 January 2020, 20:00 GMT/ 21:00 CET/ 15:00 EST/ 17:00 CLST/ 07:00 AEDT (one hour).
		29 March 2020 – in-person meeting at the mid-year Governance Meetings (full day)
		July 2020?
		October 2020?

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APPENDIX 1 - Appendix 1 removed for public version

APPENDIX 2 – Archive of methods decisions by the Scientific Committee:

18 May 2017

- ROB 2.0 = Highly recommended the recommendation is that it is mandatory for new reviews when officially launched. For updates, it is not reasonable to re-do previously included studies and a strategy is required to handle these situations. Now included in the Content Strategy and a priority project for 20119 to assess the feasibility of implementation.
- ROBINS-I = Recommended with provisions the ROBINS-I tool is recommended as the preferred tool for new reviews. It is not mandatory. The importance of competency to use the tool will be highlighted in guidance.
 Recommended but unsure of implementation or evaluation. Will need to discuss with developers.

3. **Cumulative meta-analysis = Further evaluation required** - the CSC agreed that further technical examination of the key approaches was required to ascertain whether

there is a preferred method, or whether the methods provide value to managing random error and are needed at all, or only in certain scenarios. An expert panel will be asked to consider the work completed by colleagues to date and will report to a future CSC.

See points relating to whether using sequential methods to adjust P values is necessary in repeated meta-analyses for decision.

18 October 2017

- 1. Inclusion of results from searching study registries in Cochrane reviews: completed but not published studies = Not a matter for the CSC but further guidance needs developing.
- 2. Meta-analyses of prevalence and risk = This is not currently matter for the CSC and will be considered further in Cochrane's Content Strategy.
- 3. Meta-regression = This is a matter for the Editorial Board (possibly Governing Board if it impacts on budgets). This is not a matter for the CSC.
- 4. **Timely and Reliable Evaluation of the Effects of Interventions: A Framework for Adaptive Meta-analysis (FAME)** = this was to be incorporated into the Handbook and not a matter for the CSC.
- 5. Determining when meta-analyses of published time-to-event outcomes reliable enough to form robust clinical conclusions. An evidence-based approach = this was to be incorporated into the Handbook and not a matter for the CSC.
- 6. Data-based predictive distributions for between-study heterogeneity = CSC not able to make a decision and requested paper and presentation for future meeting. Decision below.

28 February 2018

1. Interim guidance on how to decide whether to include clinical study reports and other regulatory documents into Cochrane Reviews = Optional/advisory - CSC members agreed this data was important in tackling reporting bias. Further development of methods and tools were required that identifies where more evidence is

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needed as well as where Cochrane should concentrate its energies. The report's findings were accepted in principle by the committee. However, further consideration of roll out and implementation within the main body of Cochrane required the input of both Governing Board (resources) and Editorial Board (implementation requirements). Now included in the Content Strategy and a priority project for 20119 to assess the feasibility of implementation.

2. Expert panel report on whether using sequential methods to adjust P values is necessary in repeated meta-analyses = Not recommended - The CSC concur with the panel's recommendation that these methods should not be used routinely in Cochrane and that only in specifically justified cases is it reasonable to do so. Statement posted on Methods Website. No further action.

<u>5 June 2018</u>

1. Data-based predictive distributions for between-study heterogeneity = Optional/advisory - The Committee recommends that Cochrane Reviewers are encouraged to add Bayesian meta-analysis alongside the traditional techniques included in RevMan to supplement and improve their review. Particularly where there is a very high or low heterogeneity estimate therefore, in these situations an additional Bayesian analysis will have the greatest impact. This will be included in the new updated Handbook chapter.

Statement posted on Methods Website. No further action.

8 November 2018

- 1. Qualitative evidence synthesis as a standalone review = Decision not made by CSC Editorial Board approved a two-year pilot and following the pilot the CSC and Methods Executive would make a decision on whether standalone QES would be endorsed in Cochrane.
- 2. Prognosis reviews as standalone review = Decision not made by CSC.

Now a formal review type in the Cochrane Library and Prognosis Methods Group have been overviewing the development and implementation.

31 March 2019

1. Use of interactive analysis framework to facilitate diagnostic test accuracy and network meta-analyses analyses (under evaluation)

<u>21 June 2019</u>

1. Use of interactive analysis framework to facilitate diagnostic test accuracy and network meta-analyses analyses (under evaluation)

30 September 2019

1. Use of interactive analysis framework to facilitate diagnostic test accuracy and network meta-analyses analyses (final update)

27 January 2020

No methods or tools discussed.