Embracing new roles:

how librarians can encourage and support clinicians and health-related researchers to improve the quality of published research papers



Shona Kirtley, Research Information Specialist, EQUATOR Network, Centre for Statistics in Medicine, Oxford, UK



Presentation Outline

- * What is the EQUATOR Network?
- * Deficiencies in research reporting and the consequences of poor reporting
- * What are reporting guidelines?
- * What is the EQUATOR Network doing to help?
- * How can librarians help?
- * What libraries are already doing
- * The EQUATOR International Librarian Network















About EQUATOR

EQUATOR: Enhancing the **QUAlity** and **Transparency Of health Research**

International initiative to improve the reliability and value of medical research literature by promoting transparent and accurate reporting.

Our main focus:

- * Highlighting problems resulting from poor reporting
- * Promoting rigorous research reporting (accurate, complete, transparent, timely)
- * Provision of online resources
- * Education and training
- * Research, evaluation, development
- * Collaboration

Established due to growing evidence of serious deficiencies in research literature and its effect on the reliability and usability of research results.



Deficiencies in reporting

5 main areas where deficiencies have been identified in the health research literature:

- * Non-reporting (or delayed reporting) of studies
- * Incomplete reporting
- * Selective reporting
- * Misleading reporting
- * Unacknowledged discrepancies between sources

Recently there has been an explosion in the publication of studies highlighting such poor reporting practices.

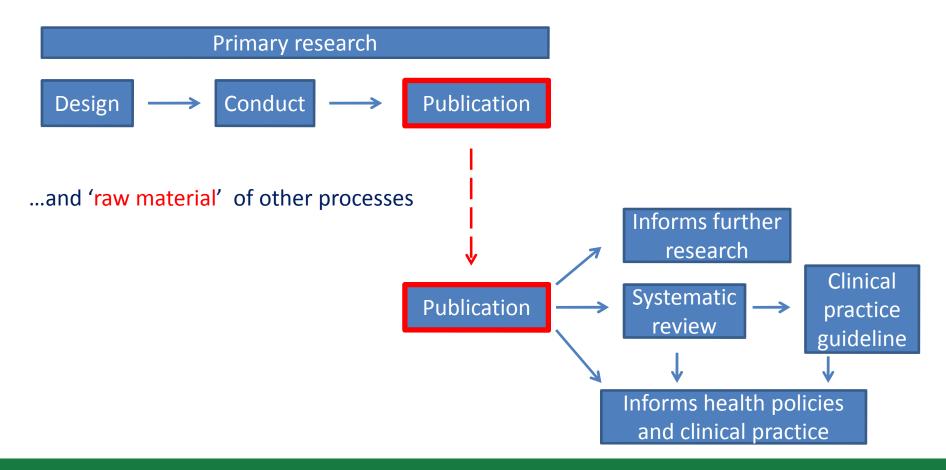




Exercise prescription: a case for standardised ANALYSIS Downloaded from bmj.com on 8 July 2009 reporting What is missing from descriptions of Susan Carolyn Slade, Jennifer Lyn Keating: treatment in trials and reviews? exercise is beneficial for people with cystic fibro-ABSTRACT Replicating non-pharmacological treatments in practice depends on how well they Background Structured, regular exercise is sis, chronic obstructive pulmonary disease, interrecommended to improve health outcomes. Exercise mittent claudication, knee osteoarthritis and low have been described in research studies, say Paul Glasziou and colleagues back pain.1 . takes many forms and varies in type, intensity, duration and frequency. The authors used the example of Exercise is a non-specific term. It includes activ-Have you ever read a trial or review and receiving numerous requests for additional exercise for chronic health conditions to examine how ities that vary in type, frequency, intensity, mode wondered exactly how to carry out treat- details from doctors and patients, the author and environmental requirements. It may be conexercise programmes are described and summarised in ceptualised as a series of specific movements to train or develop the body with routine practice or Two independent reviewers conducted exercise reporting practices using the as any kind of physical training to promote physiof exercise effects for chronic conditions as the cal health.12-14 Exercise can vary with respect to Adequacy of Published Oncology Randomized Controlled Trials the type of muscle contraction, load, speed and terial, Inclusion criteria: systematic reviews narised the effects of exercise programmes range of movement, number of repetitions and to Provide Therapeutic Details Needed for Clinical Application with chronic health conditions. Exclusion sets, order of exercises and rest times. It is used to Jennifer M, Duff, Helen Leather, Edmund O. Walden, Kourtney D. LaPlant, Thomas J. George Jr. ews of studies of children and adolescen Manuscript received July 9, 2009; revised March 15, 2010; accepted March 16, 2010. Clin Chem Lab Med 2012;50(3):411-413 © 2012 by Walter de Gruyter • Berlin • Boston, DOI 10.1515/cclm-2011-0904 brella Correspondence to: Thomas J. George Jr, MD, FACP, Division of Hernatology Oncology, Department of M tions. Florida, PO Box 100278, Gainesville, FL 32610-0278 (e-mail: thom.george@medicine.ufl.edul. ose of An appeal to medical journal editors: the need for ession. urden Background Randomized-controlled trials (RCTs)-improve clinical care-through evider a full description of laboratory methods and specimen ardio-RCT result reporting, but specific details of therapeutic administration pron 2 diahandling in clinical study reports tion of the trial design. We assess the reporting methodology in RCTs put is, by Ten essential elements of RCT reporting were identified and included of ysical maximum number of cycles, premedication, growth factor support, patier ha57 adjustments for hematologic and organ-specific toxicity. All therapy-base html#Resolutions). The four main goals are promo-2005 and 2008 in the New England Journal of Medicine (NEJM), Journal of Clinical Oncology (JCO), Journal of OPEN ACCESS Freely available online Reporting of adverse events in randomized controlled trials of highly 27 from Cancer, active antiretroviral therapy: systematic review nts for toxicities Publication Bias in Antipsychotic Trials: / of complete data cer (5/27: 18%), Michal Y. Chowers^{1,20}, Bat Sheva Gottesman^{1,2}, Leonard Leibovici^{1,3}, Ulrike Pielmeier⁴, did not substan-Efficacy Comparing the Published Literat Steen Andreassen4 and Mical Paul 13 Food and Drug Administration Database Is necessary for Sackler Faculty of Medicine, Tel Aviv University, Tel Aviv, Israel; 2Meir M Rabin Medical Center, Beilinson Campus, Petah-Tiqva, Israel: 4Center fo. RESEARCH ARTICLE Open Access Support, Aalborg University, Aalborg, Denma Lee Shapley⁵ Electronic search strategies to identify reports of Dregon, United States of America, 2 Departme Health Care, Oregon Health & Science Universi Objectives: Our objectives were to systematically assess the quality of Medical Center, Portland, Oregon, United Sta (AEs) in publications of randomized trials of highly active antiretroving cluster randomized trials in MEDLINE: low examine whether reporting quality affects the effect estimates reported for Methods: We searched the PubMed, Cochrane library and EMBASE precision will improve with adherence to December 2008. We included all published randomized controlled trials ment-naive adult HfV-infected individuals, with 48 weeks' follow-up. The extracted according to CONSQRT guidelines. We pooled the relative reporting standards results by sponsorship and different reporting methods. Results: Forty-nine trials, including 19882 patients, published between of evidence-based medicine yet a inclusion criteria. Only one of the trials reported on AE collection method Monica Taljaard^{1,2}, Jessie McGowan^{1,1,4,5}, Jeremy M Grimshaw^{1,6}, Jamie C Brehaut^{1,2}, Andrew McRae⁷, ug regulatory agencies, e.g., the US only AEs attributed to drugs, 17 of which did not refer to the attribution ich data in journal articles can be ch nearly always selective and selection criteria were highly variable, based Martin P Eccles⁸, Allan Donner^{7,9} extent to which it inflates apparent rence threshold. Presentation of AEs above an occurrence threshold w ponsored by industry (30/31) than in studies sponsored by non-profit o

Research Article

A research article is 'end product' of one process ...





Consequences of poor reporting

Poor reporting is a serious problem particularly for systematic reviews and clinical guideline development (and therefore impacts ultimately upon patient care).

It prevents the inclusion of all eligible studies and comparison across studies:

"This review only found one methodologically sound but somewhat underreported trial"

"In terms of evaluating the quality of studies, the lack of important information in some of the trial reports has resulted in categorisations of 'unclear"

"The biggest problem was the quality of reporting, which did not allow us to judge the important methodological items ..."

"Data reporting was poor. 15 trials met the inclusion criteria for this review but only 4 could be included as data were impossible to use in the other 11."



(Cochrane Library, accessed on 18 September 2010 & 8 June 2011)



What are reporting guidelines?

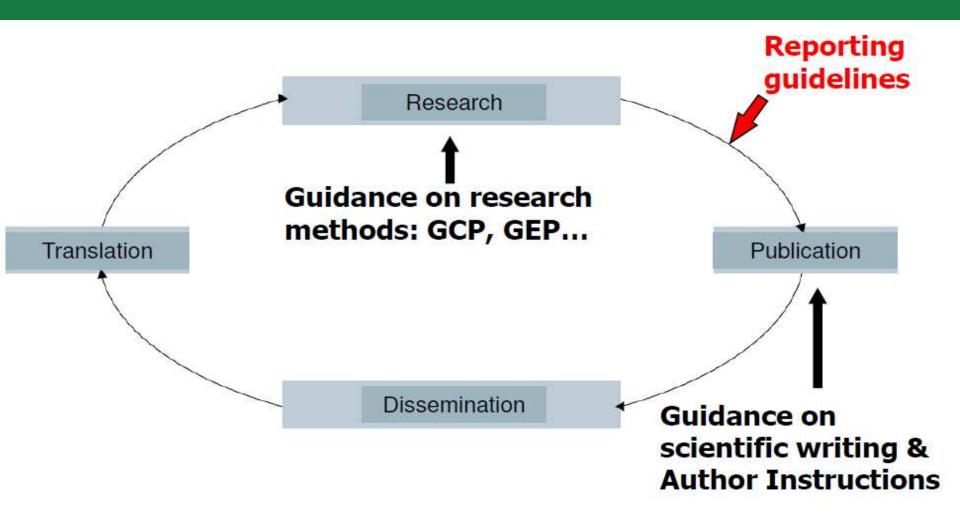
- * Statements that provide advice on how to report research methods and findings
- * Specify a minimum set of items required for a clear and transparent account of what was done and what was found in a research study
- * Typically take the form of a checklist, flow diagram or piece of explicit text
- * Based on available evidence and reflect the consensus opinion of experts in a particular field
- * Complement advice on scientific writing and journals' instructions to authors
- * Some examples include:







How to improve reporting





What is EQUATOR doing to help?

* Library for health research reporting

- * Information for authors of research reports
- * Resources for journal editors and peer reviewers
- * Resources for developers of reporting guidelines
- * Information about reporting guidelines currently under development
- * Wide range of other relevant resources

* Database of reporting guidelines

- * Up-to-date and comprehensive collection of reporting guidelines
- * Searchable by browse menu or using free-text

* Education and awareness raising

- * Workshops
- * Attendance at meetings and conferences

* Collaboration

- * PAHO
- * Other collaborative activities





Website homepage



Enhancing the QUAlity and Transparency Of health Research



Home

Library

Toolkits Courses & events

News

Blog About us

Contact

The resource centre for good reporting of health research studies



Library for health research reporting

The Library contains a comprehensive searchable database of reporting guidelines and also links to other resources relevant to research reporting.



Search for reporting quidelines



Visit the library for more resources



Key reporting guidelines

CONSORT Full Record | Checklist | Flow Diagram

STROBE Full Record | Checklist

PRISMA Full Record | Checklist | Flow Diagram

STARD Full Record | Checklist | Flow Diagram

COREQ Full Record

ENTREQ Full Record

 SQUIRE
 Full Record | Checklist

 CHEERS
 Full Record | Checklist

 CARE
 Full Record | Checklist

SAMPL Full Record



Toolkits

The EQUATOR Network works to improve the reliability and value of medical research literature by promoting transparent and accurate reporting of research studies.

Our Toolkits support different user groups, including:



Authors

Information and resources for authors

EQUATOR highlights

3/10/2013 - OPEN: To overcome failure to publish negative findings

The EU-funded OPEN project (Overcome failure to Publish nEgative fiNdings) brought together key opinion leaders from across Europe to address the issue of publications bias. Read More

17/09/2013 - EQUATOR Network at the Peer Review Congress 2013 in Chicago

EQUATOR actively participated at the Seventh International Congress on Peer Review and Biomedical Publication, 8-10 September 2013, Chicago, USA. We organised the EQUATOR workshop for editors on reporting of research studies (Saturday 7 September am) and the EQUATOR 5th Annual ... Read More

News

The Checklist Manifesto Meets Clinical Trials

Publicly available sources provide insufficient information on patient-relevant outcomes of clinical trials 9/10/2013

New EASE Science Editors' Handbook published

1/10/2013

Clinical Trials 2013 – 2014 20/09/2013

The New ICMJE Recommendations 29/08/2013



Database of reporting guidelines



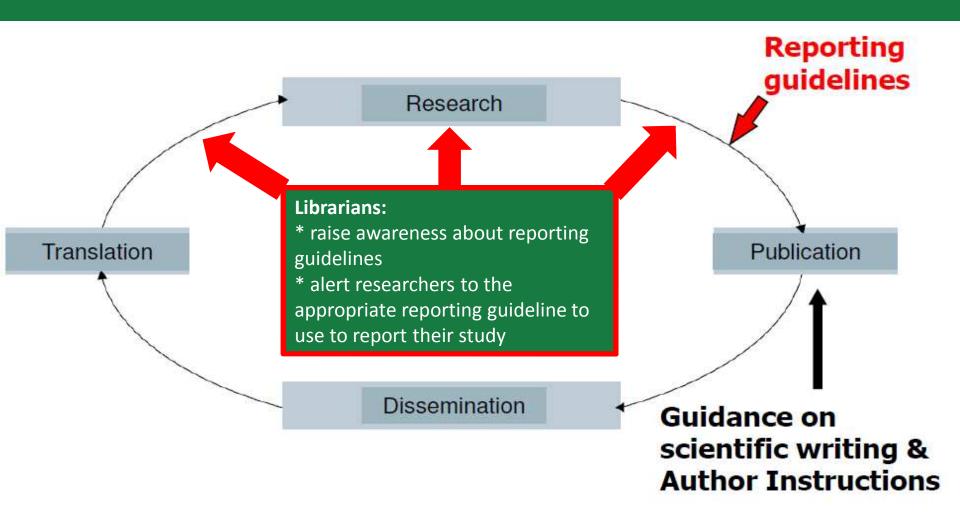
Enhancing the QUAlity and Transparency Of health Research



Toolkits Courses & events News Home Library Blog About us Contact Home > Library > Reporting guideline Search for reporting guidelines Key reporting guidelines Browse for reporting guidelines by selecting one or more of these drop-downs: Full Record | Checklist | Flow Diagram Study type Clinical area Section of report STROBE Full Record | Checklist Please select. Please select... PRISMA Full Record | Checklist | Flow Diagram Or search with free text Full Record | Checklist | Flow Diagram STARD Search Reporting Guidelines Full Record COREQ Full Record ENTREQ Start again | Help SQUIRE Full Record | Checklist CHEERS Full Record | Checklist CARE Full Record | Checklist Displaying 218 reporting guidelines found SAMPL Full Record Most recently added records are displayed first. **Translations** Launch of a checklist for reporting longitudinal observational drug studies in rheumatology: a EULAR extension Some reporting guidelines are also available in of STROBE guidelines based on experience from biologics registries languages other than English. Find out more in our Translations section. The Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) Statement: guidelines for reporting observational studies About the Library For information about Library scope and content, identification of reporting guidelines and CONSORT 2010 Statement: updated guidelines for reporting parallel group randomised trials inclusion/exclusion criteria please visit About the Library. Visit our Help page for information about searching Better reporting of harms in randomized trials: an extension of the CONSORT Statement 4 for reporting guidelines and for general information about using our website. Our full catalogue of reporting guidelines is The CARE Guidelines: Consensus-based Clinical Case Reporting Guideline Development available to download as a PDF. Reporting



A new role for Librarians?





How can librarians help?

Librarians are excellently positioned to raise awareness about reporting guidelines and encourage their use

* Promotion

- * Display EQUATOR Network leaflets/posters
- * Include details about reporting guidelines in library bulletins
- * Link to the EQUATOR Network website from library website pages

* Education

- * Include information about reporting guidelines in library induction sessions
- * Hold research reporting workshops

* Researcher support

- * When supporting the work of clinicians and researchers mention relevant reporting guidelines and how to locate them
- * When presenting the results of literature searches to researchers alert them to the appropriate reporting guideline for reporting their study



What are librarians currently doing?





Potential impact

As a result of adopting some simple awareness raising practices librarians can:

- * Indirectly improve the reliability of literature searching and indexing
- * Help improve the quality of the research papers written by staff within their organisation
- * Help ensure that research studies provide a more reliable basis for making clinical decisions or for inclusion in further research
- * Help the results of research be transferred into practice
- * Demonstrate to the head of their organisation that the library is playing a fundamental role in improving the quality of the research output of the organisation

Most importantly...librarians will be playing a central role in improving not only the quality and subsequent usability of published health research but also advancing the global body of health knowledge and ultimately improving patient care!



EQUATOR International Librarian Network (1)

Exciting new role for librarians!

* Establish an EQUATOR International Librarian Network

- * Free-to-join virtual network organised by the EQUATOR Network
- * Through the help of librarians who join the network we will work together to raise awareness about and encourage the use of reporting guidelines by researchers around the world

* The network will provide:

- * Help & advice
- * Training
- * Resources
- * Regular updates
- * Email discussion list
- * Country directory



...to enable librarians to confidently discuss available reporting guidelines with the clinicians and researchers with whom they work.



EQUATOR International Librarian Network (2)

Early stage of development

- * Set-up an advisory group to help develop the network and advise on key issues
- * Identify country representative librarians who can act as focal points in their own country
- * Develop a number of practical and topic specific librarian toolkits
- * Hold regular webinars offering training for librarians, providing help and support and Q&A sessions
- * Translate all our materials into other languages to enable librarians to raise awareness more easily
- * Develop a country directory allowing librarians to identify possible collaborators within their own country
- * Raise funding for network activities





Embracing new roles

Opportunities

We are very keen for librarians to get involved...please do consider:

- * Volunteering to join our advisory group or become a country representative
- * Contributing your ideas and experiences to our toolkit development and resources
- * Suggesting ideas for other relevant activities that the network could support
- * Simply join the network and start raising awareness about reporting guidelines

Are you ready and willing to embrace a new role and make a real difference?!



Acknowledgements

* EQUATOR Steering Group

- * **Doug Altman**, Centre for Statistics in Medicine, UK
- * John Hoey, University of Toronto, Canada
- * Ana Marusic, University of Split, Croatia
- * David Moher, Ottawa Health Research Institute, Canada
- * Kenneth F. Schulz, Family Health International, Chapel Hill, USA

* Many thanks to both Professor Doug Altman and Dr Iveta Simera for permission to reproduce a couple of their slides and for helpful comments on this presentation.





EQUATOR Network: www.equator-network.org



Contact: shona.kirtley@csm.ox.ac.uk

