




Peer Review & Critical Appraisal

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A good teacher doesn't teach facts, he or she teaches **enthusiasm, open-mindedness** and **values**.

Gian-Carlo Rota



Workshop Outline

- What is Peer Review? Why should I Review?
- What to consider when I get invitation for a review?
- Where to start review? What is the criteria to use?
- What is Review Forms?
- Which are the different Decisions?
- What is Conflict of Interest?
- What is different types of Reviews?

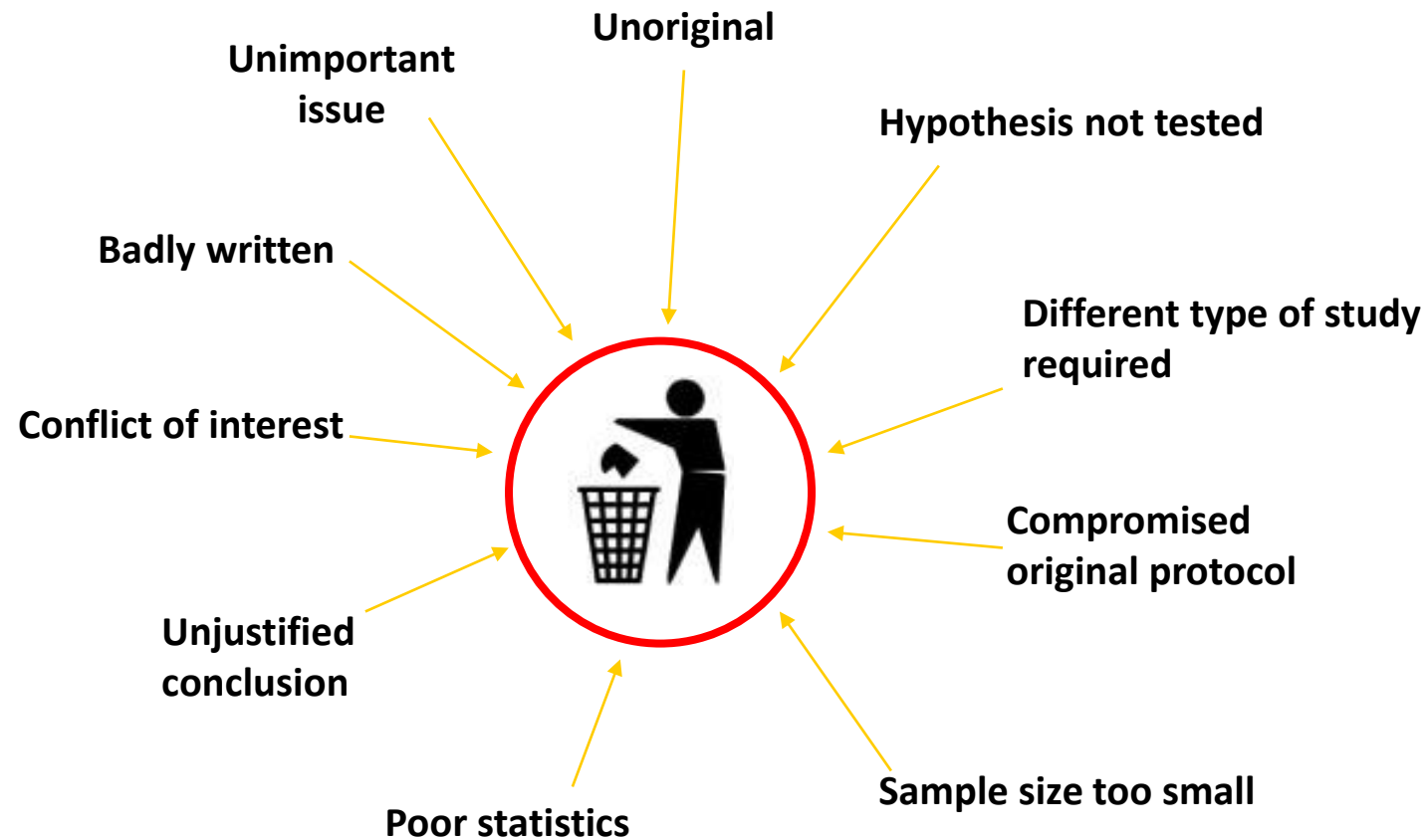


Peer Review

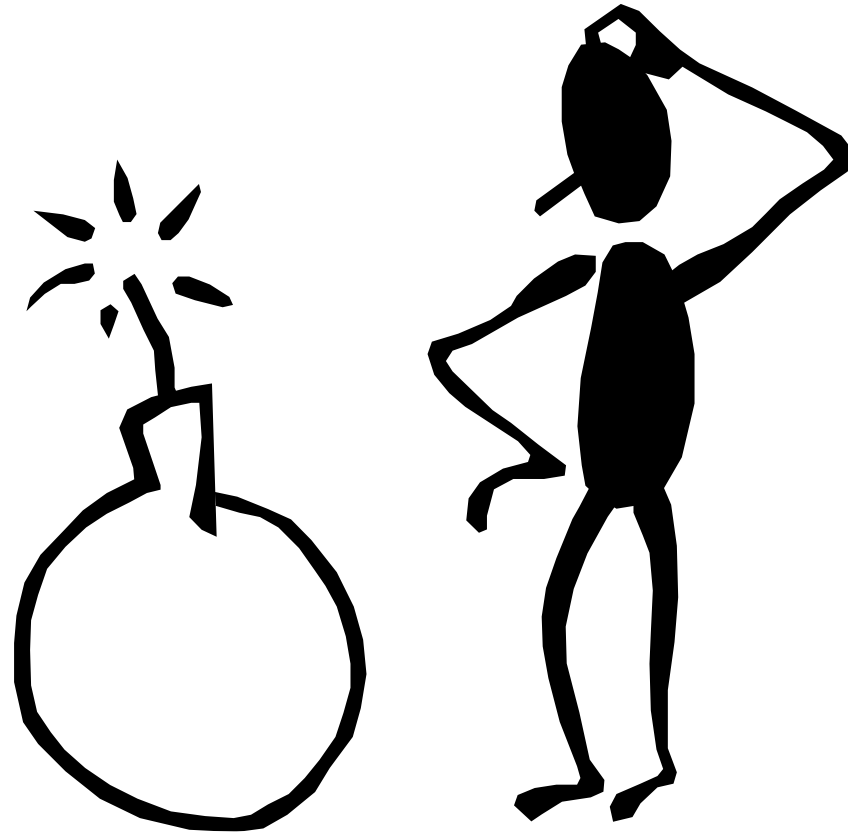
Objectives

- Describe types of peer review.
- Describe principles and policies that guide peer review.
- Given cases, discuss the dilemmas, problems, solutions, and preventive actions associated with peer review issues.
- Commit yourself to being honorable in the peer reviews that you may perform.

The Science of 'Trashing' a Paper



What is Peer Review?



Types of Review

- Reviewer Types:

1. Reviews done by **Specialty** → **Expert** Review
2. Reviews done by **Peers** → **Peer** Review

Definition

- Peer review is an assessment of grant proposal, manuscript or other work by a **Peer**.
- Peer review is used to make **decisions about research funding and dissemination** at conferences and peer-reviewed journals.

Goal of Peer Review

- To provide a **reliable, honest, unbiased** judgment of a work's
 - **Importance**
 - **Quality**
- Offer ways to **improve** the work.

(American Medical Association, 1997)

Importance of Peer Review

- “After authors, reviewers are the **lifeblood** of any journal.”

Mike J. Smith, Editor-in-Chief, *Journal of Maps*.

- “90% of researchers believed their last paper was **improved** through peer review.”

Sense about Science Peer Review Survey 2019

Peer Review Process



■ Peer Review **Process** & **Journey**

Types of Review

- Single Blind Review
- Double Blind Review
- Open Peer Review
- Transparent Peer Review
- Collaborative Review
- Post Publication Review
- Transferrable (Cascading & Waterfall) Peer Review

Types of Peer Reviews

- **Open:** Authors and reviewer **know each others'** identities.
- **Single-blinded:** Reviewer **knows** the **authors' identities**, but authors do not know the reviewer's identity
- **Double-masked:** **Neither** reviewer nor authors **know each others'** identities

Expectations From Reviewers

Editors

- **Summarized information** on scholarly contribution and the rigorous of conclusions.
- Allow **editors** to assess the **suitability** of the article for **publication** in the journal.

Authors

- **Detailed** feedback
- Highlight any **errors**, **inconsistent** arguments or **gaps** in literature or reported results
- **Assist** with making the article **more applicable** to the journal readership

Readers

- **Trusted** research **integrity** of the article
- Ensuring **adequately** detailed **methodology** to allow readers to judge the merit of the study design
- Ensuring **clarity** of argument and/or reliability of **conclusions**

When You Receive an **Invitation** for a Review:

Are there any potential conflicts of interest?



Can you complete the review in a timely fashion?



Are you happy with the type of review used by the journal?

When You **Receive** an Invitation for a Review:

■ **Accept**

- Meet the **deadline**
- Note that it is not a **one-off task**

■ **Decline** (Indicate the reason)

- Declare **conflicts of interest** if any
- The invitation is not within your **subject area**
- Suggest **replacement reviewers** if you can

■ **Unavailable**

- Specify when you will be available
- Editors may get back to you with an extended deadline

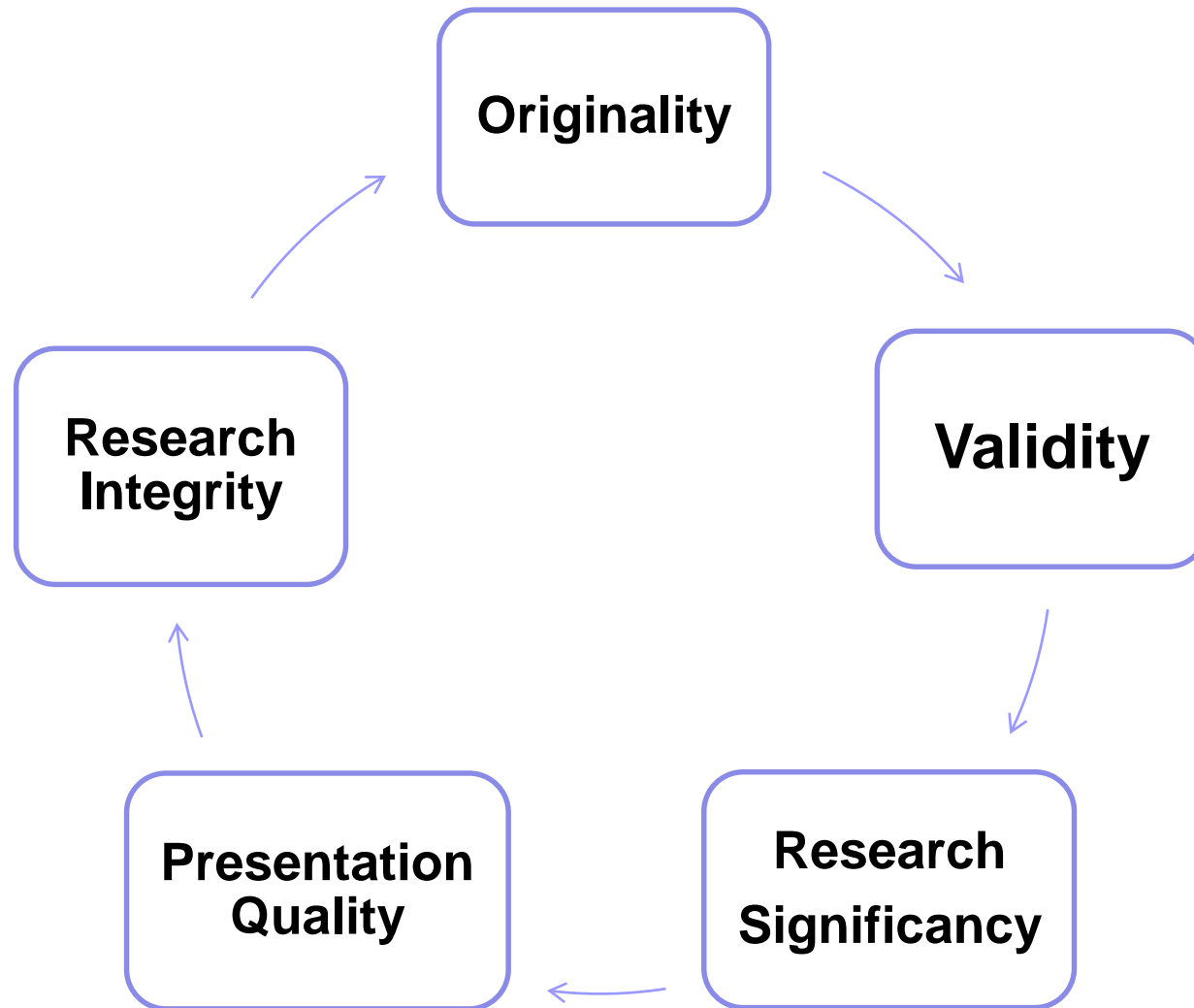
Keep

- **Consider** whether you will be able to review in a timely manner
- **Declare** any **potential conflict of interest** before agreeing to review and any relationship that may potentially bias your review
- **Keep** the peer review process **confidential** from the moment you get the invitation
- **Judge** the article on its **merits, regardless** of race, religion, nationality, sex, seniority, or affiliation of the author(s)

Criteria for a Suitable Reviewer

- **Active** in the **relevant field** and/or methodology as judged by their publication records
- Ideally having published **more than 10 articles** in the past 10 years
- Not too **senior**, as they are likely to be **very busy**
- Reviewers should be '**independent**' of one another, i.e.
 - Not currently working at the same lab/institution

Peer Reviewers Should **Look** for:



How to make an **Effective Peer Review**?

- Start by **getting an overview** of the article
- Consider what is expected from **each section** of the article
- Note **methods/methodology** section specifically
- Look carefully at the **data** or argument presented and consider whether the conclusions are supported
- Start your report with a **summary** (Make a **positive** point)
- Make it clear which comments are **essential**
- Review as **you would want to be reviewed**
- Be **Objective, Specific & Fair** enough.

Get an **Overview** of the Manuscript

- Is it clear what the authors want to communicate?
- Is it reporting **original research** or is it another type of article?
- What **contribution** does the article make to the **field of study**?
- Is the manuscript **original**?
- Is the **overall study design** and approach appropriate?
- Are you concerned about the **language**?

Structure of the Review Report

Summary

- What the article is about
- Key findings and conclusions
- Strengths and weakness

Major Comments

- Essential points that authors must address for publication
- Fundamental points for the current stud

Minor Comments

- Still important but will not affect the overall conclusions
- Not essential but would improve work



Detailed Review for Research Articles

- Title
- Abstract
- Introduction
- Methods
- Results
- Discussion and conclusion
- Tables and figures
- References

Title

- Does it express **clearly** what the manuscript is about?
- Does it highlight the **importance** of the study?
- Does it contain any **unnecessary** description?
- Does it contain **unacceptable abbreviations**?
- Does it contain the **study type** when **necessary**?
- Is it **short & concise**?

Abstract

- Is it a **short** and **clear summary** of the aims, key methods, important findings and conclusions?
- Does it include **enough information** to **stand alone**?
- Does it contain **unnecessary information**?
- Does it comply with the journal requirement on being **structured/unstructured abstracts**?

Introduction

- Does it **clearly summarize** the current state of the topic?
- Does it address the **limitations** of current knowledge in this field?
- Does it clearly **explain why the study was necessary**?
- Does it clearly define **the aim of the study** and is this consistent with the rest of the manuscript?
- Is the **research question clear** and appropriate?

Methods

- Are the study design and methods **appropriate** for the research question?
- Is there **enough detail to repeat** the experiments?
- Is it clear how **samples were collected** or how participants were recruited?
- Is there any **potential bias** in the sample or in the recruitment of participants?
- Are the correct controls/ validation included?
- Are any potential confounding factors considered?
- Has any randomization been done correctly?
- Is the time-frame of the study sufficient to see outcomes?
- Is there sufficient power and appropriate statistics?
- Do you have any ethical concerns?

Results

- Are the results presented **clearly and accurately**?
- Do the results presented **match** the **methods**?
- Have all the **relevant data** been included?
- Is there any **risk** of patients or participants being **identified**?
- Is the data described in the text **consistent** with the data in the figures and tables?

Discussion and Conclusion

- Do the authors **logically** explain the **findings**?
- Do the authors **compare the findings** with current findings in the research field?
- Are the **implications of the findings** for future research and potential applications discussed?
- Are the conclusions **supported** by the data presented?
- Are any **limitations** of the study discussed?
- Are any **contradictory** data discussed?

Tables and Figures

- Are data presented in a **clear and appropriate** manner?
- Is the presentation of tables and figures **consistent** with the description in **text**?
- Do the figure **legends** and **table** headings **clearly explain** what is shown?
- Do the figures and tables include measures of uncertainty, such as standard error or confidence intervals, where required as well as the sample size?
- Do you have any concerns about the manipulation of data?

References

- Are there any **key references missing**?
- Do the authors **cite the initial discoveries** where suitable?
- Are there places where the authors cite a **review** but should cite the **original** paper?
- Do the cited studies represent **current knowledge**?

Final Checks before Sending the Review Report

- Have you given a brief summary of the article and highlighted the key messages?
- Have you given positive feedback as well as constructive criticism?
- Have you made it clear which of your concerns are major (significant points, essential for publication) or minor (smaller issues, may not be essential for publication)?
- Are your concerns specific, with examples where possible?
- Have you numbered your comments and referred to page/ line numbers in the article to make it easy for the authors to address your points?

Final Checks before Sending the Review Report

- Is your feedback constructive, and focused on the research?
- If you were the authors, would you understand how to improve the manuscript?
- If you were the Editor, would the comments be detailed enough to help you make a decision?
- Have you checked the spelling and grammar in your report?
- Have you included your comments in the correct places in the online system – checking that any confidential comments for editors are in the right place – and have you answered all the questions?

Reviewer Bias

- Free of any potential bias, i.e.
 - No co-publications with an author/submitter of the submitted manuscript/proposal in the last 5 years
 - Not currently or recently affiliated at the same center as an author
 - Not excluded by the authors
 - Not known to have particularly strong views or opinions on the topic, unless this can be balanced by additional reviewers



Peer Review Demands Six Things

- **Competence:** Decline to review a work if you are not expert
- **Control for any bias:** Bring any real or apparent, potential, or real conflicts of interest or biases to the attention of the editor or funder
- **Promptness:** Perform a prompt review

Six Rules of Peer Review (continued)

- **Confidentiality:** Keep all aspects of the review confidential. Do not even disclose that you have performed a review on a specific topic.
- **Security:** Do not use a reviewed work as a private source of information.
- **Constructive Criticism:** Suggest ways to improve the work



Ethical Challenges to Peer Review

- Peer review process relies on expert volunteers
- But experts are most likely to benefit from privileged materials

And experts are most likely to have conflict of interests

And, if experts recuse themselves, only the unknowing will be available to review

How Editors Select Reviewers?

- **Knowledge** of research field
- Searches of **journal submission system**
- Searches of **published literature**
- **Authors suggestion** on submission
- Article **references**
- **AI** tools



Conflict of Interest

What is Conflict of Interest?

- Conflict of interest is a set of conditions in which **professional judgement** concerning a **primary interest** (such as patients' welfare or the validity of research) tends to be unduly **influenced** by a **secondary interest** (such as financial gain).
- Thompson DF. Understanding financial conflicts of interest. N Engl J Med 1993; 329: 573-576



What is conflict of interest?

- Conflict of interest is a **condition** not a **behaviour**.
- Having a conflict of interest is not, in and of itself, evidence of wrong doing
- For many professionals, it is virtually impossible to avoid conflicts of interest from time to time

- Reviewers?!

Conflict of Interest

- Possibility from the perspective of an *independent* observer that an individual's private financial interest or family's interests may influence professional actions, decisions, or judgment
 - Not possible or desirable to eliminate
 - Need to manage

Do you have a conflict of interest?

- 1. Have you in the past five years accepted the following from an organisation that may in any way gain or lose financially from the results of your study or the conclusions of your review, editorial, or letter:
 - _____ Reimbursement for attending a symposium?
 - _____ A fee for speaking?
 - _____ A fee for organising education?
 - _____ Funds for research?
 - _____ Funds for a member of staff?
 - _____ Fees for consulting?



Do you have a conflict of interest?

2. Have been employed by an organisation that may in any way gain or lose financially from the results of your study or the conclusions of your review, editorial, or letter?
3. Do you hold any stocks or shares in an organisation that may in any way gain or lose financially from the results of your study or the conclusions of your review, editorial, or letter?
4. Do you have any other competing financial interests?

What should we do?

- In case of conflicting interests, one should **declare**.
- You might want to **disclose** any sort of competing interest that would embarrass you if it became generally known after publication

Why don't authors declare conflicts of interest?

- Some **journals don't require disclosure**
- The **culture** is one of not disclosing
- Authors think that it's somehow **"naughty"**
- Authors are confident that **they are not affected by conflicts of interest**

- What about **reviewers?!**

Does conflict of interest matter?

- Financial benefit makes doctors more likely to refer patients for tests, operations, or hospital admission, or to ask that drugs be stocked by a hospital pharmacy.
- Original papers published in journal supplements sponsored by pharmaceutical companies are inferior to those published in the parent journal.
- Reviews that acknowledge sponsorship by the pharmaceutical or tobacco industry are more likely to draw conclusions that are favourable to the industry.



Conflict of interest within journals

- Drug company sponsored supplements have been shown to be of inferior quality, but many journals publish them. They are a major source of income
- Some journals exist simply to publish studies funded by pharmaceutical companies
- Many journals depend heavily on advertising: does this influence their decisions on what to publish?



Conflict of interest within journals

- Some journals publish advertising next to related articles? Does this influence what they publish?
- Some journals make millions of dollars from reprints of articles, mostly of randomised trials funded by pharmaceutical companies.



Conflict of interest within journals

- Acceptance of a particular study may be accompanied by a reprint order of more than a million dollars. It's not difficult to tell which studies might produce such an order. Does this influence the decision on which studies to publish?
- Few (if any) journals publish the competing interests of their editors, editorial board, and management team and board

How to respond to conflict of interest?

- “If in doubt, **disclose.**”
- Sometimes the conflict will be so strong that it will forbid participation
- The danger of trying to eradicate conflict of interest is that it may encourage deception



Conclusions

- Concern about conflict of interest is not just political correctness
- Conflict of interest has an important impact on the information reaching health professionals and the public and on patient care
- Conflict of interest is very common in medicine



Managing Peer Review Conflict of Interest

- Disclosure
- Management
- Avoidance

(Shamoo & Resnick, 2003)

Disclosure

- Disclose the potential conflict of interest to an objective and interested, but independent, third party such as :
 - The journal editor
 - The grant manager
 - The article's readers

(Shamoo & Resnick, 2003b)

Management

- Have independent but interested third party establish rules and policies to control the conflicting interests through
- oversight, safeguards, or added vigilance such as:
 - Study design reviewed by uninvolved individuals
 - Article or grant reviewed more closely or by additional reviewers

(Shamoo & Resnick, 2003b)



Avoidance

- Last resort
- Remove researcher from a particular review
- It is unethical to use *conflict of interest* as an excuse to avoid professional service review responsibilities



Peer review

- Articles submitted to peer-reviewed journals (manuscripts) are reviewed by experts who advise the editor on whether they should be published and what changes are necessary.

Peer Review - Functions

- To Protect
 - i) The author from publishing &
 - ii) The subscriber from reading

Material of insufficient quality



Editorial Decision

An editorial committee may decide that a paper:

- Is acceptable for publication
- Is acceptable for publication following minor revisions
- Is acceptable for publication following major revision
- May be reconsidered for publication following major revisions
- May be considered for publication as a letter or a short report
- Is unacceptable for publication

Editorial decision

- Rejection rate: 15% (pay journals) to 60% (specialist journals) to 90% (NEJM, The Lancet)
- How long does it take? (Choice of journal)
 - BMJ: 70 days
 - JAMA: 117 days
 - Iranian journals?



Questions journals ask

- Is the research question important?
- Is it interesting to our readers?
- Is it valid? A scientifically sound study.



What editors look for

- Short, clear, precise title
- Good abstract
- Good design and methods
- Clear conclusions
- Brevity
- Follow instructions



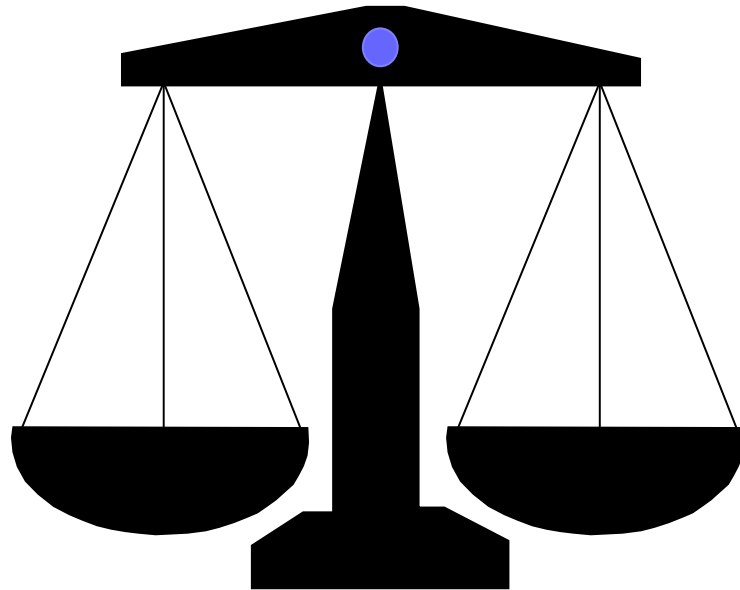
What reviewers look for

- Good design and methods
- Simple tables and figures
- Logical organisation
- Brevity
- Balance
- Appropriate statistics
- Their papers

Problems with peer review

- Slow
- Expensive
- A lottery
- Ineffective
- Biased
- Easily abused
- Can't detect fraud

Critical Appraisal Skills Programme (CASP)



Critical appraisal is the process of weighing up evidence to see how useful it is in decision making

Critical appraisal helps the reader of research.....

- Decide how trustworthy a piece of research is (*validity*)
- Determine what it is telling us (*results*)
- Weigh up how useful the research will be (*relevance*)





Critical Appraisal: Three preliminary questions

- **Why** was the study done and what hypothesis was being tested?
- **What** type of study was done?
- **Was** the study **design appropriate**?



Why was the study done?

i.e. what was the key research question/ what hypotheses were the author testing?

Hypothesis presented in the negative is

“null hypothesis”



with the additional advantage of its short testing time.

The aim of our study was to examine three rapid visual field tests HSF, TOP, and FDT and determine their diagnostic value to detect glaucomatous field defects in patients with glaucoma.



What type of study?

Primary – these report research first hand.

- *Experimental* – artificial and controlled surroundings.
- *Clinical trials* – intervention offered.
- *Observational* – something is measured in a group.

What type of study?

Secondary – summarise and draw conclusions from primary studies.

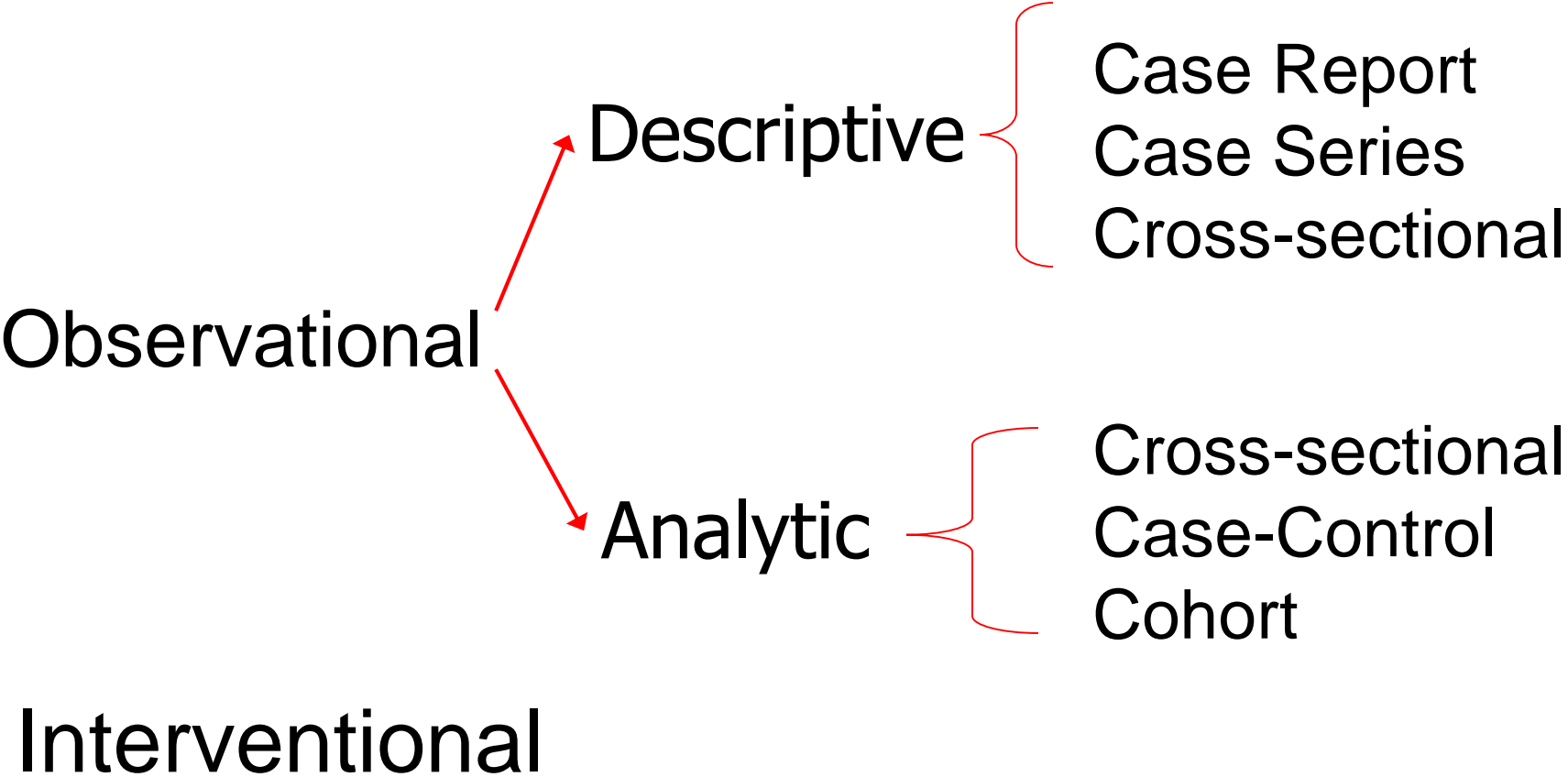
- *Overview*
 - Non systematic reviews (summary)
 - Systematic reviews (rigorous and pre-defined methodology)
 - Meta-analyses (integration of numerical data from more than one study)
- *Guidelines* (leads to advice on behaviour)
- *Decision analyses* (to help make choices for doctor or patient)
- *Economic analyses* (i.e. is this a good use of resources?)

The Hierarchy of Evidence

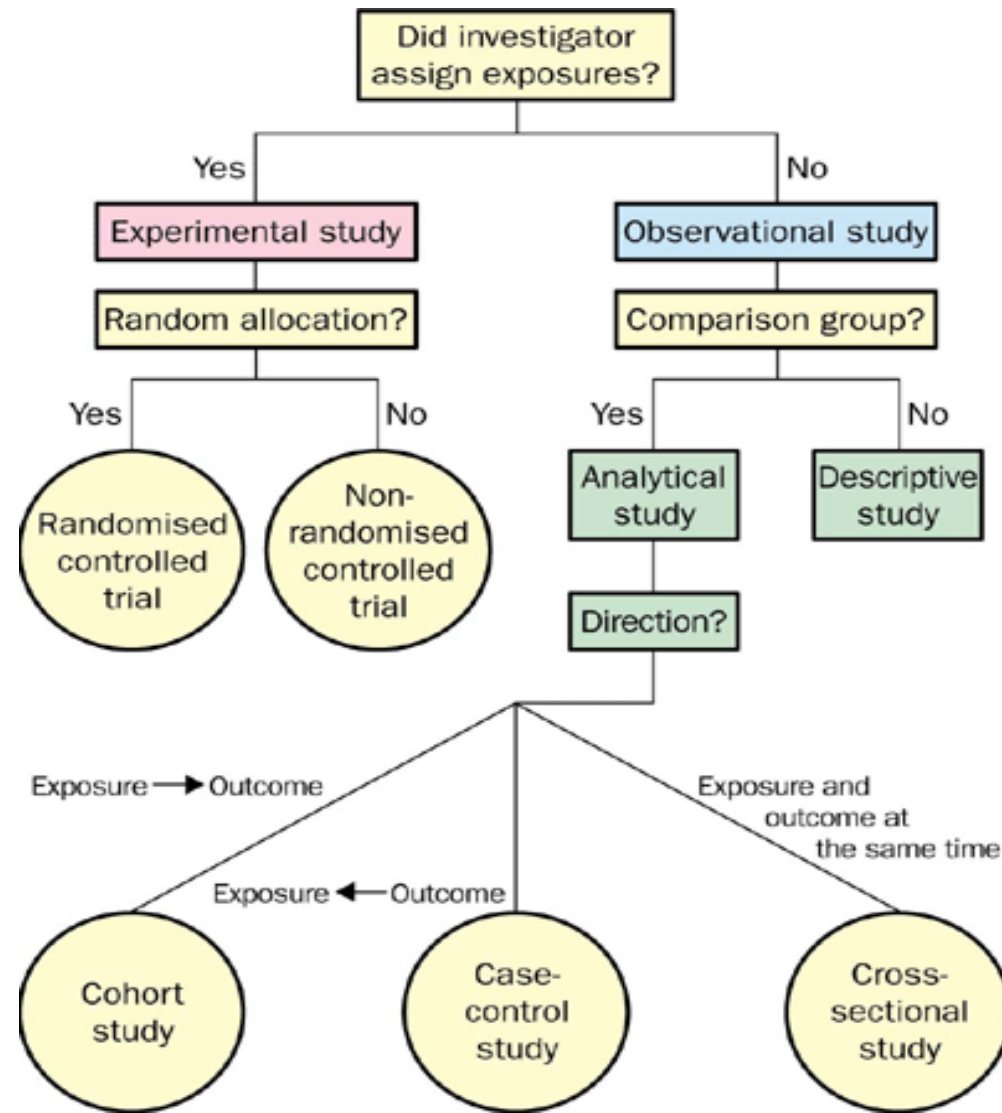
1. Systematic reviews & meta-analyses
2. Randomised controlled trials
3. Cohort studies
4. Case-control studies
5. Cross sectional surveys
6. Case reports
7. Expert opinion
8. Anecdotal



Study Designs



Specific types of study



Was the study design appropriate?

■ Broad fields of research

- *Therapy*: testing the efficacy of drug treatments, surgical procedures, alternative methods of service delivery, or other interventions. Preferred study design is **randomized controlled trial**
- *Diagnosis*: demonstrating whether a new diagnostic test is valid (can we trust it?) and reliable (would we get the same results every time?). Preferred study design is **cross sectional survey** in which both the new test and the gold standard are performed

Was the study design appropriate?-2

- *Screening*: demonstrating the value of tests which can be applied to large populations and which pick up disease at a presymptomatic stage. Preferred study design is **cross sectional survey**
- *Prognosis*: determining what is likely to happen to someone whose disease is picked up at an early stage. Preferred study design is longitudinal **cohort study**
- *Causation*: determining whether a putative harmful agent, such as environmental pollution, is related to the development of illness. Preferred study design is **cohort or case-control study**, depending on how rare the disease is, but **case reports** may also provide crucial information

1. Check the Title

- Read the title and check that you understand its meaning. Sometimes titles are inaccurate and do not reflect the content of the paper which follows.
- *For example*, one title indicating the use of a drug in the treatment of hypertension, prefaced a paper which merely described a short haemodynamic study.

1. Check the Title

- Watch for cryptic titles. Sometimes a useful paper may be hidden behind an indifferent title.
- Never rely on the title alone to accept or reject a paper for more detailed reading.

2. Who are the Authors?

- Range of expertise: professional backgrounds with address
- Research center?
- Principle researcher
- Number of authors
- Have any of the authors obvious connections with the drug industry?

3. Read the abstract

- This is a synopsis of the paper, which should
give the **objective** of the study, the **methods** used, the **results** obtained and the **conclusions** reached.

3. Read the abstract

Beware of the following warning signs:

- 1. Confusion and possible contradictory statements - a good abstract should be crystal clear.
- 2. Profusion of statistical terms (especially p values).
- 3. Disparity between the number of subjects mentioned in the summary and the number in the paper

4. Check the Introduction

- Check that a brief review of available background literature is provided and that the question being asked in the study follows logically from the available evidence.




Introduction

- General, concise description of problem
 - background to the work
 - previous research
- Where that work is deficient
 - how your research will be better
- State the hypothesis
- About 3 to 4 paragraphs



Methods

- Study design
- Participants
- Ethical approval
- Sample size
- Questionnaires
- Interventions
- Clinical assessments
- Statistical methods



5. Assessing Methodology: Six essential questions



Six essential questions

- 1. Was the study original?**
- 2. Who is it about?**
- 3. Was the design of the study sensible?**
- 4. Was bias avoided?**
- 5. Was assessment "blind"?**
- 6. Were preliminary statistical questions dealt with?**

Six essential questions:

1. Was the study original?

- Is this study bigger, continued for longer, or otherwise more substantial than the previous one(s)?
- Is the methodology of this study **any** more rigorous ?
- Will the numerical results of this study **add significantly to a meta-analysis** of previous studies?
- Is the population that was studied different in **any way**?
- Is the clinical issue **addressed** of sufficient importance, and is there sufficient doubt in the minds of the public or key decision makers?

Six essential questions:

2. Who is it about?

- How recruited?
 - *Recruitment bias*
- Who included?
- Who excluded?
- Studied in “real life circumstances”?



Six essential questions:

3. Was the design of the study sensible?

- What specific intervention or manoeuvre was being considered and what was it being compared to?
- What outcome was measured and how?

Six essential questions:

4. Was bias avoided?

- i.e. was it adequately controlled for?

RCT – method of randomisation, assessment ? truly blind.

Cohorts – population differences

Case control – true diagnosis, recall (and influences)



Six essential questions:

5. Was assessment "blind"?

If I knew that a patient had been randomised to an active drug to lower blood pressure rather than to a placebo, I might be more likely to recheck a reading which was surprisingly high. This is an example of performance bias, a pitfall for the unblinded assessor.

Six essential questions:

6. Were preliminary statistical questions dealt with?

- **Statistical tests**
- **The size of the study**
 - “power”
- **The duration of follow-up**
- **The completeness of follow-up**
 - “drop-outs”

6. Results

What was found?

- Should be logical – simple

—————→
complex

Cheat on statistical tests



- Throw all your data into a computer and report as significant **any relation** where $P < 0.05$
- If **baseline** differences between the groups favour the intervention group, remember not **to** adjust for them
- Do not test your data **to** see if they are **normally** distributed. If you do, you might get stuck with non-parametric tests, which aren't as much fun
- Ignore all **withdrawals** (drop outs) and **non-responders**, so the analysis only concerns subjects who fully complied with treatment



- Always assume that you can plot one set of data against another and calculate an " r value" (Pearson correlation coefficient), and assume that a "significant" r value proves **causation**
- If **outliers** (points which lie a long way from the others on your graph) are messing up your calculations, just rub them out. But if outliers are helping your case, even if they seem **to** be spurious results, leave them in
- If the **confidence intervals** of your result overlap zero difference between the groups, leave them out of your report. Better still, mention them briefly in the text but don't draw them in on the graph—and ignore them when drawing your conclusions



- If the difference between two groups becomes significant four and a half months **into** a six month trial, **stop** the trial and start writing up. Alternatively, if at six months the results are "nearly significant," **extend** the trial for another three weeks
- If your results prove uninteresting, ask the computer **to** go back and see if any particular **subgroups** behaved differently. You might find that your intervention worked after all in Chinese women aged 52-61



Does the y -axis start at zero?

- The y -axis should always begin at zero. If this is not so, someone is trying to make you believe that one of the groups has reached the lowest rate or number possible when this is not the case.



Four possible outcomes from any study

1. Difference is clinically important and statistically significant i.e. important and real.
2. Of clinical importance but not statistically significant. sample size too small.
3. Statistically significant but not clinically important i.e. not clinically meaningful.
4. Neither clinically important nor statistically significant.

7. Discussion

- Check that the progress in argument to the conclusion is logical and also that any doubts or inconsistencies which have been raised in your mind by earlier parts of the paper, are dealt with.
- Are limitations mentioned?
- Authors' **speculations** should be clearly distinguished from results, and should be seen as **opinion not fact**.

8. Bibliography

- If you find statements in the paper which you consider to be important check that a **reference** is provided.
- Be suspicious if no reference is given, or if the references which are provided are dated, or predominantly in obscure journals.

9. Acknowledgment

- Who? (and what)?
- Source of funding? (conflict of interest)



Recommended Reading

- Trisha Greenhalgh : How to read a paper; the basis of evidence based medicine
- Gordon Guyatt, Drummond Rennie. Users' Guides To The Medical Literature, A Manual for Evidence-Based Clinical Practice

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Critical Appraisal

What is critical appraisal?

- Critical appraisal is the **assessment** of evidence by **systematically** reviewing its **relevance, validity** and **results** to specific situations.

Chambers, R. (1998).

Three **Basic** Questions ...

■ Is it **Valid**?

Is the methodology appropriate to **answer the question**.

Is it carried out in a **sound way, eliminating bias and confounding**?

■ Is it **Reliable**?

Are the results **real** or because of **chance**?

■ Is it **Applicable**?

Will the results **help locally**?



Key Steps to Effective Critical Appraisal

1. What are the **results**
2. Are the **results valid**?
3. How will these results **help** me/my colleagues do their **job/decisions**?



Critical Appraisal Tools

- Why do we need them?
- Where we can find them?



Critical Appraisal Tools

- CASP
- Center for Evidence Based Medicine
- International Centre for Allied Health Evidence
- DISCERN
- AGREE



Reporting Guidelines used as a Critical Appraisal Tool

- CONSORT checklist and flow diagram
- TREND checklist
- STARD checklist & flow diagram
- STROBE checklists
- PRISMA checklist and flow diagram
- COREQ checklist
- SQUIRE checklist
- REMARK checklist
- ENTREQ

CASP (<http://www.casp-uk.net>)

- The **C**ritical **A**ppraisal **S**kills **P**rogramme (**CASP**) was developed in **Oxford** in **1993** and has over the past years helped to develop an evidence based approach in health and social care.
- The **CASP** appraisal tools are based on the guides produced by the Evidence Based Medicine Working Group, a group of clinicians at McMaster university, Hamilton, Canada, and colleagues across North America, published in the Journal of the American Medical Association.

CASP (<http://www.casp-uk.net>)...

- Systematic Reviews
- Randomized Controlled Trials (RCTs)
- Qualitative Research
- Economic Evaluation Studies
- Cohort Studies
- Case Control Studies
- Diagnostic Test Studies



Center for Evidence Based Medicine (CEBM)

- Available at: <http://www.cebm.net>
- Offers [Critical Appraisal Sheets](#)



Appraisal Tools for Observational Studies



Types of Observational studies

- Cohort
- Case-control
- Cross-sectional
- Ecologic
- Case series
- Case report

Results

- **Numbers analyzed:** Number of participants (denominator) in each group included in each analysis and whether the analysis was by “intention to treat.” State the results in absolute numbers when feasible (e.g., 10 of 20, not 50%).
- **Outcomes and estimation:** For each primary and secondary outcome, a summary of results for each group and the estimated effect size and its precision (e.g., 95% confidence interval).

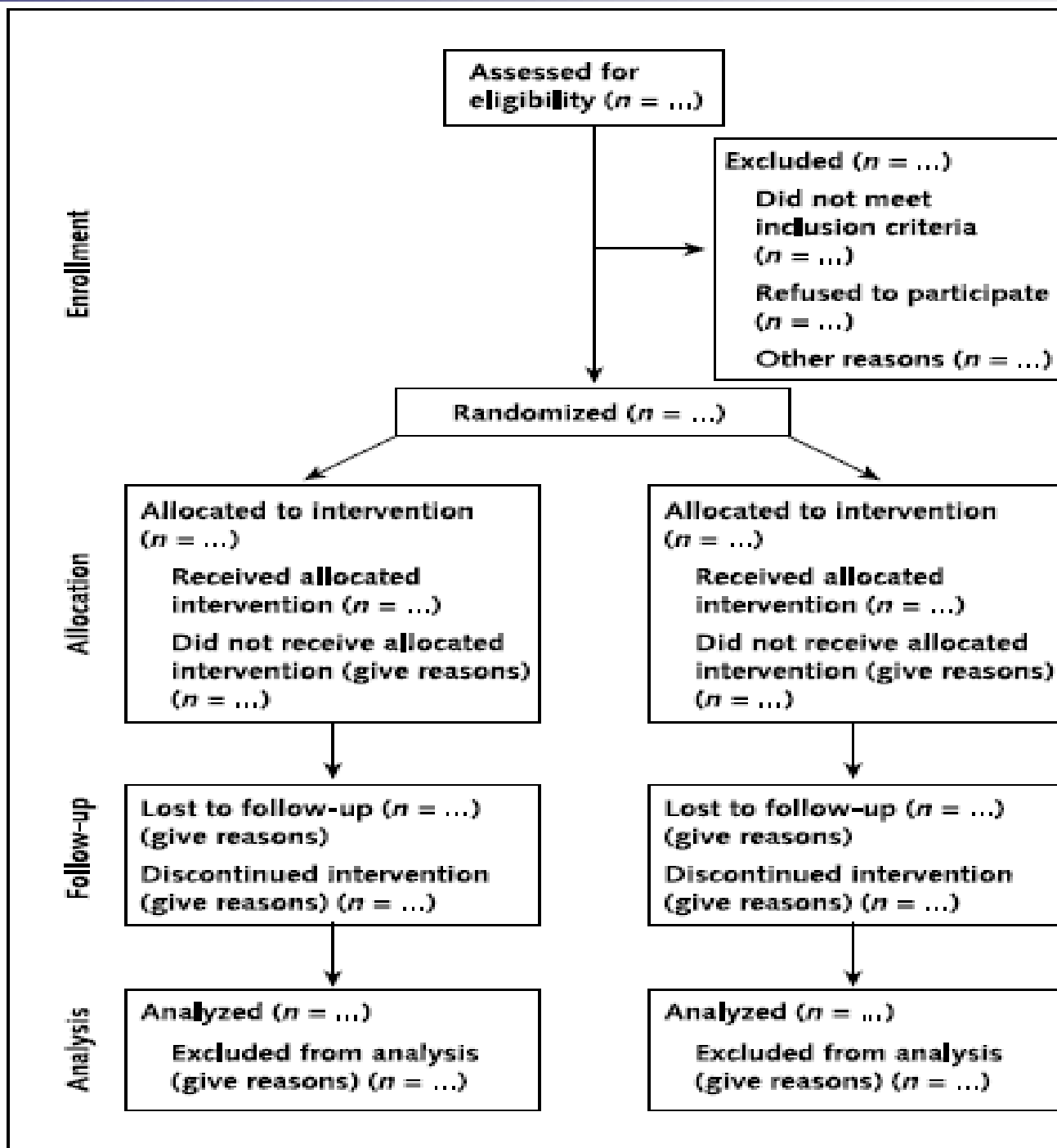
Results

- **Ancillary analyses:** Address multiplicity by reporting any other analyses performed, including subgroup analyses and adjusted analyses, indicating those pre-specified and those exploratory.
- **Adverse events:** All important adverse events or side effects in each intervention group

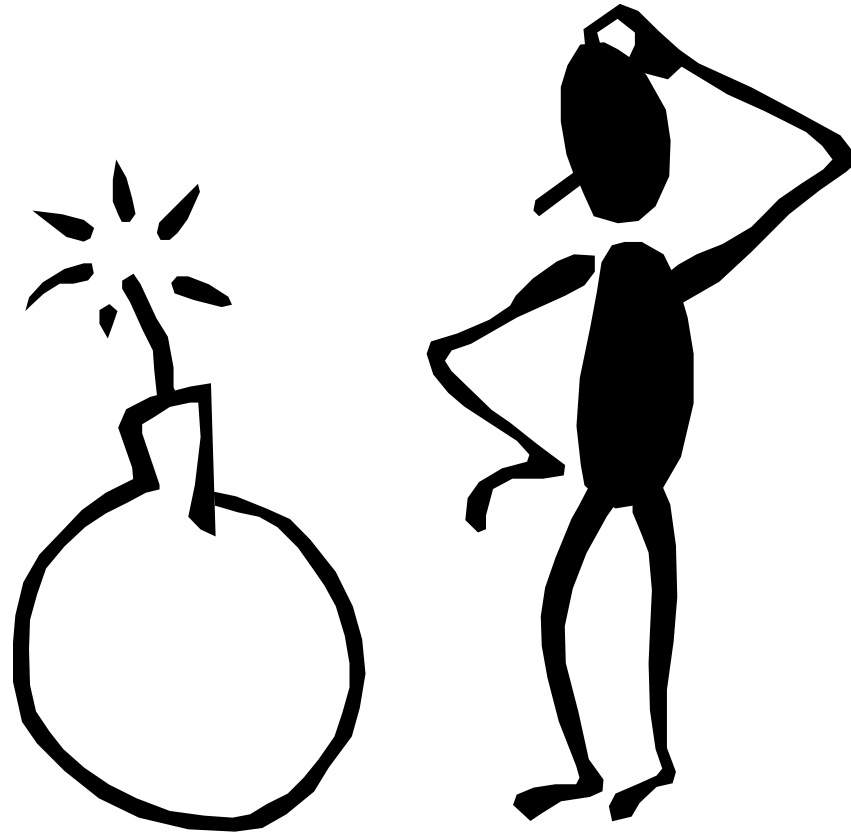


Discussion

- **Interpretation:** Interpretation of the results, taking into account study hypotheses, sources of potential bias or imprecision, and the dangers associated with multiplicity of analyses and outcomes.
- **Generalizability:** Generalizability (external validity) of the trial findings.
- **Overall evidence:** General interpretation of the results in the context of current evidence.



Was it clear enough !



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