Reviewer's report

Title: Assessment of the risk of bias in studies in Cochrane reviews

Version: 1 Date: 20 January 2008

Reviewer: Denise O'Connor

Reviewer's report:

GENERAL COMMENTS
The current study aims to review the guidance given by Cochrane Review Groups (CRGs) to authors undertaking Cochrane reviews regarding assessment of risk of bias (previously known as methodological quality) of included studies. The authors review the information provided by CRGs to authors about assessing risk of bias of included studies in Cochrane reviews (including for example whether a component or scale approach is recommended, and how this information is incorporated into the analysis of the review). To my knowledge this question has not been addressed in a previous publication. There may be limited appeal of this study due to its narrow focus but it is a useful addition to the literature.

MAJOR COMPULSORY REVISIONS
Please revise the title of the manuscript to reflect the focus of the study (not assessment of risk of bias of studies in reviews per se but a review of guidance given to Cochrane authors by Cochrane review groups about risk of bias assessment). It could be simply reworded to: Guidance on assessing risk of bias in studies in Cochrane reviews

Please review the sections of the manuscript where you have referred to the Cochrane Handbook (ref 1 below). There seem to be some errors in the information you have stated (four examples given below):

1) You state that the Handbook advises â##..quality scores should not be used..â## (p4 of manuscript) however the Handbook makes the case for using a component approach above a scale approach (for reasons stated in your manuscript) and states that â##none of the currently available scales for measuring the validity or quality of trials can be recommended without reservationâ## and that â##if authors or CRGs choose to use such a scale, it must be with cautionâ##. [Thus the Handbook advice is that it is PREFERABLE to use the component approach â## this is a subtle but important point that should be corrected in the manuscript; may go someway to explain why some CRGs have not excluded the scale approach in the past].

2) You state that the Handbook provides no specific recommendations for incorporating assessments of methodological quality in reviews (p5 of manuscript), and then classify any CRG that â##did not provide any recommendations, but referred to the Cochrane Handbookâ## as â##giving
no advice for using methodological quality assessments of individual studies in reviews.. The Handbook outlines several methods of incorporating validity assessments into a review (e.g. as threshold criterion, in sensitivity analyses etc) (section 6.10, p86). Please correct this reference to the Handbook and reclassify CRGs for this criterion and modify the results as appropriate.

3) You state that the Handbook recommends use of the scale approach (Discussion, p8 para 2). However, the advice is not to score individual validity criteria which are combined to give a numeric summary. Instead the Handbook suggests that an overall summary of the risk of bias (or validity) of the study can be expresses as low, moderate or high risk of bias (depending on the specific criteria assessed and how the bias is likely to affect the results).

4) You state that the Handbook recommends analyzing all data according to the intention-to-treat principle, but has currently no recommendations on sensitivity analyses related to this item (Discussion, p9 para 1). See sections 8.4.1 (p112) and 8.10 (p151) of the Handbook for specific recommendations, including guidance on sensitivity analyses in relation to this.

Under Methods (p5 para 1), you refer to CRG guidance that recommended both scales and components as optional. You then state that you classified these groups as recommending scales. It would be more accurate to present these groups separately as recommending a component and/or scale approach. In my view these CRGs are different to those advising authors to exclusively use a scale approach.

MINOR ESSENTIAL REVISIONS

Please correct the spelling of advised to advised throughout the text where necessary (e.g. p5 para 5; p9 para 4 advises).

Change Most review groups have its to Most review groups have their (p3, para 5).

Please cite the Issue of The Cochrane Library which was searched for guidance about assessment of methodological quality of studies by CRGs (Methods, p4, para 2).

You state that you conducted the study in March 2007 (Methods p4, para 2), however, refer to an outdated version of the Cochrane Handbook for Systematic Reviews of Interventions in your reference list (citation #12). Please update to the version current at the time of conducting the study (i.e. v 4.2.6, updated Sept 2006).

Please present the results in the order that they are described in para 2, p5 [i.e. 1) component vs. scale; 2) areas of quality assessed; 3) type of analytical approach]. Currently #3 is presented in the Results section before #2 (i.e. move para 5 on p5 to the end of the Results section).

Consider removing reference to specific CRGs in the text and instead refer to one group recommended etc.
DISCRETIONARY REVISIONS

The use of the term ‘slavishly’ (pg 7 para 2) has (overly) negative connotations. Please consider rewording.

I am not clear what you mean by ‘Authors may decide to use a component approach although the group recommends a scale, or vice versa, and some groups are MORE PRODUCTIVE than others’? (what do you mean by more productive?)

REFERENCES


What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests.