Author's response to reviews

Title: Improving the Use of Research Evidence in Guideline Development: 3. Group Composition

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Author's response to reviews: see over
Improving the Use of Research Evidence in Guideline Development: 3. Group Composition

Responses to comments

Reviewer: Regina Kunz
Reviewer’s report:

General
This paper is part of a series of reviews by the WHO Advisory Committee on Health Research to the WHO.

This review of the series addresses issues about the composition of guideline groups based on three pre-defined key questions a) on the composition of WHO -panels, b) on the groups to be consulted by the panel and c) on methods to ensure appropriate consultation. The authors start by reviewing the current approach of the WHO for group composition and identifying its weaknesses in the existing methodology or in its implementation and compare it to the various approaches used by other key organizations in the composition of guideline groups. Then the authors contrast these approaches with the current empirical evidence and integrate them in their specific recommendations to the WHO.

This is a nice and well written paper addressing an important question for organizations setting up guideline panels and critical issues for a successful completion of a guidelines. The limited empirical evidence on group composition highlighted in this review further supports the role of this paper and its advice to the WHO for further empirical exploration of this issue. Given the particular role of the WHO on health care issues, the recommendations conveyed by this paper to this important organization will achieve attention by many other guideline organization.

The paper is well reasoned. The methodology to the series has been reported in a separate paper which is not part of this publication. The authors used a structured approach in contrasting the process of group composition by the WHO and several other influential organizations and compare their findings to what has been identified empirically through systematic research (acknowledging that it was beyond their scope to do a comprehensive in-depth review themselves). The authors identify the relevant knowledge gaps to the key questions and use logical and / or pragmatic arguments in their recommendations that are in line with the “common understanding” of what is required to achieve a successful guideline process and a broad acceptance of the final product. The different angles and perspectives (WHO, different organizations, empirical evidence) ensure transparent and objective information of the reader and the WHO which is well distinguished from the recommendations to the WHO that invariably includes judgment on behalf of the authors. This two step approach provides credibility to the review.

As a side mark: The statement in the conclusion that a “more exhaustive review would not yield a great deal of additional evidence at this time” seems somewhat strong given that the technology report used as main source for relevant part of the review is nearly 10 years old and it might be worth down toning on it.

The authors have chosen a well built, easy-to-follow structure of their manuscript, they avoided jargon and did not get lost in details.
Major Compulsory Revisions: NONE

Minor Essential Revisions:

On page 6, line 4 of the paper, reference 4 needs to be added.

Done

Discretionary Revisions:

I would recommend to tone down the statement “a more exhaustive review would not yield a great deal of additional evidence at this time.”

We think it is fair to say that “We do not believe that a more extensive review would yield a great deal of additional evidence” given the fact that we have conducted a search (PubMed and three methodological databases) for studies that are more recent than the 1998-review.

What next?: Accept after minor essential revisions
Level of interest: An article of importance in its field
Quality of written English: Acceptable
Statistical review: No, the manuscript does not need to be seen by a statistician.
Reviewer: Francoise Cluzeau
Reviewer's report:
General
This paper is fairly general and addresses predominantly the composition of guidelines development group. This is an important factor in the development of guidelines but there are some key areas that are of equal importance, for example group working processes/functioning. These can have a significant impact on final recommendations. It would be helpful if this topic was covered in one of the other 16 reviews mentioned in the abstract to ensure that the background advice to WHO is comprehensive.

The paper provides a competent review of the current literature on guidelines group composition and it is clearly written. However it stops short of exploring some more contentious issues about what types of guidelines groups should develop guidelines (e.g. standing groups versus ad-hoc groups). There is little literature on this particular subject but raising it would have strengthen the paper.

We briefly touch upon this subject in Review 16 in this series: Evaluation (under the heading “When should guidelines be updated?”)

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Abstract: 6-13th bullet points. "What methods should WHO use to ensure appropriate consultations?" I would argue that these points are not related to the composition of the guidelines group. They are about consulting on the draft guideline that the guideline group have developed. I am not sure they are relevant in the context of this paper

We agree that the link between group composition and the consultation process was not obvious, and we have therefore changed the title of the paper to include the consultation process: “Improving the Use of Research Evidence in Guideline Development: 3. Group Composition and Consultation Process”

Background:
- Third paragraph: This suggests that WHO does not follow its own 'guidelines for guidelines'. If this paper is designed to advise WHO is there any reason to believe that WHO will take any notice of it?

The reviews are commissioned by WHO's Advisory Committee on Health Research, as part of larger effort to improve the use of research findings within the organization. The effort also includes plans on how to implement the recommendations we make in our reviews.

- Fourth paragraph. "Broad consultations". This should be more clearly defined. Consultation with which groups? How could this be done?
We are purposely not entirely specific on what constitutes a “Broad consultation”. In our Discussion we recommend a “Wide consultation when selecting members of a group”, and in the abstract we state that “Groups that develop guidelines or recommendations should be broadly composed and include important stakeholders such as consumers, health professionals that work within the relevant area, and managers or policy makers.”

How to implement this practically should be addressed in more detail by WHO in their follow-up of our recommendations.

- Fourth paragraph. The last sentence is about consultation of the guideline. Is this relevant to this paper?

As mentioned above: we have changed the title of the paper to make it clear that the consultations process is included in the scope of the paper.

- "What other organisations are doing”. First paragraph, first sentence: "In a recent international survey... and consumers". The reference is missing from the text. Presumably this is reference [4].

Fixed.

- "What other organisations are doing”. Second paragraph. 3rd sentence. "this person has a crucial role...group process". This statement should be referenced.

This quote is from the Discussion (2nd paragraph, 3rd sentence), and is addressed below.

- "What other organisations are doing”. Third paragraph. NICE guideline development groups may occasionally include experts. Suggest the sentence is toned down to "(NICE) in the UK usually does not include experts.. ".

We have rephrased to “does not necessarily include experts”.

- "What other organisations are doing”. Third paragraph, last sentence. "it was concluded the NICE is an " internationally a .. ". Delete "an".

Done.


Done (fifth paragraph). Thanks

-Discussion:First sentence. Given the paucity of empirical evidence on the effect of guidelines group composition on the final product the conclusion that there is " sufficient evidence to conclude" is rather overstated. Suggest change to "there is sufficient evidence to suggest"
We think we can reasonably state that there is sufficient evidence to conclude “how a panel is composed can have an important impact on conclusions drawn by a group” (our underlining).

-Discussion: Second paragraph. Third sentence. Should be referenced

The point about the group leader being important for letting all voices in a group be heard, is referenced under the section “What are other organisations doing” (we refer to NICE’s guidelines manual). Also, we have edited this into bullet-points in the Discussion, which makes it a bit awkward to include the reference also there.

- References:

Done

11. I have been unable to find this reference in Health Res Policy Syst

Will be published in parallel with this review.

13. I have been unable to find this reference in Health Res Policy Syst

Will be published in parallel with this review.

Discretionary Revisions (which the author can choose to ignore)
What next?: Accept after minor essential revisions
Level of interest: An article of limited interest
Quality of written English: Acceptable
Statistical review: No, the manuscript does not need to be seen by a statistician.
Reviewer: Martin Eccles
Reviewer’s report:
General
Overall I think this is a well written paper and I do not disagree with the conclusions it draws. However I think it could be structured better.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

There is a degree of detail in the abstract that does not appear in the paper but both could and should. I would suggest the authors ensure that the detail in their abstract is located in the relevant sections of the paper and they then re-write their abstract.

Response: Done.

I suggest that the key questions addressed by the review (currently only appearing in the abstract) are reproduced in the text at the end of the Background immediately before the Methods section.

Response: Good idea! Done - in all our reviews in this series.

Much of the content of the paper addresses issues of the composition of guideline development groups. However there are two sets of questions and answers in the abstract (on who should be consulted and how) that do not appear to be addressed by the paper and do not clearly appear in the body of the paper. The authors should consider re-structuring their paper to make the distinctions between their attempts to answer the three questions clearer.

Response: Done.

The answers should appear at a place in the text where they logically emerge from the preceding text. They could also be drawn together in a Box within the body of the paper.

Response: We have edited and restructured the text accordingly – we opted for not using a Box.

In considering the issue of composition the authors do not relate composition to the topic of the guideline. At the moment there is a risk that the conclusions of the paper could be taken forward in a bureaucratic way that results in token multi-disciplinarity when it is not necessarily needed. There may be occasions when the composition of a guideline group is relatively homogenous because the questions being addressed, whilst important, of limited broader interest. This said, I suspect there will be no evidence addressing this. Nonetheless, the notion of matching group membership to guideline topic seems worthy of slightly more debate.

Response: We believe that most recommendations from WHO will (or should) be on topics that are of broad interest and importance, and thus should be developed by broadly composed groups. We do not think there is a great risk, in practice, of having guideline development groups that are too broadly composed – rather the contrary. Thus, although we acknowledge the potential risk, we do not agree that we need to address it at this occasion.

In terms of the debate around the involvement of consumers in guideline development groups an article (on which I am an author) discusses the issues and practical experiences. This may be of relevance to this section of the paper. van Wersch A, Eccles M. Involvement of consumers in the development of evidence based clinical guidelines: practical
experiences from the North of England Evidence based guideline development programme. Quality in Health Care 2001; 10: 10-16

Response: We have referred to this paper in review number 10 in our review-series: Integrating Values and Consumer Involvement.

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions

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

Quality of written English: Acceptable

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