Reviewer's report

Title: Improving the Use of Research Evidence in Guideline Development: 8. Synthesis and presentation of evidence

Version: 1 Date: 16 June 2006

Reviewer: John N Lavis

Reviewer's report:

General observations
The paper addresses an important issue and is well reasoned and balanced. The paper is reasonably well written but requires some additional work to ensure that the abstract and text are more closely linked and that the key messages are well articulated.

Major compulsory revisions
None

Minor essential revisions
1. The authors should ensure they are consistent in the questions that the paper addresses and in the language they use to address the questions. By my count they invoke three variations on the questions:
   a. the title suggests that the questions are about how evidence should be synthesized and presented;
   b. the abstract and results section suggest that the questions are about how existing reviews should be critically appraised (and used although it’s not clear in this context what is meant by use), when and how WHO should undertake or commission new reviews, how the findings of systematic reviews should be summarized and presented to committees responsible for making recommendations, and what additional information is needed to inform recommendations and how this information should by synthesized with information about effects and presented to committees; and
   c. the text on page 7 suggests that the questions are about how existing reviews should be critically appraised, how priority setting should be undertaken, how reviews should be commissioned, and how the findings of systematic reviews should be summarized and presented to committees responsible for making recommendations.

2. The authors provide a list of the other types of information needed to inform recommendations, however, their list pertains primarily to clinical practice guidelines. They don’t comment on the other types of information, such as the views and experiences of stakeholders, which can be important to developing policy guidance.

3. The authors don’t comment on whether there is an ethical obligation on the part of WHO to take reasonable steps to ensure that a full systematic review is undertaken when a rapid appraisal is chosen as an alternative because of time pressures and to ensure that any deviation between the findings from the full systematic review and the rapid appraisal is assessed in terms of whether the recommendations warrant changing.

Discretionary revisions
4. The authors should address a number of minor wording and formatting issues:
   a. bullet points 1 and 2 in the abstract should likely be reversed;
   b. bullet point 1 in the abstract talks about the relevance of the review to the questions being asked, however, this point is not mentioned in the text;
   c. in the abstract the authors provide a list of other types of information needed to make recommendations and it would help the reader if they always maintain the same ordering as in other papers -- factors that may modify effectiveness in specific settings, need (prevalence and baseline risk or status), availability of resources, costs, and values -- and as elsewhere in the text (e.g., pages 5 and 7);
   d. in the first paragraph of the text (on page 4) the authors use the words summary, synthesis, and reviews in ways that suggest they are synonyms but in other places in the text the words seem to be used to mean different things;
   e. the second-from-last and last sentences in the background section (on page 4) seem to be making similar points;
   f. on page 5 be WHO committees should be by WHO committees;
   g. on page 6 produce guidelines should likely be produce clinical practice guidelines to make clear what type of guidance is being discussed;
   h. on page 6 the authors should use the new name of NICE;
i. on page 6 the authors may want to re-word the awkward sentence about NICE reviews being available on its website;

j. on page 6 the authors should remove the implication that AHRQ produces guidelines, which as far as I know it no longer does;

k. on page 7 the phrase “and used” could likely be dropped from the first subheading in the Finding section given this domain is not touched on;

l. on page 8 the authors should clarify the difference between study quality and study validity in this context;

m. on page 9 the authors distinguish between guidance about clinical and population interventions whereas in other papers they distinguish among clinical, public health and policy recommendations;

n. on page 9 the authors discuss priority setting but don’t make clear how this relates to the overall focus for their paper and they don’t include seminal work about priority setting for research relevant to managers and policymakers (such as Lomas et al. in The Milbank Quarterly);

o. on page 9 the authors introduce a series of three questions but the questions don’t appear to map onto the paragraphs that follow and the paragraphs that follow often contain information (such as how extensively one searches for studies) that don’t appear related to the focus of the paper;

p. on pages 9-11 the authors have written an extremely long paragraph that could be broken into smaller paragraphs;

q. on page 10 the authors argue that “the interdisciplinary nature of the research [on non-clinical interventions], use of research designs other than randomized trials, and limitations of what and how the research is indexed” whereas they may want to clarify that the challenge lies in where and how the research is indexed and use disciplinary mix as a reason why many databases can be important and the use of designs that are not consistently indexed (unlike trials) as examples to support their point;

r. on page 10 the authors say “public health and areas other than clinical medicine” but they may want to say “public health and other non-clinical areas”;

s. on page 11 the authors say that “half the guidelines were outdated in 5.8 years” and “no more than 90% were still valid after 3.6 years” but the wording “no more” is very awkward because on first reading the two pieces of information seem logically impossible;

t. on page 13 the authors make normative statements but they should clarify that the normative statements are being made by others, not themselves (which is implied by the citation but could be made clearer); and

u. on page 13 the authors may want to clarify that “these should adhere to standards” means “these full reviews should adhere to standards.”

v. on page 14 the authors make a statement about there being broad agreement on the need for reviews to inform recommendations, however, this was a conclusion of another paper in the series and not this one; and

w. on page 17 the authors provide the details of a measurement tool that was designed for clinical practice guidelines but they may want to modify the examples so it is not off-putting for those who develop public health and policy recommendations.

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.