Author’s response to reviews

Title: How should Individual Participant Data (IPD) from publicly funded clinical trials be shared?

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Author’s response to reviews:

We would like to thank the Editor and the three reviewers for their helpful and supportive comments. Responses are provided below and the manuscript has been amended accordingly.

Reviewer #1:

This is a very important paper providing clear and useful guidelines for sharing individual patient data of publicly funded clinical trials. The manuscript is very well written. I would suggest only minor modifications.

Abstract: it would be useful to report the funding source in the abstract

→ This has now been included

Methods: Details of the methods has been published elsewhere and is referenced. However, it would be important for the reader to have a clear summary of how the guidelines were developed. Particularly, what is a ‘focussed literature review’? How was it performed? What was the search strategy used? Did the survey involve only researchers from the UK? Although the participants in the workshop is reported in appendix, it would be useful to report a summary of the number and background of these participants.
We have now included further details in the methods section

Discussion: It would also be useful to discuss whether these guidelines are applicable to all trials publicly funded or that the applicability is limited to the UK funded trials. Further, it seems that patients were not involve in this process and it might be useful to discuss that we need some feedback from patients.

The guidance has been developed primarily for a UK community. However, the main principles are relevant to countries outside the UK but country specific adaptations may be required to accommodate relevant legislation (e.g. data protection). This has been added to the ‘discussion’ section of the paper.

We agree that patient involvement on issues regarding sharing IPD from clinical trials is important but this was beyond the scope of the current project which focussed very much on the practicalities of sharing data from a clinical trial organisation’s perspective.

Reviewer #2:

This is a very relevant and timely guideline that is needed to further increase the transparency and usefulness of clinical trials data. The overview is concise and the supplementary guideline document very detailed and informative. I have a few suggestions to increase the clarity of the manuscript (comments are in order of appearance in the text and not in order of importance):

1. page 3 (Background, line 16): The authors state that the summary result should be “fully reported and published in medical journals” - this statement could be understood that publishing in journals is the only way of making the results transparent - the importance of results registration should be also clearly emphasized.

We agree completely and have added this to the background.

Methods section is not comprehensive and there is not enough reference to already published work (ref. 23?). This section just lists the steps in the guideline generation, but this is not enough detail to justify the rigor of the methodological approach. There is a general reference to the full supplementary document, but this is not enough to clarify the validity of the individual steps. The authors may think about a graphical presentation of the individual steps in the generation of the guideline.

Reviewer 1 also highlighted this issue. We have addressed this concern by including further detail to the methods section.

Reviewer #3:

The authors report developing guidance on how individual participant data (IPD) should be shared from publicly funded clinical trials. The authors report a classic series of methods to
achieve their guidance: examination of the literature to ascertain 'what's out there' (phase 1); a web based survey of UK registered clinical trial units (phase 2); and a 1-day meeting in London in November 2014 (phase 3).

I enjoyed reading the paper. The question posed by the authors is important, particularly in light of the global effort to ramp up data sharing. While I appreciate the paper is about 'how' to share data, I wonder whether the authors should add a few sentences as to 'why' data share, in their introduction? A nice recent example could be the paroxetine papers published in the BMJ (Le Noury et al. BMJ 2015;351:h4320).

Similarly, would mentioning something about reproducibility be worth including in the introduction? It is the source of much dialogue, for example, the recent paper by the Open Science Forum (Open Science Collaboration. Psychology. Estimating the reproducibility of psychological science. Science 2015; 28; 349: aac4716).

→ The manuscript does include a few sentences as to ‘why’ share data in the background section. However, we have now included a further sentence and refer to the recent paroxetine example suggested by the reviewer.

I was glad to read that academia and the pharmaceutical industry were both involved.

→ We agree that this is critical and is a strength of the approach we have taken.

I found the paper more silent on issues pertaining to implementation. It is very nice to read that some important organizations have endorsed the guidance. However, like everything else in life, won't there be some barriers to implementing the guidance at local clinical trial centres? Do the authors have any guidance for minimizing the barriers to implementation and notions of what might facilitate such implementation? I think a section on this issue would be helpful to readers wanting to implement the guidance.

→ This is an important point. Since submitting the paper for publication we have established a “UK Clinical Research Collaboration (UKCRC) Data sharing task and finish group” which aims to help every UKCRC registered CTU implement, or develop a plan for implementation of good practices for sharing data from clinical trials by the end of 2016. This is a critical component of this project and we will report on our experiences in due course. We have added a paragraph to the discussion section.

Although SPIRIT is mentioned in box 2, do the authors think the SPIRIT group should update their guidance to accommodate their guidance for data sharing? Is this an implementation issue?

→ We thank the reviewer for this positive suggestion. We have taken this forward and will discuss with the SPIRIT guidance developers.

Similarly, while SPIRIT is likely relevant to consider - getting the trial organized for data sharing as it is being planned, does the present guidance have any implication for CONSORT? Should this be mentioned in this paper?
Again, this is a very useful suggestion which we have included in the discussion section. We will also take this forward and discuss with the CONSORT development group.

-------------------Editorial Requests-------------------

Keywords: Please include 3-10 keywords at the end of the Abstract

Keywords have been included

Availability of supporting data:

BioMed Central strongly encourages all data sets on which the conclusions of the paper rely be either deposited in publicly available repositories (where available and appropriate) or presented in the main papers or additional supporting files, in machine-readable format whenever possible. Authors must include an Availability of Data and Materials section in their article detailing where the data supporting their findings can be found.

This has now been included

Authors Contributions:

Your 'Authors Contributions' section must detail the individual contribution for each individual author listed on your manuscript.

This has now been included

Acknowledgements section: Please also include the source(s) of funding for each author, and for the manuscript preparation. Authors must describe the role of the funding body, if any, in design, in the collection, analysis, and interpretation of data; in the writing of the manuscript; and in the decision to submit the manuscript for publication. Further information can be found here:http://www.biomedcentral.com/bmcmed/authors/instructions/guideline#formatting-acknowledgements

This has now been included