Author’s response to reviews

Title: The Systematic Review Data Repository (SRDR): Descriptive characteristics of publicly available data and opportunities for research

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RESPONSES TO COMMENTS FROM REVIEWER #1

I have performed a statistical review of the manuscript "The Systematic Review Data Repository (SRDR): Descriptive characteristics of publicly available data and opportunities for research." The authors provide an interesting description of SRDR, a repository designed for Systematic Review Data.

Despite being an experienced systematic reviewer myself, I was not aware of this valuable resource. Appendix 1 with the listings of clinical areas publicly available data is available for is particularly useful for systematic reviews and also those looking for other research or teaching datasets, datasets on a specific topic, systematic reviewers etc. Hopefully publication of this manuscript should help with raising awareness of this resource and promoting its' use among systematic reviewers.
I have just a few minor comments on the manuscript.

Response – Thank you for all your thoughtful comments.

General comment: I suggest it should be made clearer earlier in the manuscript (e.g. within the introduction section) that the authors are the management team. I know that the authors declare this within the conflict of interest section but for me, this is a key feature of this manuscript, rather than a point for the discussion.
Response – We have added to the Introduction section text that clarifies that we are the management team of SRDR.

Page 6: I was a little confused about the first paragraph under the heading "Information extracted about projects with publicly-available data" and how this fits into 'Methods.'

I suggest this information should be within the introduction as this is a general detail about the repository rather than a specific method of the descriptive study described in this manuscript.

Response – We have moved this text to the Introduction section.

General comment: The authors have found that 132 out of 536 projects have publicly available (25%) and the characteristics of these publicly available data are the focus of this manuscript. I agree that these data are certainly the most useful to other researchers and should be the focus but I am also intrigued by the 75% of projects without publicly available datasets. For completeness and also for something of a comparison, could the authors provide a brief summary of these projects? Not the same level of detail as the publicly available data of course, perhaps just some details on the clinical areas, any known reasons for data not being made publicly available etc.

Response – We have added a summary of the clinical areas of the projects without publicly-available data. We do not collect reasons for data not being made publicly available.

Results (first paragraph): I am a little confused by some of the terminology and exactly what is being referred to. Could the authors provide definitions of a 'project,' a 'session' and a 'page' in the context of SRDR?

Response – We have provided definitions for each of these terms in the first paragraph of the Methods section.

I didn't understand the sentence "Of note, when more than one project pertained to the same systematic review, we counted them as separate projects" on page 8 but I think that an explicit definition of exactly what a 'project' is would clarify this.

Response – Yes, the newly-added definition of a project (first paragraph of the Methods) should clarify this.

General comment: The author's observations regarding the comparison between characteristics of AHRQ-funded and non-AHRQ-funded projects are interesting, particularly regarding the proportions of non-AHRQ-funded projects which are Cochrane Reviews. I suspect that this may reflect the geographical location of Cochrane Groups. For example, the Cochrane Eyes and Vision Group mentioned is based in the UK and National Institute for Health Research (NIHR) funded, as most of the UK based Cochrane Groups are - in other words, a public funder, but not AHRQ who are US based. So in a sense, location is acting as a 'confounder' here in the relationship between AHRQ funding and reviews being conducted as Cochrane Reviews.
Perhaps the authors would consider adding a sentence or two regarding the geographic location of the Cochrane Groups within this section for context.

Response – We have added the locations of the Cochrane Groups to this section.

RESPONSE TO COMMENT FROM SENIOR EDITOR

It would be of interest to know the time from registration to making the data publicly available and whether this is dependent on the results. Is this possible to do?

Response – We have added information about the median (and interquartile range) for the time from project initiation in SRDR to public availability of data, for projects that have publicly-available data that were manually entered (i.e., those that used SRDR to its fullest extent). For the remaining projects with data available publicly, i.e., projects that imported or uploaded their data, the projects were created in the same month or just before publication, so the time to public availability is not relevant.

We do not track the direction, magnitude, or statistical significance of results of the systematic review in SRDR; analyses of results (including meta-analysis and qualitative synthesis of the results) are conducted by systematic review teams outside of SRDR. With that being said, we have now discussed this point briefly in the Discussion section and cited a recent study by other investigators that demonstrated that statistical significance of results is not associated with time to-publication (for non-Cochrane systematic reviews).