Reviewer’s report

Title: Stakeholder involvement in systematic reviews: a protocol for a systematic review of methods, outcomes and effects

Version: 1 Date: 11 Mar 2017

Reviewer: Gordon Guyatt

Reviewer's report:

Pollock and colleagues have outlined a protocol for a scoping review of stakeholder involvement in systematic reviews, followed by a synthesis of methods of involvement and a synthesis of evaluation studies of involvement. The authors further outline that they will integrate the two syntheses by describing agreement and dissonance between studies that demonstrated a beneficial effect and had a comprehensive description of stakeholder involvement methods. This is a timely and useful study that aims to document existing practices and impact and use this information to produce guidance on how to involve stakeholders in systematic reviews.

Specific comments

1) Regarding your consideration of databases: "Redundancy of individual databases will be considered in relation to the number of unique citations identified." It is understandable to limit hand searches to useful sources, but for databases why not run the searches and remove duplicates via reference management software?

2) In the authors' definition of a stakeholder (e.g. primary job is not related to research), it may be worthwhile to consider that someone who works in research should be able to comment about their lived experience as a carer, patient, or policy maker. This could be accomplished by stating that their primary job is not related to research, or their role in the systematic review is related to some non-employment role.

3) The authors mention that "Systematic reviews focused on synthesizing evidence relating to stakeholder involvement in primary research" are excluded, though it is unclear why primary studies exploring issues in stakeholder involvement in primary research would be eligible.

4) For Synthesis B, what kind of outcomes are considered regarding the "quality," "relevance," and "impact" of the systematic review? It would be useful to include some examples.

5) Synthesis B seems to fit in to a standard assessment of interventions (this seems clear when the authors use GRADE to assess the certainty of the bodies of evidence). Given this is the
case, Synthesis B should be framed accordingly. There should be a clear study question (or likely questions) with the "population" (this being, as we understand it, investigators conducting a systematic review), interventions (involvement of stakeholders in the review), comparator (no involvement of stakeholders) and the outcomes clearly specified. The authors should also state whether they contemplate any pooled analysis and if so how they will conduct it. Authors should make clear if they are going to consider involvement of any stakeholder as a similar intervention, or whether they would consider involvement of, for instance, patients versus front-line clinicians as different interventions.

6) With the advent of GRADE the term "quality" has become ambiguous. Traditionally, it has often been used for risk of bias in individual studies. GRADE has used it for the rating of trustworthiness of a body of evidence including considerations of risk of bias, precision, directness, consistency and publication bias. Because of this confusion GRADE has more recently used "certainty" rather than quality. It is probably advisable to use the term "risk of bias" for assessment of individual studies (we presume that is what authors are getting at) rather than quality. In the description of GRADE it should be clear that this is being used to assess the entire body of evidence. The confusion here is particularly evidence in Figure 1 in which the heading "quality appraisal" refers to individual studies, and subsequently under outputs "quality of the evidence" is referred to. The latter, we presume is the GRADE assessment of the quality of evidence, which would be applied to the entire body of evidence for each intervention.

7) Describing the studies that had a beneficial effect and comprehensive description of methods may be limiting in that those same factors could have not worked in other studies. Perhaps it may be worthwhile to consider focusing on commonly recommended methods for involvement, and reporting how many studies that used this method demonstrated beneficial effect, no effect, and negative effect.

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