



# ANZMUSC

Australia & New Zealand Musculoskeletal Clinical Trials Network

## Musculoskeletal Priority Setting Systematic Review update

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# Background

- Arthritis and musculoskeletal conditions are an immense burden on the world's population
- Worldwide, they receive relatively less research focus compared to other less costly, less burdensome health conditions
- Research focus needs to be on the highest priorities
- This requires end users of research (clinicians, patients, others) to be engaged in setting the research agenda

# Objectives

- 1) To systematically synthesise existing priority statements for clinical research for arthritis and musculoskeletal conditions available in the published literature
- 2) To summarise the methods used to generate these priorities

# Selection Criteria

## Study type

Included	Excluded
Studies that make recommendations for research priorities for arthritis and musculoskeletal disorders	Primary research studies, prevalence studies, systematic reviews of individual interventions

## Scope

Included	Excluded
Clinical research priorities for any arthritis or musculoskeletal condition	Pain in general, major trauma

# Search strategy

- Ovid Medline: terms for MSK, research agenda and research priorities (no date or language limit)
- James Lind Alliance top 10 priorities  
(<http://www.jla.nihr.ac.uk/top-10-priorities>)
- Website of the Cochrane Priority Setting Methods Group  
(<http://methods.cochrane.org/prioristyssetting/resoucrs>)
- Cochrane Musculoskeletal and Cochrane Back Groups review priority list
- US National Guidelines Clearinghouse (<http://www.guidelines.gov>) and Guidelines International Network (<http://www.g-i-n.net>) websites using the term 'research priorities'

# Data collection and synthesis

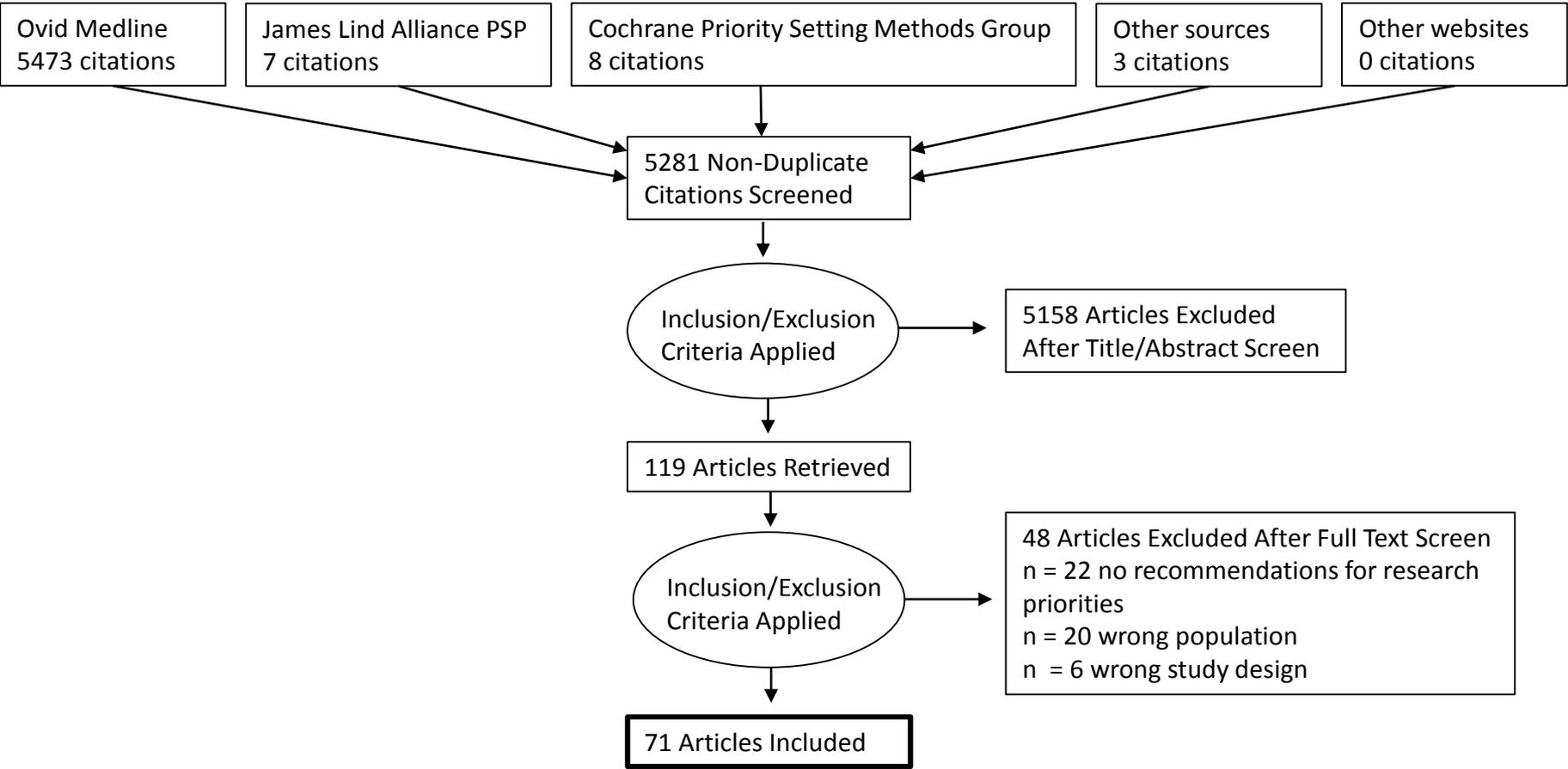
## Study selection: covidence

- Two ANZMUSC members (3<sup>rd</sup> member to resolve conflict)

## Data extraction

- Two authors will extract data using a standard data extraction form
- Extracted will include:
  - Study design
  - Musculoskeletal condition(s)
  - Method of prioritisation
  - Makeup of group (expert panel? consumer involvement?)
  - Method of reaching consensus
  - Conflicts of interest reported
  - Priority topics identified

# Results: PRISMA flow chart for study selection



Study details	Design: <b>Consensus Generating</b> Setting: <b>Cross-discipline conference</b> Timing: <b>May 2005</b>
Musculoskeletal conditions	Which conditions were included: <b>Arthritis</b>
Methods to develop research priorities	Describe approach: <b>Subset of delegates of a priority setting conference in arthritis care were assigned to an electronic discussion group about priorities, followed by presentations and round-table discussion groups at the conference itself</b> Systematic reviews used to identify gaps in research or uncertainties: <b>No</b> Other methods used to identify gaps: <b>None</b> Search strategy reported explicitly: <b>N/A</b> Explicit inclusion and exclusion criteria reported: <b>No</b> Clinical expert panel used: <b>Yes</b> Consumer representation included: <b>Yes</b> External experts used: <b>Unsure</b> Other stakeholders: <b>Unsure</b> Method reported so that it is reproducible: <b>Yes</b>
Factors that underlie the prioritisation of questions	Factors: <b>Identification of outcome measures that are meaningful to consumers</b>
Priority topics identified	<ul style="list-style-type: none"> <li>- <b>evaluation of the processes of care delivery for arthritis (not the actual care); ie this would be analogous to process measures in models of service delivery</b></li> <li>- <b>the consumers ability to navigate the health system</b></li> <li>- <b>development of better measures of participation</b></li> <li>- <b>the need to examine conceptual differences between ‘participation in a life role’ and ‘quality of life’</b></li> <li>- <b>refine and build upon existing client-centered outcome measures, or design new ones that account for patient preferences</b></li> </ul>
Weighting of priorities	<b>Not weighted</b>
Notes	<b>Research priorities integrated with other health service priorities, so somewhat difficult to disentangle the research priorities from other priorities</b>

# Priority setting systematic review working group

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- Rachelle Buchbinder
- Ornella Clavisi
- Sheila Cyril
- Gustavo Duque
- Ian Harris
- Catherine Hill
- Renea Johnston
- Steve Kamper
- Jane Latimer
- Andrew Lawson
- Chris Maher
- Bethan Richards
- Peter Smitham
- Will Taylor
- Sam Whittle