

COMET Newsletter



Save the date

**Wednesday 19th and Thursday 20th
November 2014**

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We are pleased to announce the 4th Meeting of the COMET Initiative

The Pontificia Università Lateranense,
Rome, Italy

More details and registration to follow



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Cochrane UK & Ireland Annual Symposium 2014

We are pleased to announce that we will be running the COMET workshop at the Cochrane UK & Ireland Annual Symposium 2014 in April. For more information visit <http://manchester2014.cochrane.org/>

We look forward to seeing you there!

Plain language summary

The COMET Initiative recognises the expertise and crucial contribution of patients and carers in developing relevant core outcome sets. This plain language summary can be used to help explain what outcome measures are and the problems with using different outcomes in research. It also explains what core outcomes sets are, including how they are developed, and it sets out what the COMET Initiative is trying to achieve. You can download the Summary here:

<http://www.comet-initiative.org/resources/PlainLanguageSummary>

For further information or comments, please contact Heather Bagley, COMET Patient and Public Involvement Coordinator, heather.bagley@liv.ac.uk

Raising awareness of the work of the COMET initiative amongst patients and patient involvement groups

It is important to ensure that organisations promoting patient and public involvement in research and those that provide information to patients about clinical trials are aware of the work of COMET. In recent weeks COMET has been linked with two key organisations, INVOLVE and ECRAN.

INVOLVE is a national advisory group that supports greater public involvement in England through National Health Service, public health and social care research (www.invo.org.uk). It shares knowledge and learning on public involvement in research. INVOLVE have recently established an online resource called invoDIRECT on its main website. This resource provides a searchable map identifying groups and organisations that support patient and public involvement in research. COMET is now listed on this resource: www.invo.org.uk/find-out-more/invodirect

The European Communication on Research Awareness Needs (ECRAN) project aims to make understanding clinical trials - a relevant element of medical research - easy, and tells patients all about taking part in them. On their website they list key projects of relevance to patients. COMET is now listed on their website (which will soon be available in 6 languages): <http://ecranproject.eu/en/content/educational-materials-faqs-glossaries>.



Standardisation of the selection of outcomes and outcome measurement instruments is needed to be able to compare or synthesize data by conducting systematic reviews and/or meta-analyses. To this aim, and funded by the European Commission; award FP7-HEALTH-2012-INNOVATION-1, the COMET project group undertakes different initiatives providing (i) evidence concerning the need for COS; (ii) resources that will allow stakeholders to identify existing COS; (iii) tools to facilitate the development of COS; (iv) guidance in selecting outcome measurement instruments to be included in a COS; (v) tools to appraise the development process of COS; and (vi) protocols for evaluation of impact of COS.

The Core Outcome Measurement Instrument Selection (COMIS) project group, which is a joint initiative between COMET and COSMIN (COnsensus-based Standards for the selection of health Measurement INstruments, www.cosmin.nl), is working on the development of a guideline on outcome measurement instrument selection for outcomes to be included in a COS [2,3]. A Delphi study will be performed among a panel of international experts, representing diverse institutes and organizations, to reach consensus on the methods for selecting outcome measurement instruments for outcomes to be included in a COS. Informed by a systematic review to identify potentially relevant tasks on instrument selection, a Delphi questionnaire was developed.

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A Delphi study to achieve consensus on how to select outcome measurement instruments for outcomes included in a 'Core Outcome Set'

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The actual Delphi study takes place via an online questionnaire survey and proceeds in a series of rounds, interspersed by controlled feedback. The Delphi questionnaire was recently sent to a panel of experts, representing diverse institutes and organizations. Panelists were asked to rate the importance of different proposed tasks in the selection of outcome measurement instruments. They were encouraged to criticize the draft items, to provide arguments for their choices, including citing relevant literature, and to add other relevant tasks. Subsequently, panelists were asked for their opinion on whether the methods for selecting outcome measurement instruments for a COS are similar to the methods for selecting outcome measurement instruments for individual clinical trials. Herewith, we will be able to determine whether the guideline can also be used by trialists or other researchers interested in instrument selection. All responses will be anonymized, aggregated and fed back to panelists in the second round. Panelists will be asked to review their initial response in view of the groups' response and they will have the opportunity to change their initial score. The results of the second round will then be analysed for consensus. All tasks that at least 70% of the panelists have considered 'highly recommended' will be included in the guideline. All tasks that at least 50% of the panelists considered 'not relevant', will be excluded from the guideline. Tasks that are indeterminate will be taken to a third round. For tasks that come back as contentious even after round three, the COMIS Steering Committee (CP, SV, MR and CT) will make the final decision. It is anticipated that results will become available in the second half of 2014.

The development of the guideline on outcome measurement instrument selection will be informed not only by input from the Delphi study, but also by a variety of additional specific guidelines and tools that are being developed, such as (i) a guideline on how to find all measurement instruments that measure a specific core outcome; (ii) a guideline to identify the essential information that should be gathered for each measurement instrument identified, including characteristics of the instrument and information on validity and reliability; (iii) a database of available systematic reviews of measurement instruments; and (iv) a guideline on how to perform systematic reviews of measurement instruments. Ultimately, using COS will improve the conducting and reporting of clinical trials, and enhance the value of evidence synthesis by reducing heterogeneity between trials.

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