Public Comment Received on the Draft OHAT Approach – February 2013

Received on the On-line Submission Form
- The NTP invites you to comment on the Draft OHAT Approach for Systematic Review and Evidence Integration for Literature-Based Health Assessments – February 2013 in the form below

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Responses
1. This is a comment regarding "Step 4: Assessing the quality of individual studies", specifically about the confounding domain in the risk of bias assessment. In its chapter on non-randomised studies, which I believe is the most pertinent to the NTP/OHAT protocol, the Cochrane Collaboration Handbook on Systematic review recommends: "At the stage of writing the protocol, list potential confounding factors." (Higgins et al. 2008 section 13.5.2.2) Detail on potential confounding factors in the existing BPA or PFC protocols is limited, the only guidance being to ask if they were "accounted for". Given the complexity of addressing confounding, it is reasonable to anticipate increased risk here of reviewers producing uneven assessments of risk of bias in individual studies. Anticipating all possible confounders is unlikely to be worthwhile and the Cochrane Handbook observes that there is no established method for doing this. Nonetheless, the Handbook recommends that: "Listing potential confounding factors should certainly be done 'independently' and, one might argue, 'systematically'. Since guidance here could contribute to more consistent interpretation of the evidence by reviewers, could NTP/OHAT consider including a description of potential confounders in its review protocols? As guidance, the Cochrane Handbook suggests: "Reporting results of assessments of confounders in a Cochrane review may best be achieved by creating additional tables listing the pre-stated confounders as columns, the studies as rows, and indicating whether each study: (i) restricted participant selection so that all groups had the same value for the confounder (e.g. restricting the study to male participants only); (ii) demonstrated balance between groups for the confounder; (iii) matched on the confounder; or (iv) adjusted for the confounder in statistical analyses to quantify the effect size." -- Higgins, Julian P. T.; Green, Sally (2008). Cochrane Handbook for Systematic Reviews of Interventions (Wiley Cochrane Series)