

# Implementation of medical research in clinical practice

Gerd Antes

German Cochrane Centre  
University Medical Centre Freiburg

Workshop on Health Research Strategic Needs in Europe  
Brussels, 13 March 2015

# Contents

- More quality: Initiative by Lancet, NIH, Science and Nature
- Quality in health research: prioritisation, prioritization, transparency
- Tools, processes, structures, events

# Implementation: Transfer of Research into Practice

## Knowledge Translation

Answers to medical questions

- Clinical (randomised / controlled) studies
- Epidemiological (observational -) studies

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- Practicing physicians
- Health authorities, sickness funds, insurances, institutions
- Clinical research
- Patients

Evidence  
production

Evidence  
application

50 %



## Research: increasing value, reducing waste

Published January 8, 2014

### Executive summary

*The Lancet* presents a Series of five papers about research. In the first report Iain Chalmers *et al* discuss how decisions about which research to fund should be based on issues relevant to users of research. Next, John Ioannidis *et al* consider improvements in the appropriateness of research design, methods, and analysis. Rustam Al-Shahi Salman *et al* then turn to issues of efficient research regulation and management. Next, An-Wen Chan *et al* examine the role of fully accessible research information. Finally, Paul Glasziou *et al* discuss the importance of unbiased and usable research reports. These papers set out some of the most pressing issues, recommend how to increase value and reduce waste in biomedical research, and propose metrics for stakeholders to monitor the implementation of these recommendations.

### Comments

#### How should medical science change?

Sabine Kleinert, Richard Horton

Annually (2010)

240 Billion US\$

for life sciences,  
(mostly biomedical)

## Lancet Series (8 Jan 2014, London; on internet) Research: increasing value, reducing waste

- A How should medical science change?
- B Biomedical research: increasing value, reducing waste
  1. How to increase value and reduce waste when research priorities are set
  2. Increasing value and reducing waste in research design, conduct, and analysis
  3. Increasing value and reducing waste in biomedical research regulation and management
  4. Increasing value and reducing waste: addressing **inaccessible research**
  5. Reducing waste from **incomplete or unusable reports** of biomedical research

# Journals unite for reproducibility

**R**eproducibility, rigor, transparency, and independent verification are cornerstones of the scientific method. Of course, just because a result is reproducible does not necessarily make it right, and just because it is not reproducible does not necessarily make it wrong. A transparent and rigorous approach, however, can almost always shine a light on issues of reproducibility. This light ensures that science moves forward, through independent verifications as well as the course corrections that come from refutations and the objective examination of the resulting data.

menters were blind to the conduct of the experiment, how the sample size was determined, and what criteria were used to include or exclude any data. Journals should recommend the deposition of data in public repositories where available and link data bidirectionally to the published paper. Journals should strongly encourage, as appropriate, that all materials used in the experiment be shared with those who wish to replicate the experiment. Once a journal publishes a paper, it assumes the obligation to consider publication of a refutation of that paper, subject to its usual standards of quality.

The more open-ended por-



Marcia McNutt  
Editor-in-Chief  
Science Journals

The gathering was convened by the U.S. National Institutes of Health, *Nature*,\* and *Science*.

The discussion ranged from what journals were already doing to address reproducibility and the effectiveness of those measures, to the magnitude of the problem and the cost of solutions. The attendees agreed on a common set of Principles and Guidelines in Reporting Preclinical Research ([www.nih.gov/about/reporting-preclinical-research.htm](http://www.nih.gov/about/reporting-preclinical-research.htm)) that list proposed journal policies



***“...scientific journals are standing together in their conviction that reproducibility and transparency are important...”***

strain characteristics, or transgenic animals, etc. For cell lines, one might report the source, authentication, and mycoplasma contamination status. The existence of these guidelines does not obviate the need for replication or independent verification of research results, but should make it easier to perform such replication.

Some of the journals at the meeting already had implemented all or most of these principles and guidelines. But the important point is that a

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## Proposed Principles and Guidelines for Reporting Preclinical Research

The signatories represent journals that publish preclinical biological research – an area of research that encompasses both exploratory studies and hypothesis-testing studies, with many different designs. The reproducibility of these studies is expected to vary. The journals agree to adhere to the following principles with the aim of facilitating the interpretation and repetition of experiments as they have been conducted in the published study. These measures and principles do not obviate the need for replication and reproduction in subsequent investigations to establish the robustness of published results across multiple biological systems.

### 1. Rigorous statistical analysis

A section outlining the journal's policies for statistical analysis should be included in the Information for Authors, and the journal should have a mechanism to check the statistical accuracy of submissions.

### 2. Transparency in reporting

Journals should have no limit or generous limits on the length of

## Background

NIH held a joint workshop in June 2014 with the Nature Publishing Group and Science on the issue of reproducibility and rigor of research findings, with journal editors representing over 30 basic/preclinical science journals in which NIH-funded investigators have most often published. The workshop focused on the common opportunities in the scientific publishing arena to enhance rigor and further support research that is reproducible, robust, and transparent.

The journal editors at that workshop came to consensus on a set of principles to facilitate these goals, which a number of journals have agreed to endorse. These principles and the journals that have agreed to endorse them are shown below.

## Related Links

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Volume 384, No. 9961, p2176–2177, 20 December 2014

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Comment

## Further emphasis on research in context

Sabine Kleinert, Laura Benham, David Collingridge, William Summe

### Panel: Research in context

#### Evidence before this study

This section should include a description of all the evidence that the authors considered before undertaking this study. Authors should state: the sources (databases, journal or book reference lists, etc) searched; the criteria used to include or exclude studies (including the exact start and end dates of the search), which should not be limited to English language publications; the search terms used; the quality (risk of bias) of that evidence; and the pooled estimate derived from meta-analysis of the evidence, if appropriate.

#### Added value of this study

Authors should describe here how their findings add value to the existing evidence (including an updated meta-analysis, if appropriate).

#### Implications of all the available evidence

Authors should state the implications for practice or policy and future research of their study combined with existing evidence.

findings? How can we improve the accessibility and usability of research findings, and data availability? And, finally, how can we further raise awareness and continue discussions on the topic of research productivity?

As a first step, we are strengthening our requirement to put research into context. Knowing and rigorously assessing the context and value of research will help editors make decisions about whether to publish a paper, and will help readers to interpret the importance of published research in addressing unanswered questions and building an evidence base. From Jan 1, 2015, all research papers, apart from systematic reviews and meta-analyses, submitted to any journal in *The Lancet* family must include a Research in context panel with an enhanced structure and subheadings (panel). Editors will use this information at the first assessment stage and



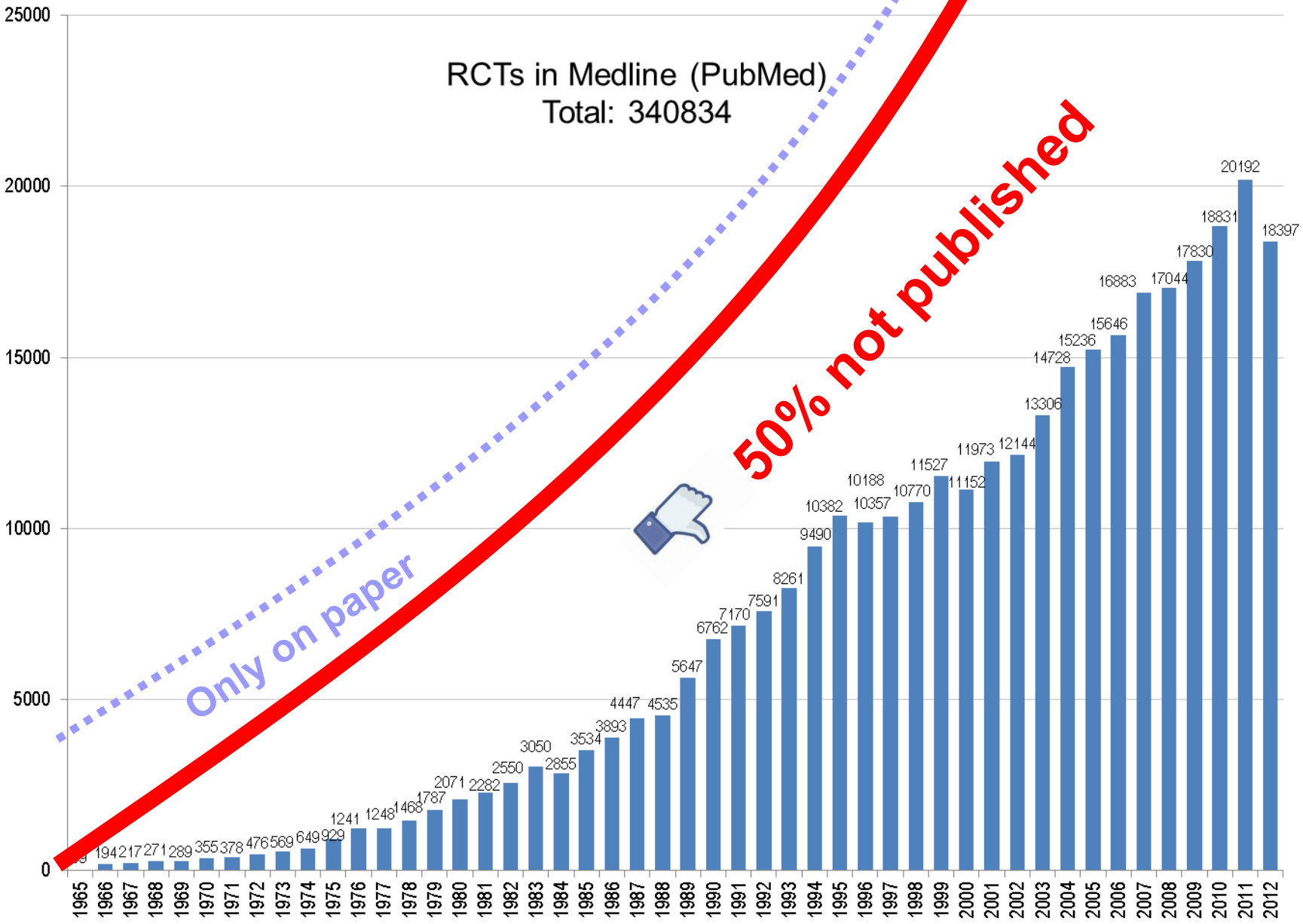
## Implementation of Medical Research in Clinical Practice



## Impact?

- Generally poor
- Very country, system and culture dependent
- Slow progress with relevant indicators, e. g. proportion of registered and published trials
- Ongoing hidden agendas, open or hidden resistance

RCTs in Medline (PubMed)  
Total: 340834

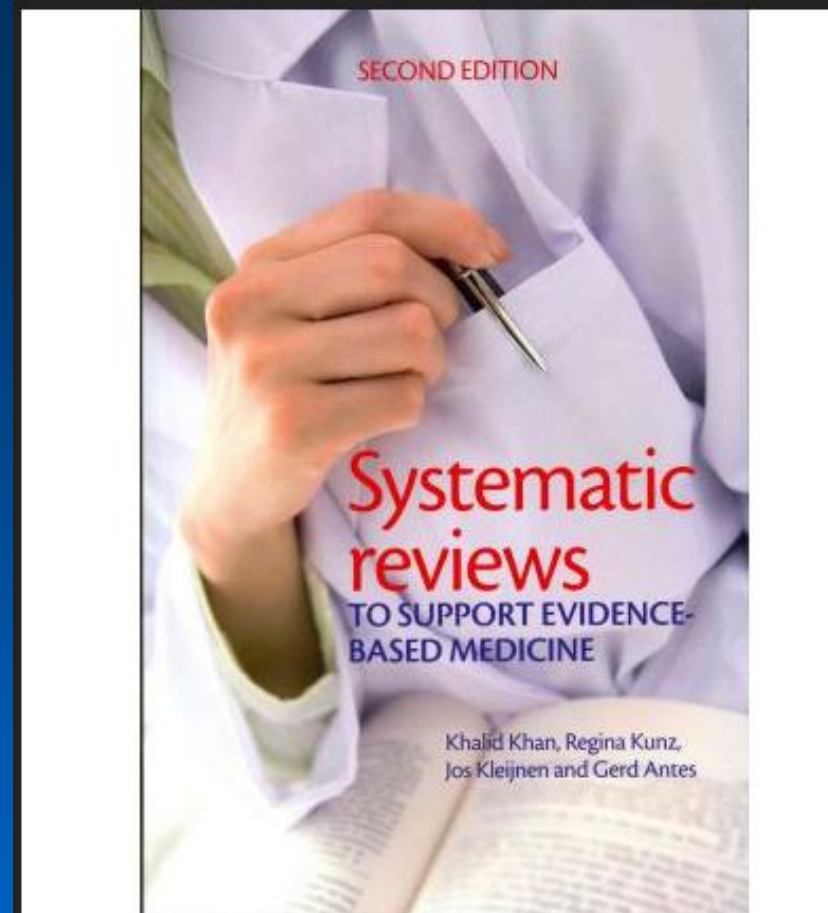


Only on paper

50% not published



1. Formulating the question
2. Systematic search for relevant trials
3. Critical appraisal of trials - inclusion
4. Summary and quantitative synthesis (if possible)
5. Interpretation of results



*July 2011*

**UPDATING!!**



# INSTITUTE OF MEDICINE OF THE NATIONAL ACADEMIES

ABOUT THE IOM

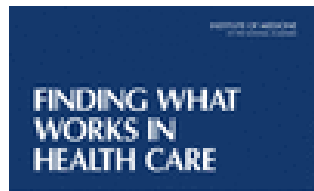
REPORTS

ACTIVITIES

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## Report

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## Finding What Works in Health Care: Standards for Systematic Reviews

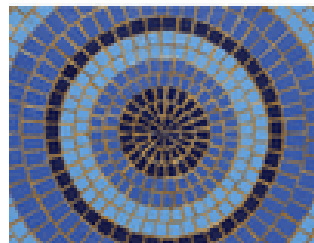
Released: March 23, 2011

Type: Consensus Report

Topics: Biomedical and Health Research, Public Health, Quality and Patient Safety

Activity: Standards for Systematic Reviews of Comparative Effectiveness Research

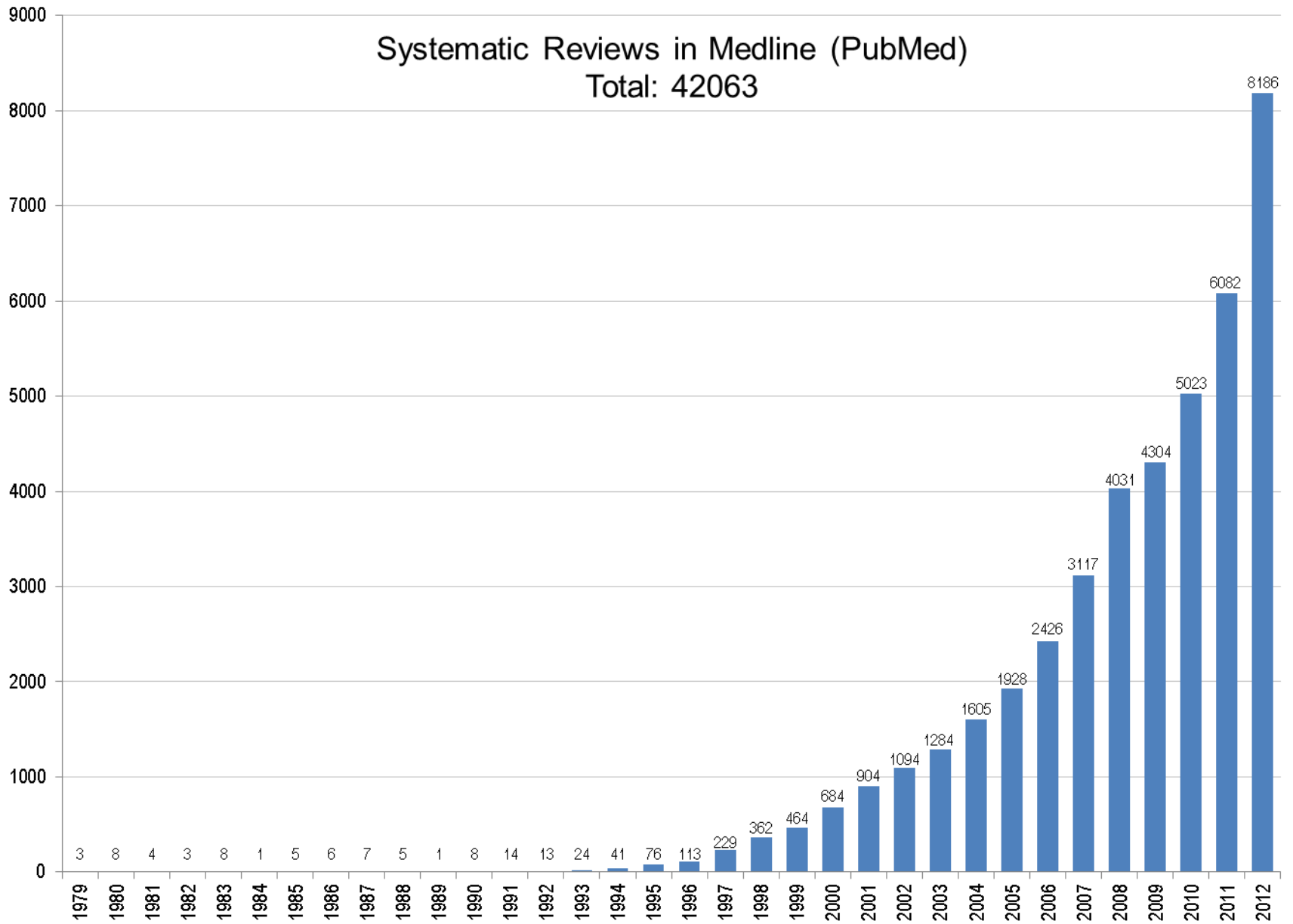
Board: Board on Health Care Services



**„Studies and trials must be considered in context “**

# Systematic Reviews in Medline (PubMed)

Total: 42063



# Deficites - Who is guilty?

## The axis of evil

- Industry
- Researchers and scientists
- Universities and faculties
- Ethics boards
- Doctors
- Journals and publishers
- Funders
- Regulators
- HTA agencies, guidelines groups etc.
- WHO
- Parliaments and governments

**Discovery/Basic Science**

**Preclinical development**

**Animal Studies**

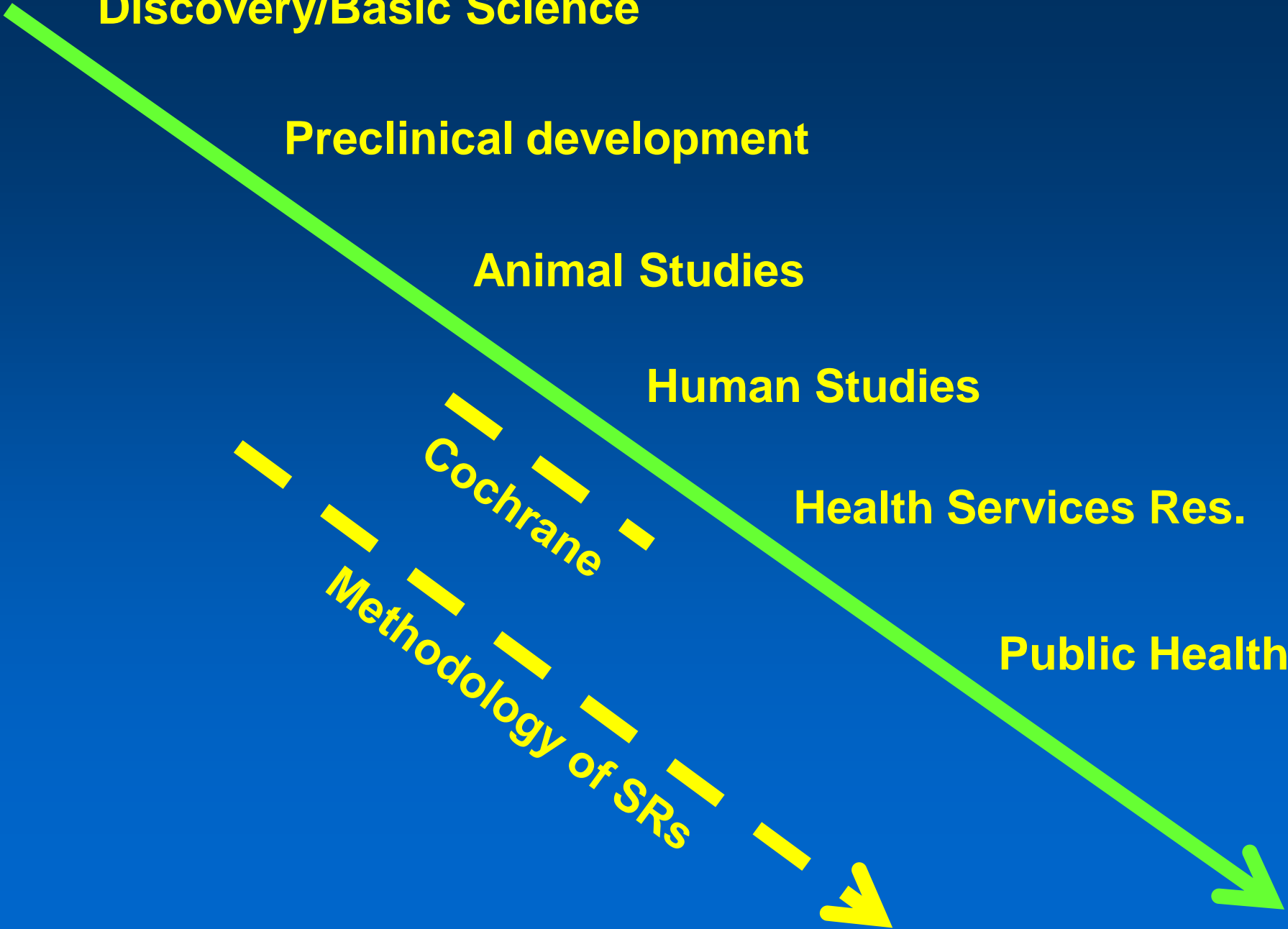
**Human Studies**

**Health Services Res.**

**Public Health**

**Cochrane**

**Methodology of SRs**





**Allies and events on the path to better quality**



[Home](#) > [Research Waste/EQUATOR Conference](#)

# Research Waste/EQUATOR Conference

Posted on [November 21, 2014](#) by [admin](#) — [No Comments](#) ↓

**The 2015 Research Waste / EQUATOR Conference will be held in Edinburgh, UK**

**Dates:** 28-30 September 2015

**Venue:** John McIntyre Conference Centre, Edinburgh, UK

([www.edinburghfirst.co.uk/venues/john-mcintyre-conference-centre](http://www.edinburghfirst.co.uk/venues/john-mcintyre-conference-centre))

**Local organising committee:** Judi Clarke, Rustam Al-Shahi Salman, Malcolm Macleod

**Programme committee:** EQUATOR (Doug Altman, Philippe Ravaud, David Moher, Ana Marusic, Iveta Simera), WASTE (Paul Glasziou, Iain Chalmers, Rustam Al-Shahi Salman, Malcolm Macleod, John Ioannidis, An-Wen Chan)

## Conference aims

- (1) Review the progress made by research regulators, academic institutions, researchers, funders, and publishers against Research Waste series recommendations
- (2) Presentations and posters on problems and potential solutions aimed at making research production more efficient and better reported
- (3) Develop a consensus statement and action plan for making progress against Research Waste series recommendations

## Recent Posts

- [Rigour mortis: How bad research is killing science](#)
- [The Need for Randomisation in Animal Trials](#)
- [Waste in medical academia must be addressed, Chalmers urges in The BMJ Awards acceptance speech](#)
- [Reducing waste in preclinical research through better mouse studies](#)
- [Videos from symposium on the Lancet series online](#)



## The resource centre for good reporting of health research studies



### Library for health research reporting

The Library contains a comprehensive searchable database of reporting guidelines and also links to other resources relevant to research reporting.



[Search for reporting  
guidelines](#)



[Visit the library for  
more resources](#)



### Key reporting guidelines

<a href="#">CONSORT</a>	<a href="#">Full Record</a>   <a href="#">Checklist</a>   <a href="#">Flow Diagram</a>
<a href="#">STROBE</a>	<a href="#">Full Record</a>   <a href="#">Checklist</a>
<a href="#">PRISMA</a>	<a href="#">Full Record</a>   <a href="#">Checklist</a>   <a href="#">Flow Diagram</a>
<a href="#">STARD</a>	<a href="#">Full Record</a>   <a href="#">Checklist</a>   <a href="#">Flow Diagram</a>
<a href="#">COREQ</a>	<a href="#">Full Record</a>
<a href="#">ENTREQ</a>	<a href="#">Full Record</a>
<a href="#">SQUIRE</a>	<a href="#">Full Record</a>   <a href="#">Checklist</a>
<a href="#">CARE</a>	<a href="#">Full Record</a>   <a href="#">Checklist</a>
<a href="#">SAMPL</a>	<a href="#">Full Record</a>
<a href="#">SPIRIT</a>	<a href="#">Full Record</a>   <a href="#">Checklist</a>



### Toolkits

The EQUATOR Network works to improve the reliability and value of medical research literature by

### EQUATOR highlights

**[13/08/2014 - Videos now available from the scientific meeting in Paris: Improving reporting to decrease the waste of research](#)**

### News

**[Journals and industry collaborate on new authorship framework to improve transparency of industry-sponsored research](#)**  
12/11/2014

## Comment

# A new network to promote evidence-based research

Iain Chalmers , Magne Nylenna

Altmeteric

0

DOI: [http://dx.doi.org/10.1016/S0140-6736\(14\)62252-2](http://dx.doi.org/10.1016/S0140-6736(14)62252-2)

 [Article Info](#)

Summary

Full Text

Tables and Figures

References

To embark on research without reviewing systematically evidence of what is already known, particularly when the research involves people or animals, is unethical, unscientific, and wasteful.<sup>1,2</sup>

More than two decades have passed since Antman and colleagues<sup>3</sup> showed that research on some treatments for myocardial infarction had gone on for as long as a decade after benefit or harm had been established in earlier research. Failure to analyse epidemiological research cumulatively has also had devastating effects.

Among research regulators, the guidance for researchers issued by the Health Research Authority in the UK now states "Any project should build on a review of current knowledge. Replication to check the validity of previous research is justified, but unnecessary duplication is unethical."<sup>9</sup>

Research on research has exposed a general failure to refer to existing evidence when reporting additional primary research.<sup>7</sup> Other research has shown that this

Essay

# Progress in Using Systematic Reviews of Animal Studies to Improve Translational Research

C. R. Hooijmans\*, M. Ritskes-Hoitinga

Radboud University Nijmegen Medical Centre, SYRCLE at Central Animal Laboratory, Nijmegen, The Netherlands

July 2013

Collaborative Approach to Meta Analysis and

• C • A • M • A • R • A • D • E • S •

Review of Animal Data from Experimental Studies

Bringing Evidence to Translational Medicine

CAMARADES (Collaborative Approach to Meta-Analysis and Review of Animal Data from Experimental Studies) provides a supporting framework for groups involved in the systematic review and meta-analysis of data from experimental animal studies...



## How **YOU** can promote better research for better healthcare

### Start here:

1. [Why do we need fair tests of treatments?](#)
2. [What are fair tests of treatments?](#)
3. [What can be done to improve tests of treatments?](#)
4. [How can YOU help to improve tests of treatments?](#)

### Caution

This website is NOT about whether particular treatments work or not. For up to date information about SPECIFIC treatments, we recommend:

- [PubMed Health](#) | [TRIP database](#)
- [NHS Choices](#) | [NHS Evidence](#)



[Browse videos, cartoons and more](#)

We are always on the lookout for great interactive resources about fair tests of treatments. [Please tell us](#) if you find any you think we should include.

### What's new?

#### New resources

- [Absolute versus relative risk – making sense of media stories](#)
- [AllTrials: All Trials Registered | All Results Reported \(update, August 2014\)](#)
- [Correlation is not causation. Let's say that again: correlation is not causation!](#)

#### Testing Treatments Twitter

- Researchers: the PRISMA-P statement will improve your systematic reviews! <http://t.co/9xzCDGkJ9o> #systematicreviews 09:28 AM January 06, 2015 from [Twitter for Websites](#)
- RT @pash22: "@MotherJones: When medical apps do more harm than good <http://t.co/g7OCzDeW2x> <http://t.co/NaU3ORz7zR>" 03:47 PM January 05, 2015 from [Twitter Web Client](#)


**Follow @testtreatments** 525 followers

**Quality for patients and healthy citizens**



## Willkommen zu Testing Treatments *interactive*

*Wie können wir wissen, ob eine bestimmte medizinische Therapie wirksamer ist als eine andere?*



*Wie können wir wissen, ob die derzeitige wissenschaftliche Beweislage hinsichtlich des Nutzens und des Schadens einer medizinischen Therapie zuverlässig ist?*

Testing Treatments *interactive* richtet sich an PatientInnen, ÄrztInnen, Personen in Gesundheitsberufen und all jene, die sich für diese Fragen interessieren.

Testing Treatments *interactive* ist die Website zum gleichnamigen Buch mit dem Titel [Testing Treatments](#), das bereits in der zweiten Auflage erschienen ist.

Die deutsche Übersetzung dieser zweiten Auflage ist im Mai 2013 als Buch unter dem Titel "[Wo ist der Beweis?](#)" erschienen.



# WO IST DER BEWEIS?

Plädoyer für eine  
evidenzbasierte Medizin



IMOGEN EVANS, HAZEL THORNTON  
IAIN CHALMERS, PAUL GLASZIOU

News

Neue Ressourcen

Diese Seite teilen

# Transfer of Research into Practice

Knowledge Translation

“Biologization of medical research“

- increasing imbalance of funding against implementation
- Small uptake of evidence, resistance against waste/value debate
- “Freedom“ of science/research

Evidence  
production

50 %

Priorization?

?

Evidence  
application

Healthcare

- regulation, laws, restrictions . . .
- errors in medicine, patient safety, . . .
- empirical research in the healthcare system



# Transfer of Research into Practice

## Clash of different worlds

“Biologization of medical research“

- increasing imbalance of funding against implementation
- Small uptake of or resistance against waste/value debate
- “Freedom“ of science/research

Research System  
Tax-funded

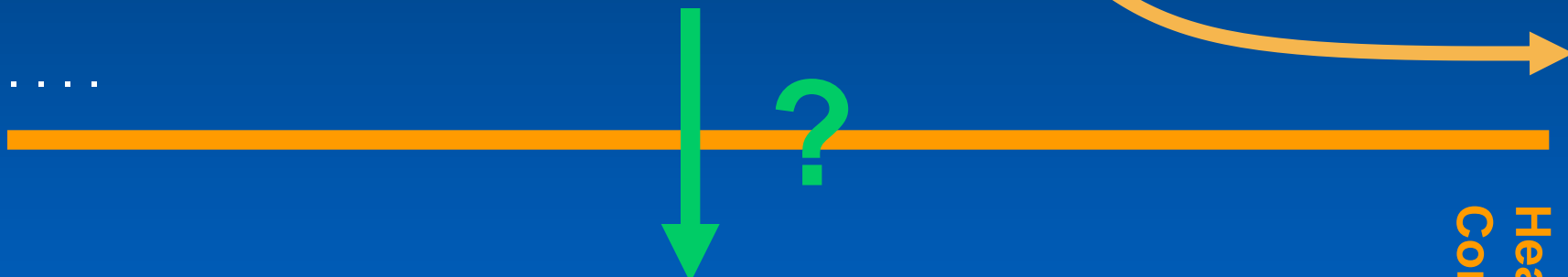
50 %

....

Healthcare

- regulation, laws, restrictions . . .
- errors in medicine, patient safety, . . .
- empirical research in the healthcare system

Healthcare system  
Contribution-funded



## Focus

- Transparency and completeness in reporting research
- Quality of research in general
- “Genuine“ translation
- Harmonization across countries
- The problem is bigger than most people recognize – no simple one-dimensional solutions