INPLASY PROTOCOL

To cite: Gao et al. Emphasis should be placed on identifying and reporting research priorities to increase research value: an empirical analysis. Inplasy protocol 202350083. doi: 10.37766/inplasy2023.5.0083

Received: 23 May 2023

Published: 23 May 2023

Corresponding author: Yutong Fei

feiyt@bucm.edu.cn

Author Affiliation:

Centre for Evidence-Based Chinese Medicine, Beijing University of Chinese Medicine

Support: This work was supported by the Key Research and Development Program of Xinjiang Uygur Autonomous Region [grant numbers: 2021B03006-4].

Review Stage at time of this submission: Preliminary searches.

Conflicts of interest: None declared.

Emphasis should be placed on identifying and reporting research priorities to increase research value: an empirical analysis

Gao, YC¹; Cao, R²; Su, CY³; Liu, ZH⁴; Liu, MJ⁵; Guan, XM⁶; Feng, YT⁷; Fang, R⁸; Deng, YJ⁹; Liu, JC¹⁰; Li, YY¹¹; Fei, YT¹².

Review question / Objective: Not applicable.

Information sources: We searched two English databases (PubMed, Embase) and four Chinese databases (Chinese Biomedical Literature Database, China National Knowledge Infrastructure, Wanfang, and VIP Database for Chinese Technical Periodicals). We also searched the website (https:// www. GRADEpro.org/) and methodological papers published by two co-chairs to find more GRADE CPGs. And we searched nine guideline databases or official websites of authoritative Chinese societies to find more Chinese guidelines.

Main outcome(s): (1) the basic characteristics of the guidelines, such as the type, scope and publication year, whether to report the research priorities, etc.; (2) the relevant information of the research recommendations, including reason, type (e.g., PICO, population, intervention, comparison, and outcome), structure, dimensions related to recommendations of research priorities, etc.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 23 May 2023 and was last updated on 23 May 2023 (registration number INPLASY202350083).

INTRODUCTION

Review question / Objective: Not applicable.

Rationale: In the development of clinical practice guidelines (CPGs), the formation of recommendations requires a comprehensive consideration of the quality of evidence, desirable and undesirable anticipated effects, health equity and other dimensions, Among them, the quality of the evidence was heavily considered as a key determinant of the recommendations, but the reality was that we often cannot retrieve evidence, especially high-qualityevidence. even if we still formulated recommendations based on the current best evidence, but for the research gap, guideline development groups tend to reported research priorities through summary and prioritization, reminding clinicians and researchers of future research focus and direction.

Simultaneous, there exists another contrary situation where there was already high quality evidence that cannot overturn the conclusion, research priorities can also be presented to prevent further research to avoid research waste. Furthermore, some guideline manuals also include research priorities as a form of recommendations. To be more precise, research priorities are not solely evidence gaps or knowledge gaps, but rather proposals for future research based on the current evidence.

The formulation of guidelines requires huge intelligence and financial input, therefore, the methodological requirements for the formulation and reporting of CPGs are extremely important and not to be underestimated, and the guideline development group is also in the most suitable position to determine the research priorities.

Since the 1990s, China has developed a considerable amount of CPGs, and the number has increased rapidly over time. As a statement document that can guide Chinese clinicians in making practice decisions, it plays a crucial and distinct role. As a gold standard in the field of guideline development, the Grading of Recommendations Assessment, Development, and Evaluation (GRADE) approaches often provides a paradigm of high-quality methodology, and its structured and transparent approaches offered valuable guidance for guideline development groups.

Although there were some studies on research gaps, the exploration of the research priorities in the guidelines was still inadequate, especially the systematic analysis of the degree, form and content of the research priorities. This study systematically investigated the GRADE CPGs uesd as representatives of high quality guidelines and Chinese CPGs, and compared the differences between the two to provide reference and guidance for the development and reporting of research priorities in the Chinese CPGs.

Condition being studied: Not applicable.

METHODS

Participant or population: No patient involved.

Intervention: Not applicable.

Comparator: Not applicable.

Study designs to be included: Clinical practice guidelines.

Eligibility criteria: The GRADE CPGs (developed under the guidance of the GRADE working group or its two co-chairs) and the Chinese CPGs (90 randomly selected from all guidelines) that were published from the 1 January 2018 to the 31 December 2022 were included. Older versions and duplicate published CPGs were ineligible.

Information sources: We searched two English databases (PubMed, Embase) and four Chinese databases (Chinese Biomedical Literature Database, China National Knowledge Infrastructure, Wanfang, and VIP Database for Chinese Technical Periodicals). We also searched the website (https://www. GRADEpro.org/) and methodological papers published by two co-chairs to find more GRADE CPGs. And we searched nine guideline databases or official websites of authoritative Chinese societies to find more Chinese guidelines.

Main outcome(s): (1) the basic characteristics of the guidelines, such as the type, scope and publication year, whether to report the research priorities, etc.; (2) the relevant information of the research recommendations, including reason, type (e.g., PICO, population, intervention, comparison, and outcome), structure, dimensions related to recommendations of research priorities,etc.

Quality assessment / Risk of bias analysis: Not applicable.

Strategy of data synthesis: Descriptive statistical analysis and calculating the proportion of each items was used for data analysis.

Subgroup analysis: Not applicable.

Sensitivity analysis: Not applicable.

Language restriction: No.

Country(ies) involved: China.

Keywords: Clinical practice guidelines; Research priorities; Research gap; Report; Research waste.

Contributions of each author:

Author 1 - Yicheng Gao. Email: 20210941071@bucm.edu.cn Author 2 - Rui Cao - Extracting data, Formal analysis, Writing original draft. Email: caorui0706@163.com Author 3 - Chengyuan Su - Extracting data. Formal analysis, Writing original dra. Email: scy19990527@163.com Author 4 - Zhihan Liu - Extracting data, Formal analysis, Writing original draft. Email: liuzhihan262@163.com Author 5 - Meijun Liu - Extracting data, Formal analysis, Writing original draft. Email: 503164360@qq.com Author 6 - Xinmiao Guan - Extracting data, Formal analysis, Writing original draft. Email: xinmiaoguan@163.com Author 7 - Yuting Feng - Extracting data, Formal analysis, Writing original draft. Email: fyt819385438@163.com Author 8 - Rui Fang - Extracting data, Formal analysis, Writing original draft. Email: xjqzyykj@126.com Author 9 - Yingjie Deng - Extracting data, Formal analysis, Writing original draft. Email: 935943371@qq.com Author 10 - Junchang Liu - Extracting data, Formal analysis, Writing original draft.

Email: 625854402@qq.com

Author 11 - Yuanyuan Li - Extracting data, Formal analysis, Writing original draft. Email: lyy_914@163.com Author 12 - Yutong Fei - Conceptualization, Funding acquisition, Investigation, Formal

analysis, Methodology, Writing - review & editing, Project administration. Email: feiyt@bucm.edu.cn