



Effective Health Care

<Title>

Results of Topic Selection Process & Next Steps

The nominator, <name of nominator (acronym)>, is interested in a new evidence review on <topic> to <inform an update of their YYYY clinical practice guideline - or - develop new guidelines – or - develop another product, inform clinical practice, inform future research efforts, answer a question, etc. >

(Topic didn't pass duplication) We identified ## review(s) covering the scope of the nomination, therefore, a new review would be duplicative of an existing product. No further activity on this nomination will be undertaken by the Effective Health Care (EHC) Program.

(Topic didn't pass impact or value) Due to the limited impact/value of a new review on this topic, the program will not develop a review at this time. No further activity on this nomination will be undertaken by the Effective Health Care (EHC) Program.

(Topic didn't pass feasibility) Because no/limited original research addresses the nomination, a new review is not feasible at this time. No further activity on this nomination will be undertaken by the Effective Health Care (EHC) Program.

(Topic meets all criteria but was not funded.) Due to limited program resources, the program is unable to develop a review at this time. No further activity on this nomination will be undertaken by the Effective Health Care (EHC) Program.

(Topic meets all criteria and is funded.) This topic will go forward for refinement as a new systematic review. The scope of this topic, including populations, interventions, comparators, and outcomes, will be further developed in the refinement phase. When key questions have been drafted, they will be posted on the AHRQ Web site and open for public comment. To sign up for notification when this and other Effective Health Care (EHC) Program topics are posted for public comment, please go to <https://effectivehealthcare.ahrq.gov/email-updates>.

Topic Brief

Topic Number and Name: <#0000, Name>

Nomination Date: MM/DD/YYYY

Topic Brief Date: MM/DD/YYYY

Authors

<Author>

<Author>

<Librarian>

Conflict of Interest: None of the investigators have any affiliations or financial involvement that conflicts with the material presented in this report. - or- <description of the conflict of interest>

Background

<Describe the health problem, including a definition, impact of health issue on individuals' quality of life or functionality, and recent controversies related to the topic (if applicable).>

Nominator and Stakeholder Engagement

<include text about changes to scope, engagement of nominator>

Key Questions and PICOs

The key questions for this nomination are:

1. Ask key question 1
2. Ask key question 2

To define the inclusion criteria for the key questions, we specify the population, interventions, comparators, <and> outcomes, <and> timing, <and> setting (PICOTS) of interest (Table 1).

Table 1. Key Questions and PICOTS

Key Questions		
Population		
Interventions		
Comparators		
Outcomes		
Timing		
Setting		

Abbreviations:

Methods

We assessed nomination <#### Title>, for priority for a systematic review or other AHRQ EHC report with a hierarchical process using established selection criteria. Assessment of each criteria determined the need to evaluate the next one. See Appendix A for detailed description of the criteria.

1. Determine the *appropriateness* of the nominated topic for inclusion in the EHC program.
2. Establish the overall *importance* of a potential topic as representing a health or healthcare issue in the United States.
3. Determine the *desirability of new evidence review* by examining whether a new systematic review or other AHRQ product would be duplicative.
4. Assess the *potential impact* a new systematic review or other AHRQ product.
5. Assess whether the *current state of the evidence* allows for a systematic review or other AHRQ product (feasibility).
6. Determine the *potential value* of a new systematic review or other AHRQ product.

Appropriateness and Importance

We assessed the nomination for appropriateness and importance.

Desirability of New Review/Duplication

We searched for high-quality, completed or in-process evidence reviews published in the last three years on the key questions of the nomination. See Appendix B for sources searched.

<Delete if not assessed>Impact of a New Evidence Review

The impact of a new evidence review was qualitatively assessed by analyzing the current standard of care, the existence of potential knowledge gaps, and practice variation. We considered whether it was possible for this review to influence the current state of practice through various dissemination pathways (practice recommendation, clinical guidelines, etc.).

<Delete if not assessed>Feasibility of New Evidence Review

We conducted a literature search in PubMed and PsycInfo from <Month YYYY to Month YYYY>. See Appendix C for the PubMed and PsycInfo search strategy and links to the ClinicalTrials.gov search.

****choose one from below. Describe any additional methods/changes to methods described below****

(Methods A: random sample of 200 articles reviewed) Because a large number of articles were identified, we reviewed a random sample of 200 titles and abstracts for inclusion and classified identified studies by key question and study design, to assess the size and scope of a potential evidence review. We then calculated the projected total number of included studies based on the proportion of studies included from the random sample.

(Methods B: all articles reviewed) We reviewed all identified titles and abstracts for inclusion and classified identified studies by key question and study design to assess the size and scope of a potential evidence review.

(Methods C: adapted/updated from earlier brief) <Look to see if a random sample or all articles were reviewed and fit into one of the above categories>

<Delete if not assessed>Value

We assessed the nomination for value. We considered whether or not the clinical, consumer, or policymaking context had the potential to respond with evidence-based change; and if a partner organization would use this evidence review to influence practice.

Results

See Appendix A for detailed assessments of all EPC selection criteria.

Appropriateness and Importance

This is an appropriate and important topic. <Summary of elements of importance.>

Desirability of New Review/Duplication

A new evidence review would/would not be duplicative of an existing evidence review. <Number of systematic reviews addressing each key question> <Summarize what portions were not duplicative and why> See Table 2, Duplication column.

<Delete if not assessed> Impact of a New Evidence Review

A new systematic review may have <level of impact>. <Is there a knowledge gap or lack of current guidance?>

<Delete if not assessed> Feasibility of a New Evidence Review

A new evidence review <or technical brief if the topic went to prioritization with recommendation for TB> is/is not feasible. <Total studies and estimated size of review> <give rationale if not feasible and mention caveats> See Table 2, Feasibility column.

Table 2. Key Questions and Results for Duplication and Feasibility

Key Question	Duplication (12/2013-12/2018)	Feasibility (12/2013-12/2018)
KQ 1: <briefly state question>	Total number of identified systematic reviews: # [Delete types not used] <ul style="list-style-type: none"> • AHRQ EPC: #(references) • Cochrane: #(references) • VA ESP: #(references) • Other group: #(references) 	Size/scope of review Relevant Studies Identified: # <ul style="list-style-type: none"> • Type: #(references) • Type: #(references) <if random sample> Projected Total: # Clinicaltrials.gov <ul style="list-style-type: none"> • Recruiting: # • Active: # • Complete: #
KQ 2: <briefly state question>	Total number of identified systematic reviews: # Delete types not used] <ul style="list-style-type: none"> • AHRQ EPC: #(references) • Cochrane: #(references) • VA ESP: #(references) • Other group: #(references) 	Size/scope of review Relevant Studies Identified: # <ul style="list-style-type: none"> • Type: #(references) • Type: #(references) <if random sample> Projected Total: # Clinicaltrials.gov <ul style="list-style-type: none"> • Recruiting: #(references) • Active: #(references) • Complete: #(references)

Abbreviations: AHRQ=Agency for Healthcare Research and Quality; KQ=Key Question

<Delete if not assessed> **Value**

The potential for value is <high/limited/unclear>. <rationale>.

Summary of Findings

- Appropriateness and importance: The topic is both appropriate and important.
- Duplication: A new review would/would not be duplicative of an existing product. <# systematic reviews identified, with emphasis on the most recent, most on-point, most comprehensive, and highest quality (ie, Cochrane or AHRQ) reviews with rationale why not duplicative>
- Impact: A new systematic review has <high/limited/unclear impact> potential.
- Feasibility: A new review is feasible. The evidence base is likely <small/medium/large>.
- Value: The potential for value is <high/limited/unclear/other>.

References

<Insert references with hyperlinks to Pubmed abstract for items from the duplication and feasibility criteria>

Appendix A. Selection Criteria Assessment

<Delete portions that were not assessed>

Selection Criteria	Assessment
1. Appropriateness	
1a. Does the nomination represent a health care drug, intervention, device, technology, or health care system/setting available (or soon to be available) in the U.S.?	<Yes/No>
1b. Is the nomination a request for a systematic review?	<Yes/No>
1c. Is the focus on effectiveness or comparative effectiveness?	<Yes/No>
1d. Is the nomination focus supported by a logic model or biologic plausibility? Is it consistent or coherent with what is known about the topic?	<Yes/No>
2. Importance	
2a. Represents a significant disease burden; large proportion of the population	<prevalence, burden of disease, etc>
2b. Is of high public interest; affects health care decision making, outcomes, or costs for a large proportion of the US population or for a vulnerable population	<yes/no, rationale>.
2c. Represents important uncertainty for decision makers	<Yes/No>
2d. Incorporates issues around both clinical benefits and potential clinical harms	<Yes/No>
2e. Represents high costs due to common use, high unit costs, or high associated costs to consumers, to patients, to health care systems, or to payers	<yes/no, rationale>
3. Desirability of a New Evidence Review/Duplication	
3. Would not be redundant (i.e., the proposed topic is not already covered by available or soon-to-be available high-quality systematic review by AHRQ or others)	<yes/no. # of reviews, coverage by KQ, describe portions of nomination not addressed by existing reviews>
4. Impact of a New Evidence Review	
4a. Is the standard of care unclear (guidelines not available or guidelines inconsistent, indicating an information gap that may be addressed by a new evidence review)?	<yes/no, rationale>.
4b. Is there practice variation (guideline inconsistent with current practice, indicating a potential implementation gap and not best addressed by a new evidence review)?	<yes/no, rationale>.
5. Primary Research	
5. Effectively utilizes existing research and knowledge by considering: - Adequacy (type and volume) of research for conducting a systematic review - Newly available evidence (particularly for updates or new technologies)	<i>Size/scope of review: <total # studies, # studies across KQ, estimate of size></i> <i><Describe literature></i> <i>ClinicalTrials.gov.</i>
6. Value	

6a. The proposed topic exists within a clinical, consumer, or policy-making context that is amenable to evidence-based change	<yes/no, rationale>
6b. Identified partner who will use the systematic review to influence practice (such as a guideline or recommendation)	<Yes/no, partner, partner's intended use of SR, potential for influence on practice>

Abbreviations: AHRQ=Agency for Healthcare Research and Quality; KQ=Key Question

Appendix B. Search for Evidence Reviews (Duplication)

Listed below are the sources searched, hierarchically

Primary Search
AHRQ: Evidence reports and technology assessments https://effectivehealthcare.ahrq.gov/ ; https://www.ahrq.gov/research/findings/ta/index.html ; https://www.ahrq.gov/research/findings/evidence-based-reports/search.html
VA Products: PBM, and HSR&D (ESP) publications, and VA/DoD EBCPG Program https://www.hsr.d.research.va.gov/publications/esp/
Cochrane Systematic Reviews http://www.cochranelibrary.com/
HTA (CRD database): Health Technology Assessments http://www.crd.york.ac.uk/crdweb/
PubMed Health http://www.ncbi.nlm.nih.gov/pubmedhealth/
Secondary Search <Delete if not searched>
AHRQ Products in development https://effectivehealthcare.ahrq.gov/
VA Products in development https://www.hsr.d.research.va.gov/publications/esp/
Cochrane Protocols http://www.cochranelibrary.com/
PROSPERO Database (international prospective register of systematic reviews and protocols) http://www.crd.york.ac.uk/prospero/
Tertiary Search <Delete if not searched>
PubMed https://www.ncbi.nlm.nih.gov/pubmed/

Listed below are additional topic-specific sources, searched when appropriate. <Delete the sources not searched>

Psychology or Behavioral Health
PsycINFO http://www.apa.org/pubs/databases/psycinfo/index.aspx
Sociological, Public Health, Education, and Social Determinants of Health
Campbell Collaboration Systematic Review Library http://www.campbellcollaboration.org/
Nursing or Allied Healthcare
CINAHL (Cumulative Index of Nursing and Allied Health) https://www.ebscohost.com/nursing/products/cinahl-databases/cinahl-complete
International Health
WHO (World Health Organization) HEN (Health Evidence Network) http://data.euro.who.int/HEN/Search/HenSearch.aspx

Appendix C. Search Strategy & Results (Feasibility)

<Delete if not assessed>

<Insert search string and search dates>

<clinicaltrials.gov link>