Coordination with the Cochrane Renal Group: Making best use of the Renal Trial Registry

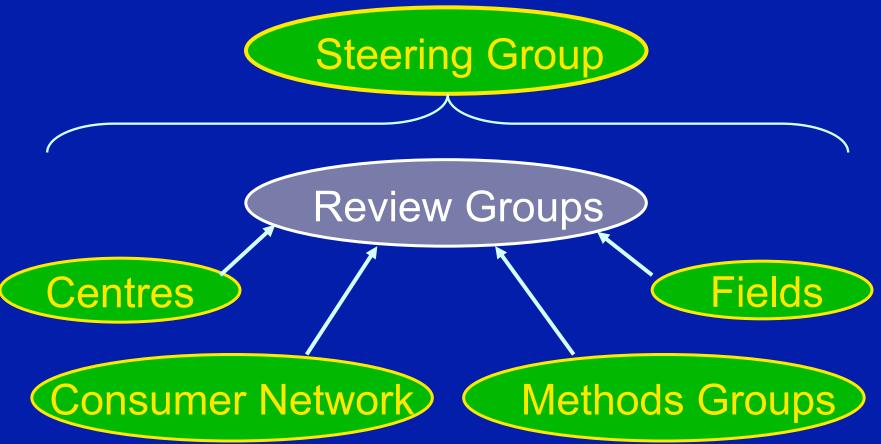
Angela Webster
Editor, Cochrane Renal Group







Cochrane Collaboration



http://www.cochrane.org/index.htm



http://www.cochrane-renal.org/



CRG

- Based in Sydney (since 2000)
- Core work
 - Producing and updating systematic reviews
 - Renal trials registry RCTs
 - Trial registration (prospective)
 - Diagnostic test accuracy studies and reviews
 - Training and support
 - Collaboration

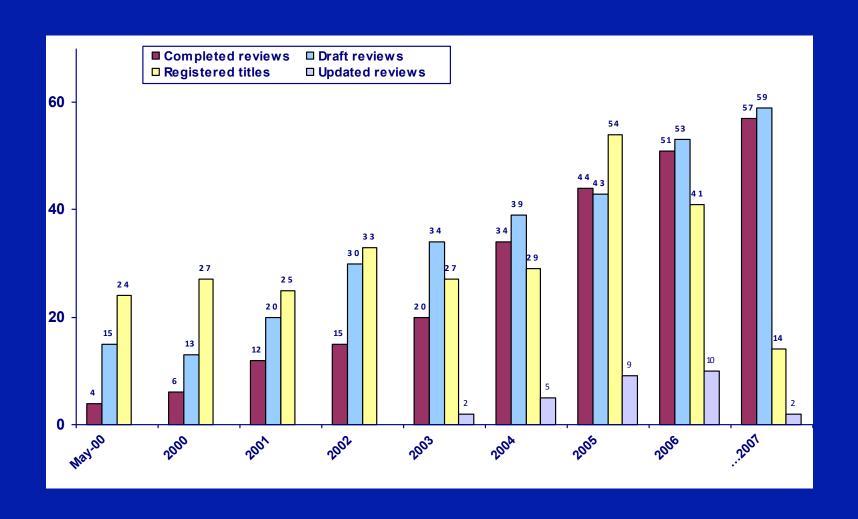


CRG

- Based in Sydney (since 2000)
- Core work
 - Producing and updating systematic reviews
 - All aspects of renal disease
 - Overlap with other review groups endocrine, hypertension, PVD
 - Co-publication in medical journals
 - Renal trials registry
 - Trial registration (prospective)
 - Diagnostic test accuracy studies
 - Training and support

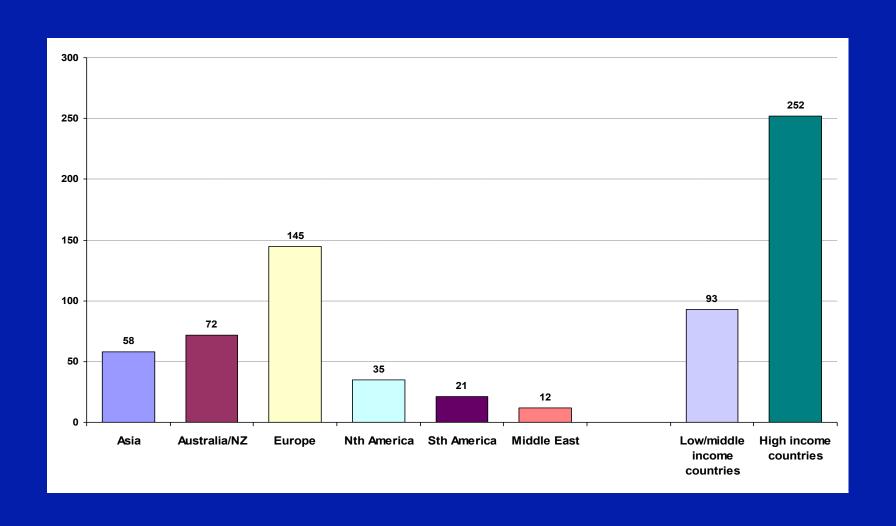


Producing and updating reviews





Review authors



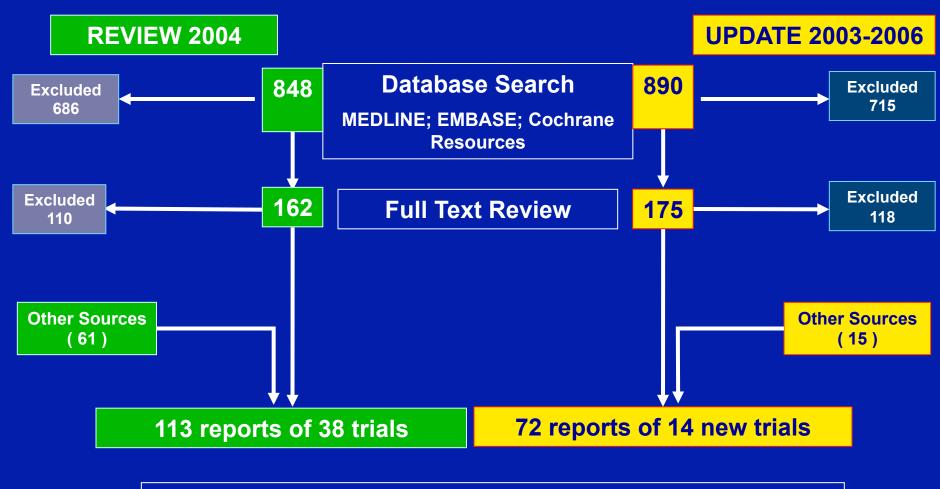


Updating reviews

- Reviews are often out of date after 2-3 years
- Updating is a unique feature of Cochrane reviews
- We 'encourage' our authors to update every 2 years
 - Regular re-runs of search strategy
 - Forwarding copies of new trial reports



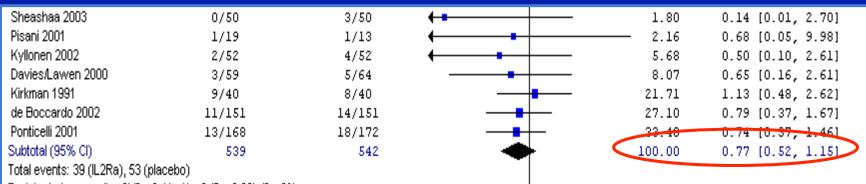
IL2Ra for kidney transplant recipients



Total included: 185 reports of 52 trials (6663 recipients)



Updating makes a difference...

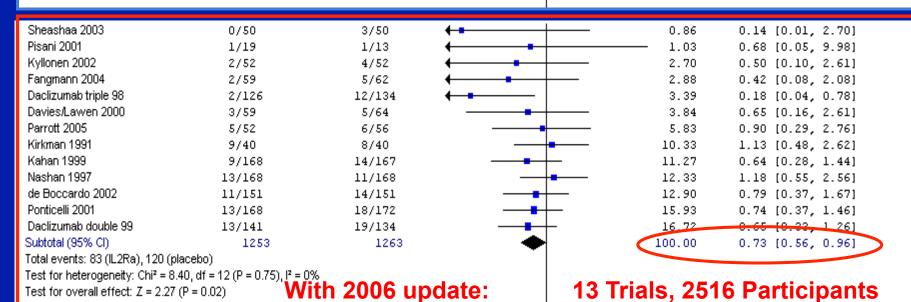


Test for heterogeneity: $Chi^2 = 2.41$, df = 6 (P = 0.88), $I^2 = 0\%$

Test for overall effect: Z = 1.28 (P = 0.20)

Without update:

7 Trials, 1081 Participants



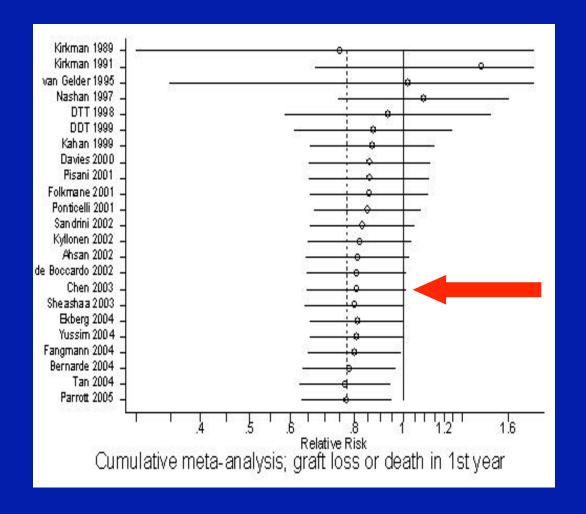
0.1 0.2 0.5 1 2 5 10

Favours IL2Ra Favours placebo



Cumulative meta-analysis

- Evidence of reduction in graft loss since 2003
- 1047 persons have since been randomised



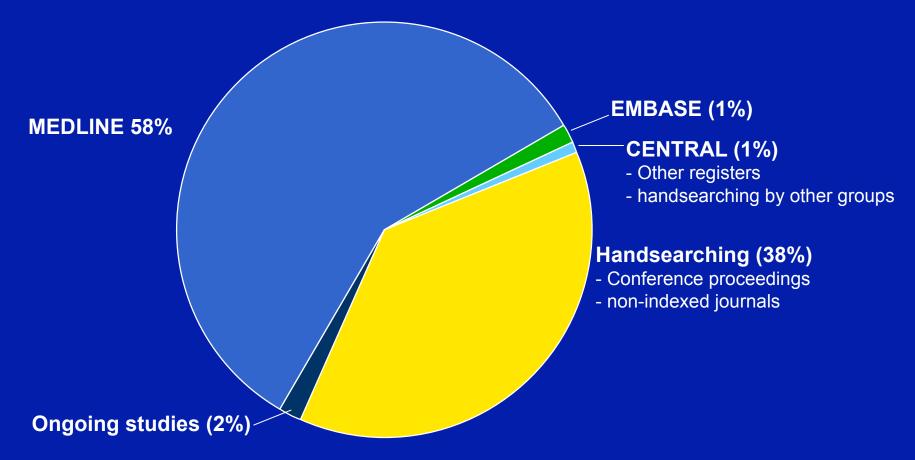


CRG

- Based in Sydney (since 2000)
- Core work
 - Producing and updating systematic reviews
 - Renal trials registry
 - Databases 1970
 - Hand-searching all major conferences 1980
 - Trial registration (prospective)
 - Diagnostic test accuracy studies
 - Training and support

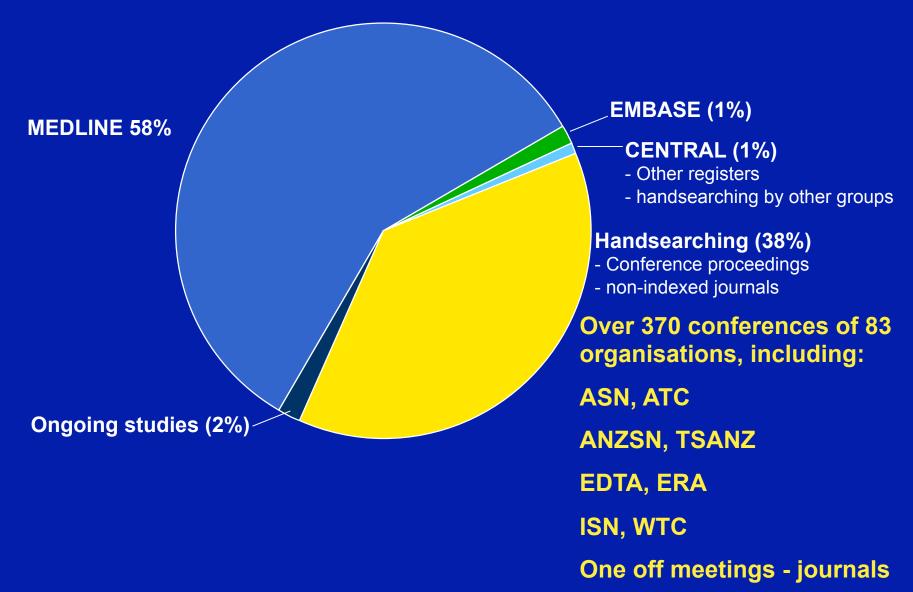


CRG Renal trials register



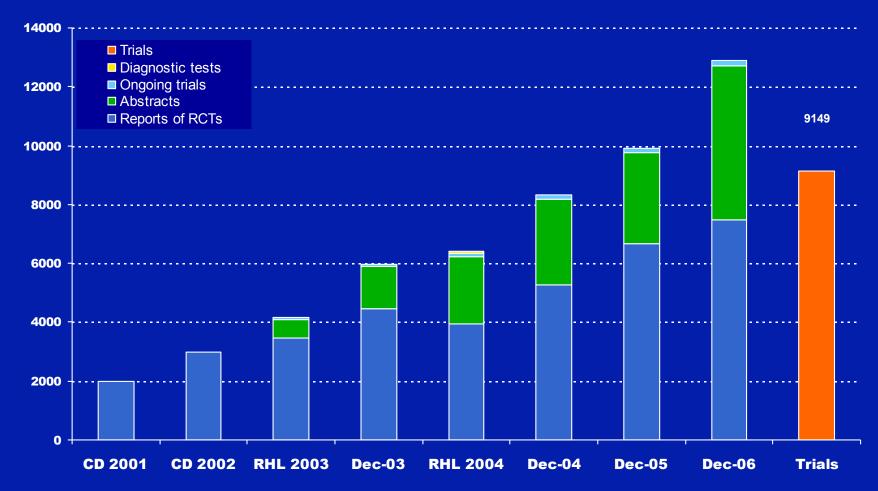


CRG Renal trials register

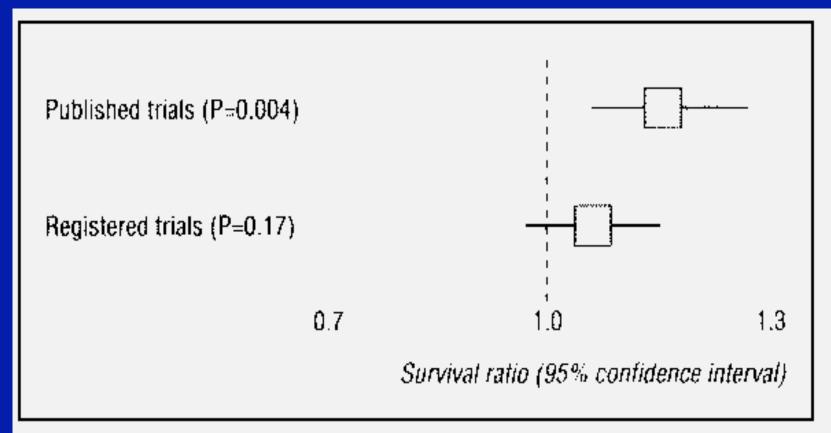




Trials versus reports: a trial based register



Handsearching and publication bias



^{*}Figure 4. Analysis of published clinical trials indicates considerably better survival of patients with advance compared with monotherapy with alkylating agent. Analysis of registered trials failed to confirm this*



Impact of duplicate publication

	Relative ris	Relative risk (95% CI)	
Outcome	Trial based analysis	report based analysis	
Acute rejection 6 months	0.66 (0.59,0.74)	0.65 (0.61, 0.70)	
Graft loss I year	0.84 (0.66, 1.05)	0.69 (0.58, 0.83)	

- IL2 versus placebo/no treatment
 - Falsely increased precision of estimate (acute rejection)
 - Falsely significant estimate of effect (graft loss)



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Prospective register of RCTs

- Established in July 2005
- data set requested complies with the fields described in WHO International Clinical Trials Registry Platform (ICTRP)
- unique registration number assigned after data completeness checked
- Currently 120 trials from 19 countries
 - topic areas include: peritoneal dialysis, diabetic nephropathy, glomerulonephritis and transplantation
 - Regular yearly contact with trialists



Fully searchable

cochrane renal group A REVIEW GROUP OF THE COCHRANE COLLABORATION Renal Health Library Prospective trial registration About us Reviews Writing a review Trials in nephrology What's new? Home Go Query Examples Search blood and heart finds records that contains ANY of these words (blood, and, heart) autoid "blood" and "heart" finds records that contains BOTH these words (blood, heart) Field(s) cra id "blood and heart" and "disease" not "plasma"|finds records that contains BOTH phrases ("blood and heart", "disease") but not "plasma" titleoftrial ltitleoftrial leadsurname leadgivennames crg_id A RANDOMIZED, CONTROLLED TRIAL OF STRAIGHT VERSUS COILED TENCKHOFF CATHETERS IN PERITONEAL David Wayne CRG050600001 Johnson View >> DIALYSIS PATIENTS A RANDOMIZED, CONTROLLED TRIAL OF FLUDROCORTISONE FOR THE TREATMENT OF HYPERKALAEMIA IN CRG050600002 Johnson David Wayne View >> HAEMODIALYSIS PATIENTS A randomised study comparing universal valacyclovir prophylaxis with quantitative PCR based preemptive CRG050600003 Reischig Tomas View >> therapy for cytomegalovirus (CMV) disease in renal transplant recipients. A randomised double blind, placebo controlled, cross-over study of the effect of amiloride over 6 weeks, on CRG060500004 Walker Robert |View >> renal water handling in individuals with a bipolar or unipolar disorder, requiring lithium therapy?. Clinical benefits of icodextrin-based solutions in high-transporter, prevalent, diabetic patients in peritoneal CRG040600073 Paniagua View >> Ramon dialysis: A randomized clinical trial fluence on hemodynamics of conversion from Calcineurin Inhibitor to Sirolimus in Renal and Liver Transplant ID PENDING Eisenberger Ute View >> patients.

•http://www.cochrane-renal.org/trialsubmissionform.php



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Register of diagnostic test accuracy studies (DTAS)

- CRG a pilot group for DTAS reviews and for developing a DTAS trials register
- Trial identification not straight forward
 - development of database search strategies and (re-)handsearching
- 1% of published articles in KI, JASN and AJKD are DTAS (pilot study 2004)

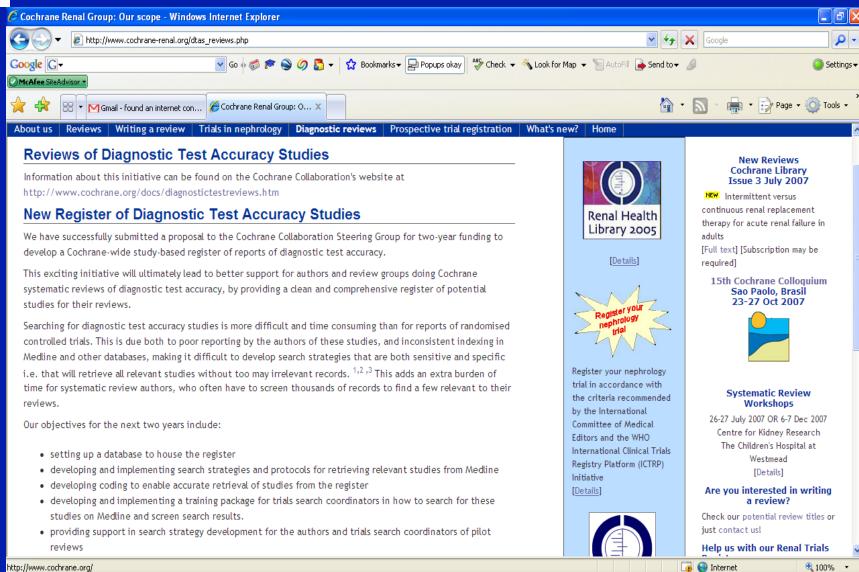


kdigo

🎁 start

(9) Wireless Network Co..

W 3 Microsoft Office ..



5 Microsoft Office P...

Cochrane Renal Grou...



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Education and training

- 2-day systematic review workshops
 - How to write a review protocol
 - Plan and structure, search strategy design, rationale for inclusion and exclusion criteria, quality assessment
 - Introduction to analysis and meta-analysis
 - Data extraction, analysis and interpretation
- Finding the evidence
 - One day workshop on how to search the electronic databases
- Work shops with renal conferences
 - WTC 2008 critical appraisal of evidence
- Direct support for reviewers
 - Copies of trial reports
 - desk space
 - Occasional bursaries, undergraduate summer scholarships



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 - Guidelines!
 - new RCTs in clinically relevant areas
 - improved explicitly reported RCTs



Guideline collaborations

- CARI guidelines
- EBPG guidelines
- KDIGO transplant
- Others in discussion.....



About CARI

Contact Us

Guidelines

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For Peer Reviewers

For Consumers

Annual Report

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■ What's New?

SEARCH

CARI Guidelines

The CARI guidelines are now divided into three disease stages - Dialysis; Chronic Kidney Disease; and Transplantation. Each guideline comprises various subtopics and their recommendations.

The status of the different guidelines are outlined below:

Chronic Kidney Disease Guidelines	Status	
Prevention of Progression of Kidney Disease	Published April 2006	
Nutrition and Growth in Kidney Disease	Published Dec 2005	
Cardiovascular Risk Factors	Published Dec 2005	
Vitamin D, Calcimimetics and Phosphate Binders	Published April 2006	
Urine Protein as Diagnostic Test	Published Oct 2004	
Evaluation of Renal Function	Published Oct 2005	
Kidney Stones	Published Feb 2007	
Renal Vasculitis	Under development and for comment until 1 Oct 2007	
Previous Guidelines	Archived	
Dialysis Guidelines	Status	
Acceptance onto Dialysis	Published Oct 2005	
Biochemical and Haematological Targets	Published April 2006	
Dialysis Adequacy	Published Oct 2005	
Evidence for Peritonitis Treatment and Prophylaxis	Published Oct 2004	
Vascular Access	Under development & for comment til 1 Oct 2007	
Previous Guidelines	Archived	

Evidence for Peritonitis Treatment and Prophylaxis
Vascular Access
Under development & for comment til 1 Oct 2007

Previous Guidelines
Archived

Transplantation Guidelines
Deceased Kidney Donor Suitability
Published Oct 2005
CMV Disease and Kidney Transplantation
Published Oct 2004
Calcineurin Inhibitors in Renal Transplantation
Published Feb 2007
Living Kidney Donors
Under development and for comment til 1 Oct 2007
Previous Guidelines
Archived

CRG
involved in
16 CARI
guidelines
between
2002 and
2006





EBPG

- 2005 and presently in talks again
- 4 haemodialysis guidelines
 - Dialysis access
 - Nutrition
 - Dialysis strategies
 - Stability
- CRG registry searches
 - 1 guideline comprises up to 20 questions
 - Hard copy
- Diagnostic test search
- Cohort and observational searches



KDIGO transplantation

- All tx related systematic reviews
- all tx-related trial reports from CRG trial register
 - Hard/ electronic copy as required
- searches for diagnostic test accuracy
- PICO tables
 - Iterations
 - 49 questions for transplant
 - 7 questions for DTAS

PICO

2. Maintenance:

Design etc	P opulation	<u>Intervention/comparator</u>	Outcomes of Interest
Systematic	KTX	Tac vs CSA (CsA or microemulsion) (with AZA, mmf,	 Same as 1, except:
Reviews		sirolimus, everolimus)	Fracture
$(RCTs N \ge 100)$		CNI vs non-CNI regimens	• HTN
		MMF vs AZA	Hyperuricemia
		MMF formulation vs other MMF formulation	Quality of life
		CNI-sparing (withdrawal), CNI-free, Steroid	AE: Sirolimus:
		withdrawal, Steroid avoidance	lipids

CVD RISK FACTOR 25, 26, 28, 30, 31 b. CVD Risk Factors Interventions

Design etc	<u>P</u> opulation	Intervention/comparator	Outcomes of Interest
RCT	KTX, with CVD risk factor	Smoking cessation	 Reduction in risk factor
N≥20		DM: Intensive vs standard	 Death
≥6 mo		HTN: ABPM vs Home BP	 Graft survival
		Obesity: Weight loss	CVD
		Hcy: Vitamins	

28Bc. Renal Artery Stenosis diagnosis

Design etc	<u>P</u> opulation	<u>Intervention/Comparator</u>	Outcomes of Interest
Cohort	KTX	Diagnostic test for RAS	Sn / Sp etc.
N≥100 <mark>(?)</mark>			

CRG delivered output

- Separate file of references by question
- excluding
 - pre-1985 trial reports
 - all conference proceedings abstracts
 - all Transplantation Proceedings reports
 - Trials <100 participants</p>
- Not involved in searching for non RCT evidence



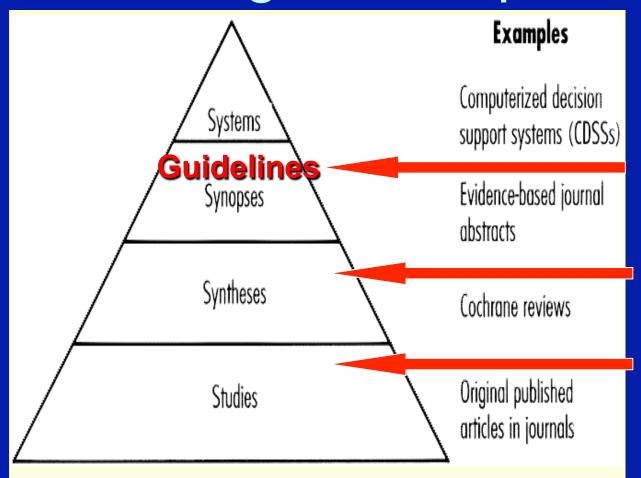
Developing guidelines...

Beware the Puddle of Doom!





Contribution of CRG to the guideline process



Use Cochrane reviews

Let us help you do reviews

Trials Register

Figure. "4S" levels of organization of evidence from research.

From: Haynes: ACP J Club, Volume 134(2).March/April 2001.A-11-A-13

Future involvement?

- Minimise duplication of effort
 - CRG core work
- Maximise efficiency now and future guideline updates
 - Perform the systematic reviews that need doing in parallel to guideline development
 - Harness CRG training and support
- Add-ons
 - Searching for non-randomised studies
 - Potential for spin-off: methodology projects



Editorial team

- Co-ordinating editor
 - Jonathan Craig
- Review group coordinator
 - Narelle Willis
- Trials search coordinators
 - Gail Higgins
 - Ruth Mitchell
- Administrative assistant
 - Leslee Edwards

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