



CENTRE FOR  
**EXPERIMENTAL  
MEDICINE**



# Engagement methods to maximise participation and subsequent uptake of COS

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# Inconsistent outcomes in ventilation trials

## CRITICAL CARE PERSPECTIVE



### How Outcomes Are Defined in Clinical Trials of Mechanically Ventilated Adults and Children

Bronagh Blackwood<sup>1</sup>, Mike Clarke<sup>2</sup>, Danny F. McAuley<sup>1,3</sup>, Peter J. McGuigan<sup>3</sup>, John C. Marshall<sup>4</sup>, and Louise Rose<sup>4,5,6,7</sup>

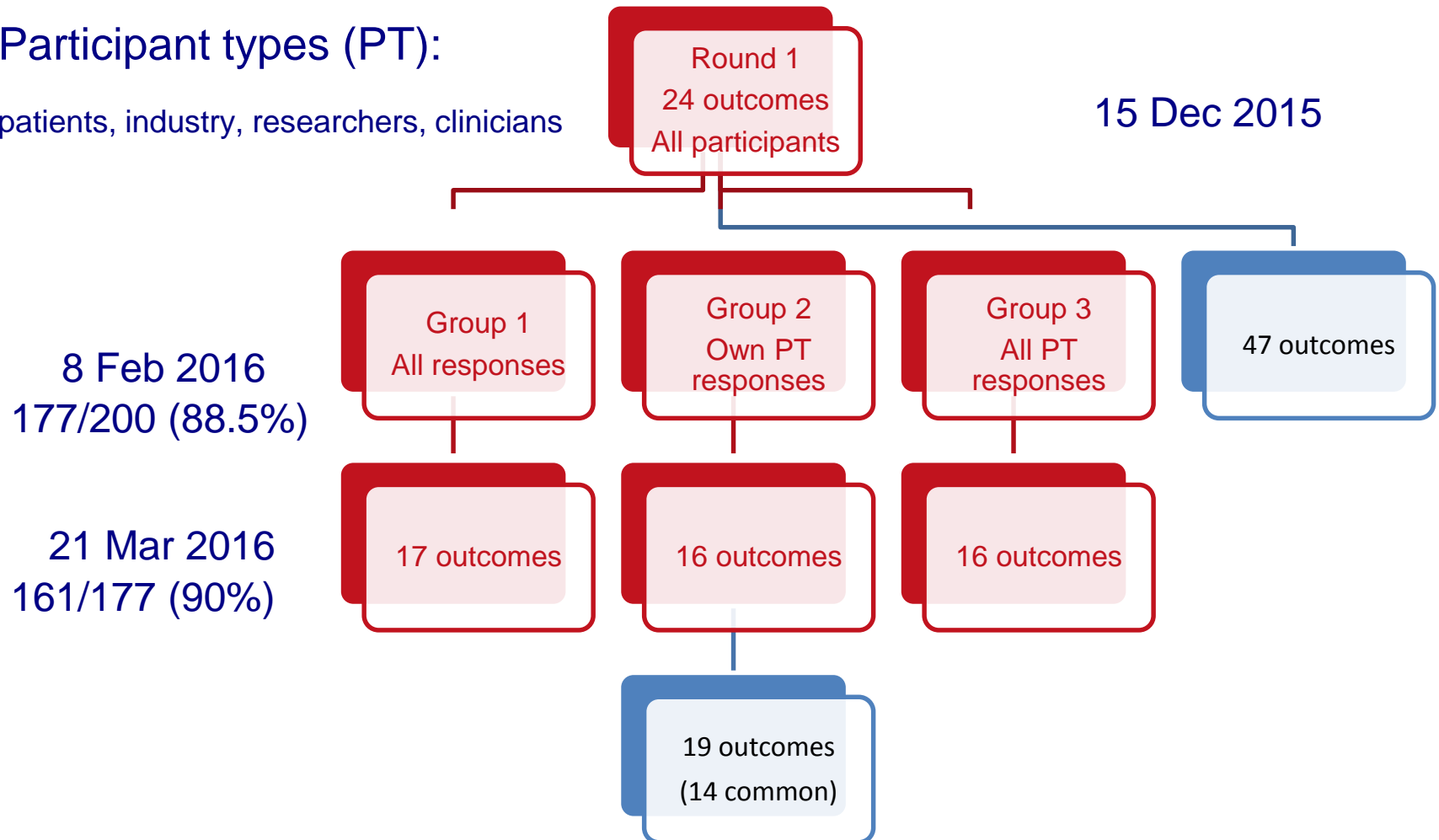
Am J Respir Crit Care Med Vol 189, Iss 8, pp 886–893, Apr 15, 2014

- To develop a COS for trials involving patients undergoing mechanical ventilation where the intervention was targeted to reduce ventilation time
- COVenT: Core Outcomes in Ventilation Trials

# Delphi study

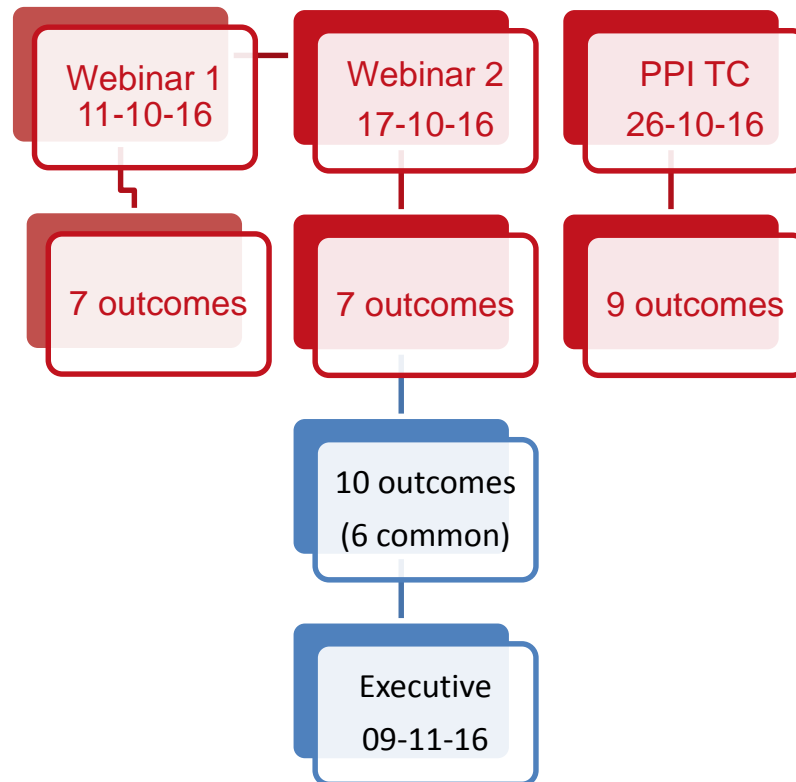
## Participant types (PT):

patients, industry, researchers, clinicians



# Consensus meetings

Participants: patients, researchers, clinicians (n=44)



# It doesn't end there...

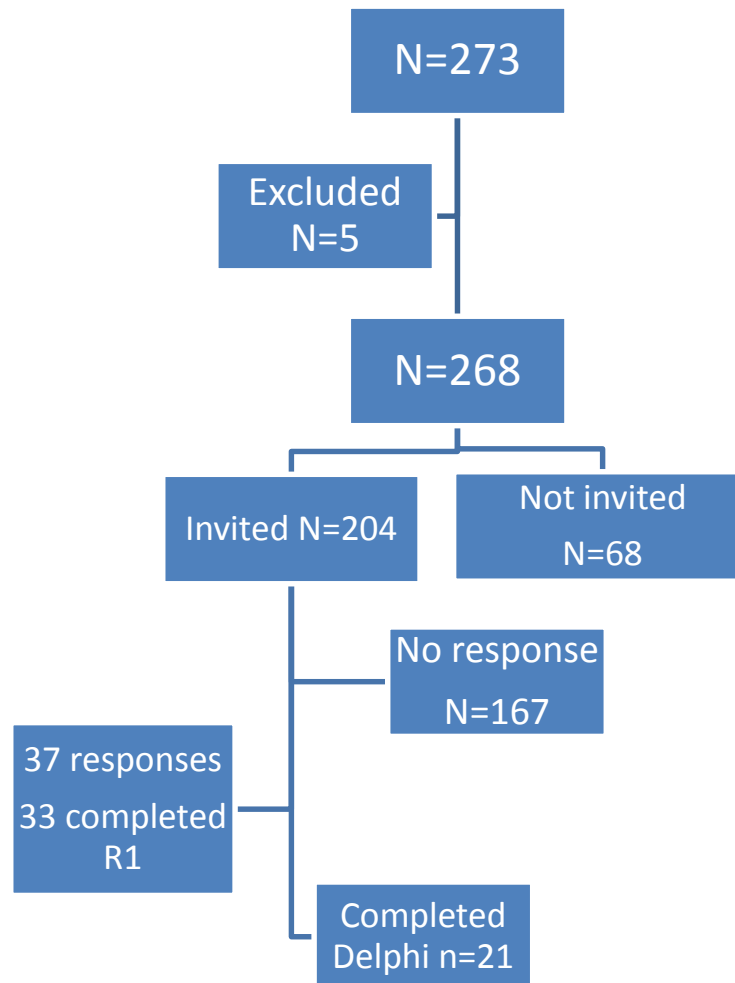
Engagement is important so *a priori* we included a cohort study to...

- Gain maximum participation and awareness by involving people who would use or influence its use
- Examine if participation has an effect on future use of the COS

# Cohort study

1. Participants: primary/senior authors of ventilation trials
2. Recruitment: PubMed search 24 Jan 2005 - 21 Jan 2015  
(respiration, artificial AND Clinical Trial OR Meta-Analysis AND humans)
3. Randomise (3:1) to participate/not in Delphi
4. Outcome: proportion who subsequently use COS in a trial
5. Follow-up: 5 & 10 years after COS publication
6. Analysis:
  - a. those invited *versus* those not invited to participate
  - b. those who participated after invitation *versus* those who did not participate after invitation *versus* those who were not invited.

# Participant flowchart



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**QUESTIONS?**

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