

# COMET VII - GLOBAL COS INITIATIVES

## A GRADE UPDATE

GRADING OF RECOMMENDATIONS ASSESSMENT, DEVELOPMENT AND EVALUATION

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# Acknowledgements

- Thanks to the COMET VII organization
- Thanks to Holger Schünemann and the MacGRADE team

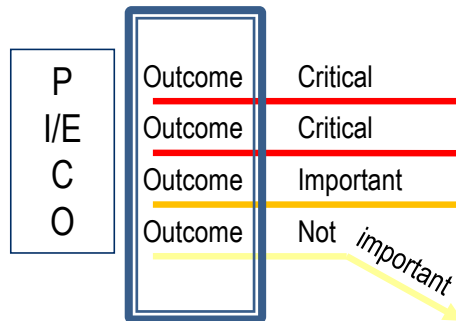
# Disclosures

- No direct financial COI, funding from ASH

# Outcomes in GRADE

**GRADEpro** | **GDT**

Formulate question



Assess single studies



Synthesize and Create evidence profile or Summary of Findings Table with GRADEpro

Rate certainty of evidence for each outcome

High  
Moderate  
Low  
Very low

- Grade down**
1. Risk of bias
  2. Inconsistency
  3. Indirectness
  4. Imprecision
  5. Publication bias
- Grade up**
1. Large effect
  2. Dose response
  3. Opposing bias & Confounders

Evidence synthesis  
(systematic review/HTA)

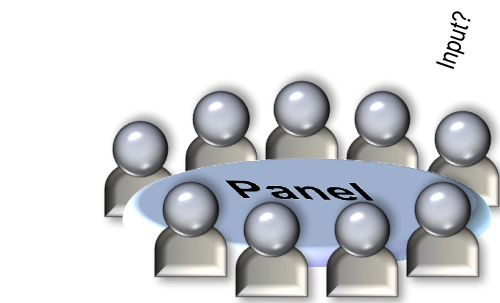
Recommendation/Decision

Grade recommendations  
(Evidence to Recommendation)

- For or against (direction) ↓↑
- Strong or conditional/weak (strength)

By balancing consequences  
(evidence to recommendations):

- ❑ Certainty of evidence
- ❑ Values and preferences (utilities)
- ❑ Balance benefits/harms
- ❑ Resource use (cost)
- ❑ Equity, Feasibility, Acceptability



EtD framework

Recommendation /Decision



Grade overall  
Certainty of evidence  
across outcomes

- Formulate Recommendations (↓↑|⊕...)
- “The panel recommends that ....should...”
  - “The panel suggests that ....should...”
  - “The panel suggests to not ...”
  - “The panel recommends to not...”

# Health Outcome Marker States



## Major Bleeding

(Bleeding with Substantial Blood Loss)

Importance

Utility

### Symptoms

You lose a lot of blood (e.g. vomit blood, blood with your stools, blood from a wound) or you have an internal bleeding.

### Time Horizon

Bleeding does not stop and you have to receive specific urgent care.

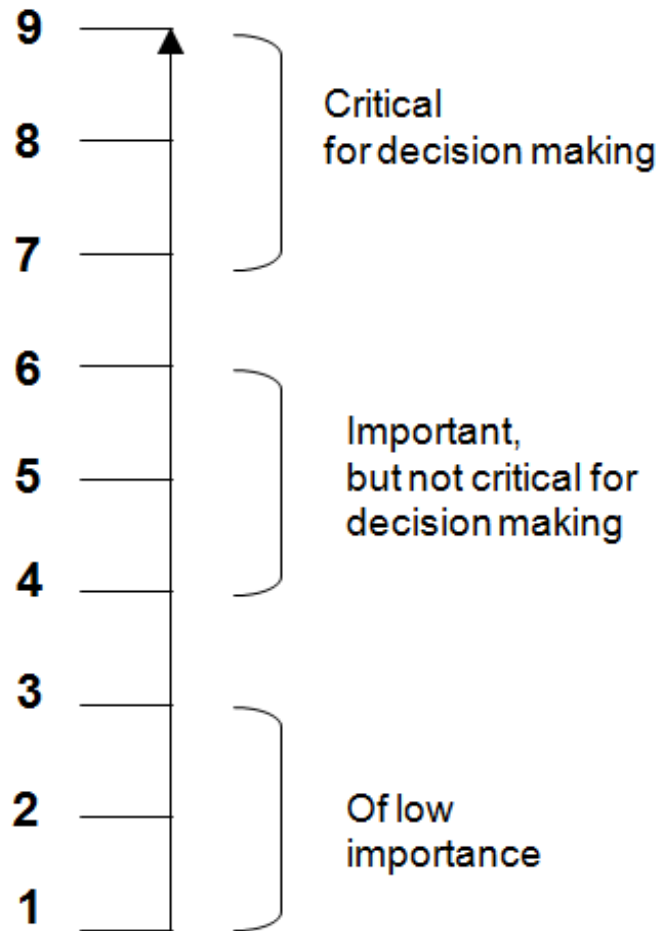
### Testing and Treatment

You may require a CT scan, a flexible tube via your mouth or anus to investigate your bowel, and blood work, and you may be admitted to hospital to receive blood transfusion or surgery.

### Consequences

You may recover completely, but you may instead have permanent neurological damage if your brain does not receive blood for an extended period of time (e.g. be unable to speak or understand, or wheel-chair bound), or even die.

# Marker States – Outcome Importance



- Rating by panel members, based on descriptions
- Indicator of variability in perceived importance among raters
- Ranking from highest to lowest rated
- Core outcomes should be among the highest rated

# Marker States – Outcome Utility

Effects on  
Benefits  
Importance

Effects on  
Harms  
Importance



# Database of Marker States

## ms.gradeopro.org

Secure | <https://ms.gradeopro.org/search?outcome=Cerebral%20Venous%20Thrombosis%20-%20Mild&context=>

Marker States

Cerebral Venous Thrombosis - Mild

Population/context



Found 4 results

### Cerebral Venous Thrombosis - Mild

Population/context:

Background: Blood Clot in a Vein Draining Blood from the Brain - Mild Severity

Author: Ignacio Neumann

Date: 24.05.2016

### Cerebral Venous Thrombosis - Severe

Population/context:

Background: Blood Clot in a Vein Draining Blood from the Brain - Severe

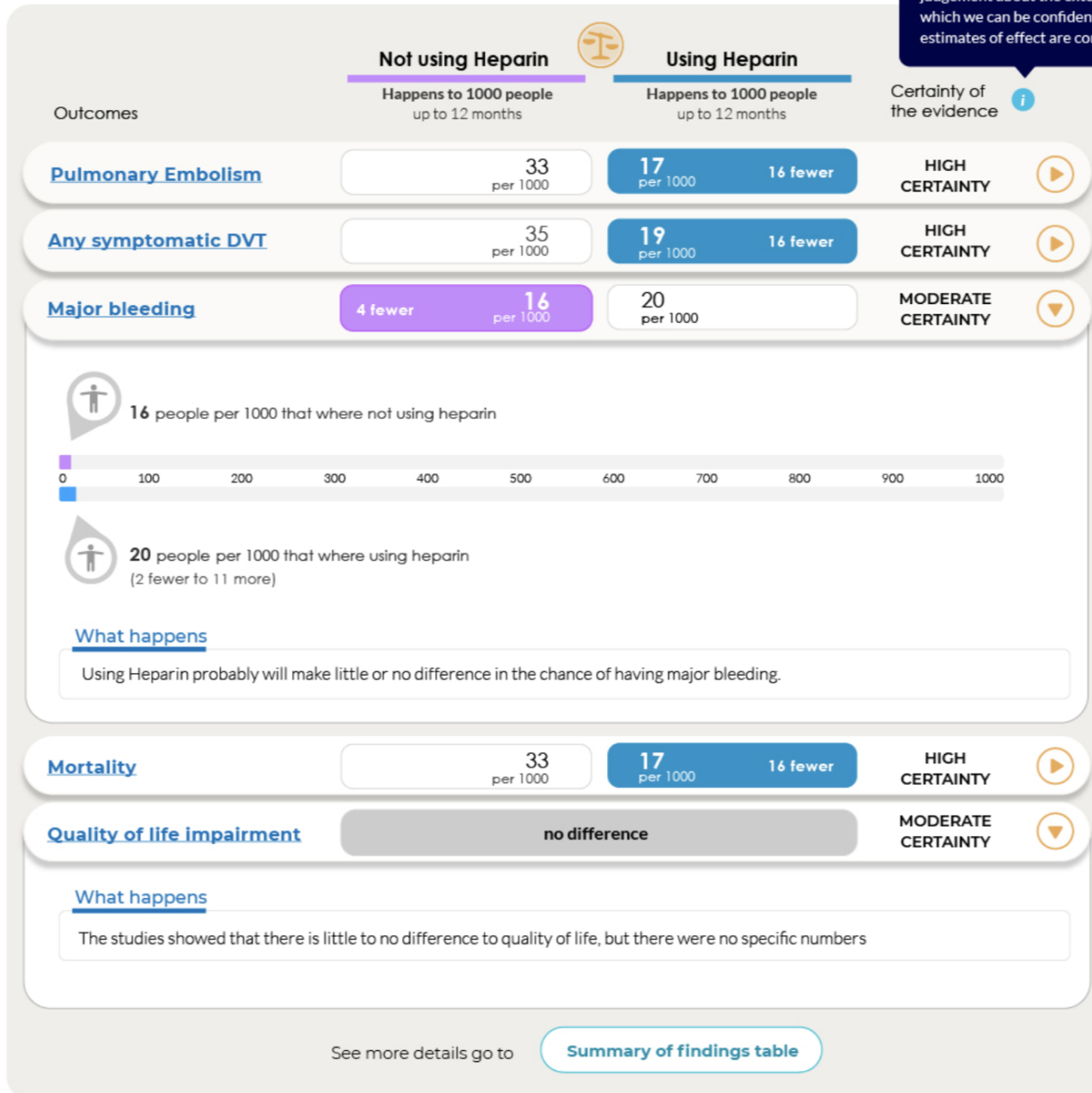
Author: Ignacio Neumann

Date: 24.05.2016

## Events per 1000 people up to 12 months

Click on the outcome name to display explanation.

The quality of the evidence is a judgement about the extent to which we can be confident that the estimates of effect are correct.



See more details go to

[Summary of findings table](#)

# Evidence to Decision Tables

## Conclusions:

- Recommendation
- Justification
- Subgroup considerations
- Implementation considerations
- Monitoring and evaluation – Capture COS in practice
- Research priorities – Recommendations for better evidence for COS

# GRADE ↔ COS

## Developing COS

1. Marker states database: detailed lay-person descriptions
2. Tools to determine importance and utility for outcomes
3. Connect with large groups of stakeholders - validation

## Increasing COS uptake

1. Identification of gaps in knowledge for core outcomes
2. Increase COS uptake through guidelines and developers