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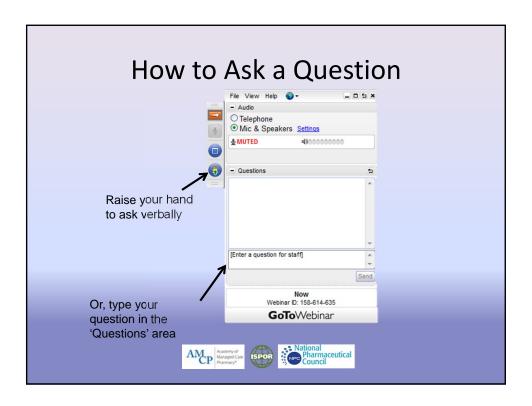














CER-CI Interpreting Observational Studies For Health Care Decision Makers Task Force

Chair - Bradley Martin PhD, CER-CI Interpreting Retrospective Observational Studies Task Force and Professor and Division Chair, College of Pharmacy, University of Arkansas for Medical Sciences, Department of Pharmacy Practice, Little Rock, AR











AMCP/ISPOR/NPC CER Collaborative Initiative

- Objective: To enhance the usefulness of CER to improve patient health outcomes by developing assessment tools for four types of studies:
 - Prospective Observational Studies
 - Retrospective Observational Studies
 - Modeling Studies
 - Indirect Treatment Studies





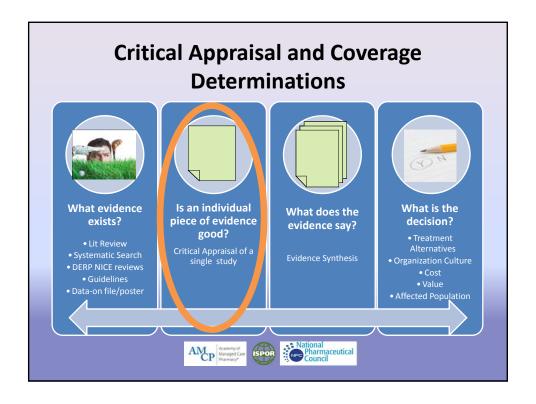


Why is this tool potentially useful to decision makers around the world?

- Provides a critical appraisal tool for an individual study that can help determine whether it should be incorporated into a body of evidence
- Can be used as an educational tool to increase sophistication in the critical review of CE information







The Issues

- Pharmacy decision makers ("users") are uncertain how to interpret retrospective observational CER studies
 - Inherent Casual Inference Challenge Due to Observational Nature
 - Counterfactual Unobserved
 - Retrospective Data are Not Routinely Collected for Research Purposes
 - Less Rigorous Regulatory Oversight
 - Variability in Approach and Conclusions
 - Complex Statistical Modeling
 - Heterogeneous Perspectives and Training
 - Epidemiology, Economics, Health Services Research, Policy, Clinical
- The issues are growing more challenging
 - More studies and more complex analytic approaches





CER-CI Part 1 – Tool Design Objectives

- As an appraisal tool:
 - easy, fast, accurate, minimal skill required...etc.
 - help end user assess the quality, credibility, and relevance of non experimental studies
- Use of the tool should result in the inclusion of more CER studies in their body of evidence and promote uniformity when appraising the quality of evidence as an educational tool

For more information:

http://www.ispor.org/TaskForces/InterpretingORSforHCDecisionMakersTFx.asp







The Task is Impossible

- A thorough evaluation requires
 - Training in mathematics, statistics, economics, epidemiology
 - Familiarity of data sources
 - Expertise in the clinical subject and its literature
- Few pharmacy decision makers will have the resources
- Our objective: help decision makers do better than they can now





Two main questions common across all four tools

- Is the study credible?
 - Credibility is the extent to which the study accurately answers the question it is designed or intended to answer and is determined by the design and conduct of the study.
 - Addresses issues of Internal Validity; measurement, and confounding
 - Addresses issue of reporting comprehensiveness
- Is the study relevant?
 - Relevance addresses the extent to which the results of the study, if accurate, apply to the setting of interest to the decisionmaker.
 - Addresses issues of External Validity (population, comparators, endpoints, timeframe) and policy-relevant differences







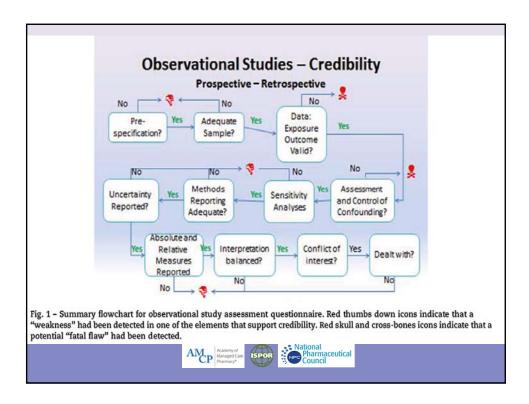
Checklist Organization and Content

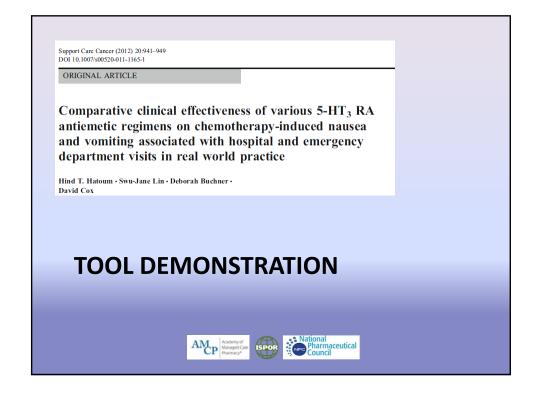
- Relevance
 - 4 Items
- Credibility
 - Design: 9 Items
 - Data: 6 Items
 - Analysis: 3 ItemsReporting: 8 Items
 - Interpretation: 4 Items
 - Conflict of Interest: 2 Items













CER Section

Need to use:

- CERcollaborative.org
 - Students will need to register with the CER
 Collaborative Registration is instant requires
 password reset on first log-in.





Monograph

- General summary of reports
- Differences in assessments between team members and how they were resolved





Next Steps

- Webinar will be posted on AMCP Foundation P&T Competition and CER Collaborative webpages
- Next Webinar:
 - Friday, October 31, 2014 3pm EST





