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PROBAST

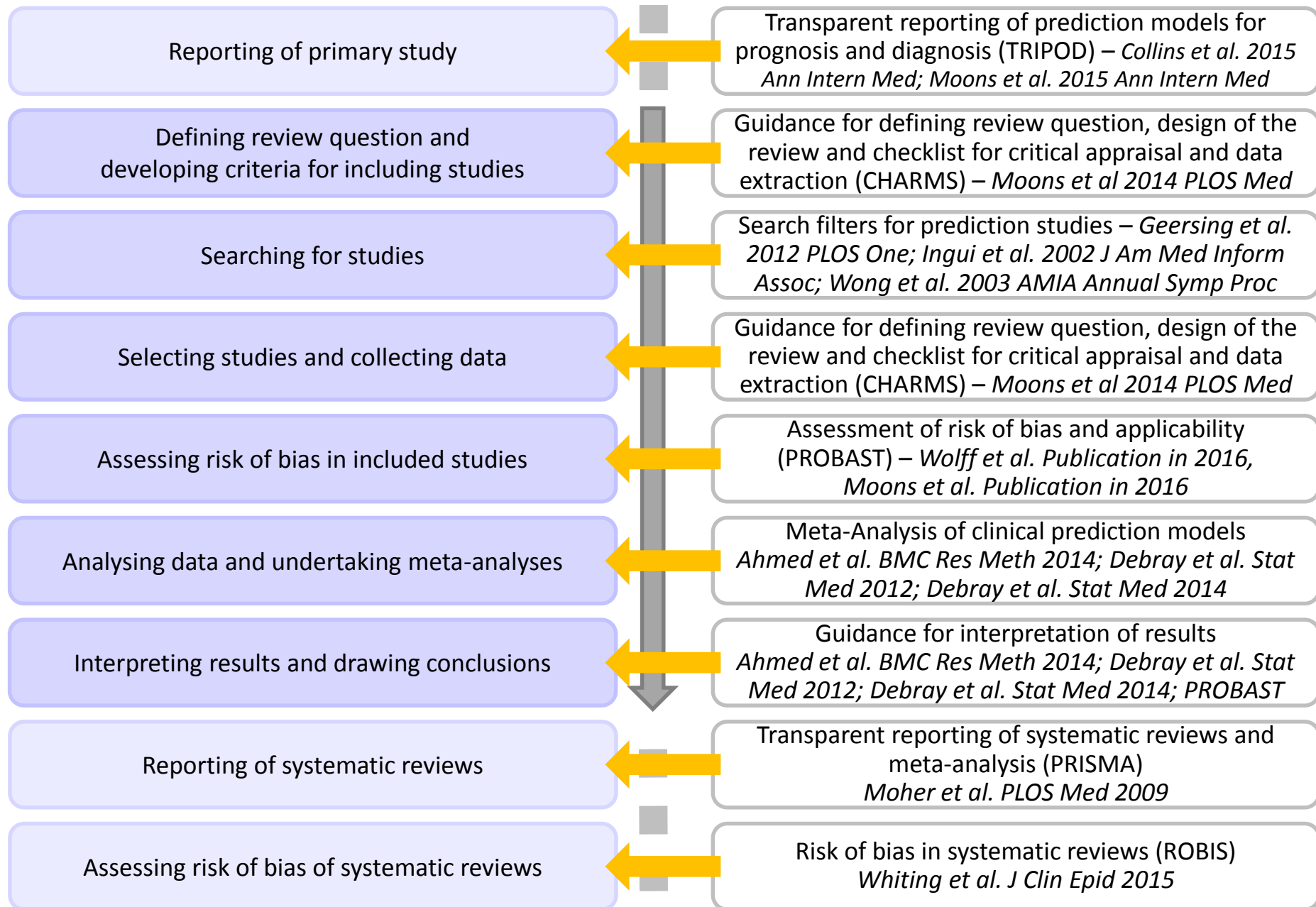
Prediction model risk of bias assessment tool

23rd Cochrane Colloquium – 04th October 2015

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I have no actual or potential conflict of interest in relation to this presentation.

Conducting systematic reviews of prediction modelling studies



Which prediction studies?

Predictive factor studies – which predictors contribute to prediction of particular prognosis, diagnosis, outcome – often using multivariable modelling – aim to develop a prediction model for individualised predictions
QUIPS 2 – assessing bias in studies of prognostic factors (Hayden et al. 2013 Ann Intern Med)

Model development studies – to develop prediction model(s) from data at hand: identify important predictors; estimate multivariable predictor weights; construct model for individualised predictions; quantify predictive performance in development set; internal validation.

PROBAST

(Diagnostic and prognostic models)

Model validation studies – test (validate) predictive performance of previously developed model in participant data other than development set – sometimes combined in development study – sometimes followed by updating/revision model

Model impact studies – quantify effect/impact actually using model on participant, physician behaviour and management, on health outcomes or cost-effectiveness of care relative to not using the model → comparative studies.
Comparative intervention studies – different risk assessment → Cochrane Risk of Bias tool

Bouwmeester et al. PLoS Med 2012



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Development and structure of PROBAST

Development:

- Delphi procedure with 42 panel members
- Seven rounds
- Seven steering group members from six institutions
- Feedback from piloting

Structure:

- Assessment of risk of bias and applicability
- Follows QUADAS-2, ROBIS, ACROBAT-NRS and new Cochrane ROB
- Five domains



PROBAST: Five domains

Domain 1: Participant selection

Domain 2: Predictors

Domain 3: Outcome

Domain 4: Sample size and participant flow

Domain 5: Analysis



DOMAIN 1: Participant selection			
A. Risk of Bias			
<i>Describe the sources of data and criteria for participant selection:</i>			
		Dev	Val
1. Were appropriate data sources used, e.g. cohort, RCT or nested case-control study data?			
2. Were all inclusions and exclusions of participants appropriate?			
3. Were participants enrolled at a similar state of health, <i>or</i> were predictors considered to account for differences?			
Risk of bias introduced by selection of participants	RISK: <i>(low/ high/ unclear)</i>		
<i>Justification of bias rating:</i>			
B. Applicability			
<i>Describe included participants, setting and dates:</i>			
Concern that the included participants and setting do not match the review question	CONCERN: <i>(low/ high/ unclear)</i>		
<i>Justification of applicability rating:</i>			

PROBAST group

Doug Altman, University of Oxford
Patrick Bossuyt, University of Amsterdam
Gary Collins, University of Oxford
Nancy Cook, Harvard University
Gennaro D'Amico, Ospedale V Cervello
Thomas Debray, University of Utrecht
Jon Deeks, University of Birmingham
Joris de Groot, University of Utrecht
Emanuele di Angelantonio, University of Cambridge
Tom Fahey, Royal College of Surgeons in Ireland
Paul Glasziou, Bond University
Frank Harrell, Vanderbilt University
Jill Hayden, Dalhousie University
Martin Heymans, University of Amsterdam
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* denotes steering group members

More on prognostic research

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|--------------------|--------------------------|------------------------|
| 1. Workshop 15 | CHARMS checklist | Sunday, 16.00-17.30 |
| 2. Workshop 39 | QUIPS tool | Monday, 14.00-15.30 |
| 3. Workshop 57 | PROBAST tool | Monday, 16.00-17.30 |
| 4. Workshop 73 | Meta-analysis | Tuesday, 11.00-12.30 |
| 5. Oral session 12 | Prediction models | Wednesday, 11.00-12.30 |
| 6. Workshop 91 | Prognostic GRADE | Wednesday, 14.00-15.30 |

