Critical Appraisal CASP Egypt

Critical Appraisal Training

CASP Egypt are running a three-day course on critical appraisal training in Cairo Egypt, 20-22 April 2016. This 3 day training course will take place in Cairo. Take a look at the programme, being led by Professor Amanda Burls (CASP Trainer) for the course here.

Research Training for Real Life

Critical Appraisal is likely the most valuable skill you can learn for understanding research because even if you know the statistics and are familiar in the field that may not be enough to appraise the value of the research that you find. Appraisal gives you the freedom to analyze the research for yourself without having to depend only on an “expert” opinion. CASP teaches this in such a way that it is equally useful for researchers, students and members of the public.

CASP in Egypt

I was fortunate enough to attend CASP in Oxford when the Egyptian delegates came full force to the training. The atmosphere was charged with the power that comes from actively applied learning with purpose. The excitement was contagious. It was a wonderful safe space for learning, connecting and sharing ideas. Unlike a conference it is interactive hands on learning and you will not want to miss even a single session. It would be a great time to refresh and recharge while enjoying new friends and the ancient Egyptian culture.

Any discipline or specialty are welcome, not just dentists. If you want to see Egypt and learn more about evidence this is
the place for you  If you are interested in attending, please contact either:

CEBD@dentistry.cu.edu.eg or ahmed.elkhadem@dentistry.cu.edu.eg

See the CASP Egypt Critical Appraisal Training Schedule

<table>
<thead>
<tr>
<th>Time</th>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
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</thead>
<tbody>
<tr>
<td>9:00 am – 9:30 am</td>
<td>Welcome + Registration</td>
<td>Introduction to Diagnostic accuracy studies (Amanda)</td>
<td>Making sense of results 1 (Amanda)</td>
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<tr>
<td>9:30 - 10:15 am</td>
<td>Course Introduction (Ahmed)</td>
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<tr>
<td>10:15 – 10:30</td>
<td>Coffee break</td>
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<td>Coffee break</td>
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<tr>
<td>10:30 – 11:30</td>
<td>Introduction to Evidence Based Practice “EBP” (Amanda)</td>
<td>Small group (CASP Diagnostic)</td>
<td>Making sense of results 2 (Amanda)</td>
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<tr>
<td>12:15 – 1:00</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Lunch</td>
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<tr>
<td>1:00 – 1:30</td>
<td>Introduction to Randomized Controlled Trials “RCTs” (Amanda)</td>
<td>Introduction to observational studies (Iman)</td>
<td>And now what? (Amanda + Ahmed)</td>
</tr>
<tr>
<td>1:30 – 2:00</td>
<td>Methodological concept of cohort studies (Suzan)</td>
<td></td>
<td>Implications for undertaking systematic reviews.</td>
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<tr>
<td>2:00 – 3:00</td>
<td>(CASP RCTs) Small group Coffee break</td>
<td>(CASP Cohort) small group Coffee break</td>
<td>Practical steps to go forward.</td>
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<tr>
<td>3:00 – 3:15</td>
<td>Feedback Plenary session (RCTs)</td>
<td>Feedback Plenary session (Cohort)</td>
<td>Mobile apps for EBP + verbal feedback (Amanda)</td>
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<td>3:15 – 4:00</td>
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Free CASP iPhone App For Critical Appraisal Skills

CASP The Critical Appraisal Skills Program is an efficient way to look at a paper and now you don’t need to use forms or papers to do this if you have an iphone because (CASPe) has created a CASP app for that.
To give you an idea of the cycle for appraising a paper we have added the illustration above but actually doing this in the app is so much easier.
CASP now has a great easy to use mobile app that is free for iphone. With this app you can appraise eight kinds of studies. The app will store your results and it is easy to use even while sitting in a conference or a classroom. The CASP app was built for the iphone but mine works on the ipad too. The CASP app comes in English and Spanish. It takes minutes to do an appraisal and yet CASP leaves the work to you. The CASP developers offer expert tools for the job in a simple easy to use format. The app prompts you to create a title for your journal article review, add the PubMed ID or link and select the appropriate CASP worksheet (eight different study design options are included). CASP contains an outstanding A-Z
Evidence Based Practice glossary and a section called Calculators that you can use to work out a number needed to treat (NNT) and pretest probabilities. If you need more guidance you can always get this from the CASP website and if you are Spanish see the critical appraisal program in Spain (CASPe) The Spanish group were the app creators lead by Dr Juan Cabello

For those of us with iPads Mini iPads or an iPod ITouch you can use this app on these devices, Here is a very simple link with pictures to show you how to get the app on the device
Using Evidence Based Healthcare in Every Day Life

I came to Oxford following rehabilitation from a serious trauma and after a lifetime in International missions. I could no longer do what I did before and it was time to recreate my destiny. My background was in world missions and psychology. I had no training in how to assess research evidence or Bad Science. I knew nothing about evidence but that was about to change.

Where Do I Go From Here?

“Life may not be the party we hoped for, but while we are here we might as well dance.”
(Author Unknown, from Dear Bertha)

I was struggling to understand and reconcile research and medicine that claimed to supply breakthroughs for those without options, many groups shared inflated safety results and came to extravagant conclusions with methods that could not deliver what the papers promised. I saw how non-FDA approved interventions can bring harm to vulnerable people. I
wanted to help and not harm.

Anchored By Evidence

“The job of the human being [in the digital age] is to become skilled at locating relevant valid data for their needs. In the sphere of medicine, the required skill is to be able to relate the knowledge generated by the study of groups of patients or populations to that lonely and anxious individual who has come to seek help” (Sir Muir Gray, 2001)

I searched. On the CEBM website I found a series of articles on the How to Read a Paper series by Professor Trish Greenhalgh and this helped clarify my direction. What really sold me were the wonderful mind changing podcasts Interpreting Results-Stats in Small Doses by Professor Amanda Burls and The Information Revolution by Sir Muir Grey. I wanted more so that I could never again be used as a gateway for junk science. I applied to Oxford for the Evidence Based Healthcare Programme and I was accepted.

Learning Through Teaching

From the first week of the first module in Evidence Based Health Care I found ways to share my new knowledge. I helped clinicians and the public find research and interpret the results. As I learned, I taught others about critical appraisal, numbers needed to treat, the differences between incidence and prevalence and how to read the headlines. Helping others like my neighbors and colleagues with informed shared decision making became a daily event. I enjoyed my time as a Masters student at Oxford and made friends I will treasure for a lifetime.

I am privileged to attend Oxford as a DPHIL student at Kellogg College reading Evidence Based Healthcare after successfully completing the MSc. It was not easy but it was important.
Some things are worth fighting past the barriers of our limitations.

**Beyond the Barriers**

“What lies behind us and what lies before us are small matters compared to what lies within us. And when we bring what is within us out into the world, miracles happen.” (Henry Stanley Haskins)

My Evidence Based Healthcare DPhil project is PLOT-IT Public Led Online Trials-Infrastructure and Tools. The plan is to involve the public in multiple aspects of clinical trials from prioritizing research questions to giving feedback about trial design. This serves a double purpose where the public can learn about research in an interactive way while we can research the interface between interaction and methodology to guide the development of best practice for online trials. The Question: Online trials. What Works? We welcome collaboration.

ThinkWell and DUETS: Register Research Uncertainties
ThinkWell and DUETS

ThinkWell Research Focus in Participatory Health Care

ThinkWell and DUETS, The Database of Uncertainties about the Effects of Treatments (DUETs), is a natural partnership where ThinkWell can facilitate research ideas while DUETS can register Research Uncertainties. ThinkWell and DUETS partner to build a bridge between academic research and public research priorities. DUETs was established in 2007 in the UK to identify, collate and publish uncertainties about the effects of treatments. Information in DUETs not only helps health professionals identify treatment uncertainties quickly, but can also help those responsible for promoting and supporting research focus on important gaps in knowledge and the unmet information needs of patients and clinicians.
Incubating Great Research Ideas

Ever wonder where great research ideas come from? Those that make it to a funded project can come from anywhere but research ideas developed in a research institution are more likely to be equipped to get from concept to actual use in everyday clinical practice. ThinkWell and DUETs working together can work like a net to bring research ideas from outside academia or industry into a place where they can be adopted and researched. Many lay person initiated research projects could change the face of health care if only they are noticed and adopted. For example there are multiple examples of interventions that started as Research Uncertainties like inexpensive microscopes, 3D prosthetics, heart repair devices, inexpensive diagnostics for pancreatic cancer and ideas to make living with dementia and diabetes easier all invented by ordinary people without medical training. The BMJ blog by Amy Price notes that one thing they all share is that it was hard to get the attention of a research institution and be accepted as a bonafide treatment that helps patients.

Developing the DUETS Database and ThinkWell

The development of the DUETs database has produced an important resource for researchers and research funders. The use of a systematic methodology for identifying known uncertainties could potentially help programs such as ThinkWell to prioritize important topics for either primary research or systematic review in a complex area that spans many disciplines and knowledge bases. As a result of the piloting process, it has been made clear how wide the pool of potential existing research is, being spread across a wide range of disciplines, and therefore a large number of sources, such as databases in the social sciences, humanities, and
information technology and communications fields. For more information on the history of DUETS we make available the seminal paper by Anne Brice and Amanda Burls “ThinkWell and DUETS

Getting Help to Register Your Research Uncertainties

When you need help registering your Research Uncertainties contact us by commenting below and ThinkWell will help

Shape Research Priorities for Mental Health

You can shape resources for mental health by participating in this short survey and sharing your views. We need better resources for people and their families who battle mental health issues and struggle to maintain quality of life and personal dignity in the face of mental illness.

Researchers at City University London would like to invite you to take part in a research study. Before you decide whether you would like to take part it is important that you understand why the research is being done and what it would involve for you. You can find out more by downloading the
What is the purpose of the study? They are researching a new way of involving service users, carers and staff in measuring something called ‘health utilities’.

Health utilities are used by policy makers and others to consider how people value the potential benefits and costs of a new treatment or intervention.

Most often, people with experience of mental health problems and their carers are not involved in this.

You can take part in the survey here.
CASP Critical Appraisal Skills Programme for All

CRITICAL APPRAISAL SKILLS PROGRAMME
Making sense of evidence about clinical effectiveness
Critical Appraisal Skills Programme (CASP) is for practical application in understanding research. It is fast, structured, accurate and easy for anyone who wants to know more about research.

Everyone is interested in having good health and there is worldwide interest in making health care more effective. However, how do we know which treatments or interventions really work? How can health care commissioners know which treatments or services are truly effective and worth funding? How can patients decide whether the benefits of a particular intervention are likely to outweigh the harms and cost? There are numerous examples that show that doing things, or advising people to do things, just because they seem like a good idea at the time has frequently resulted in more harm than good. If we are going to make sensible choices about treatments and interventions we need to ensure that we are informed by the best available research evidence. Critical Appraisal Skills enable you to assess the trustworthiness,
relevance and results of published papers so that you can decide if they are believable and useful.

**Why CASP?**

I learned about the CASP Critical Appraisal Skills Programme during my MSc in Evidence based Health Care at the University of Oxford. It was like magic, finally I could see ways to figure out if a paper was good even if it was not in my field just by applying CASP principles. There are even very useful free checklists for many kinds of research that you can download [here](#).

**CASP in Oxford March 23-26 2015 International Training Week in Oxford**

Who can go? This is a 4 day training programme designed for people who want to be more confident in critically appraising research evidence & teaching critical appraisal skills to others. The course covers an introduction to evidence-based health care and decision-making, a half day finding the evidence workshop and the critical appraisal of Randomised Controlled Trials, Systematic Reviews and Qualitative Research. To support critical appraisal of evidence CASP instructors spend some time making sense of effect measurements and size, and estimations of bias and chance in results. This is NOT like a statistical maths class where the instructor drones on and you lose the plot in the first five minutes. You will immediately discuss and apply what you learn in small groups no matter what your prior expertise level.
When the Student is ready the Trainer shall appear!

You will be amazed that by the end of the course participants will be ready to practice their critical appraisal teaching skills in small groups with peer and facilitator feedback. The course teaches just what you need to know so that when you return home it still all makes sense. The classes are fun as they encourage people to try out new teaching ideas and approaches in a safe and relaxed environment. I was surprised that within a week of taking these classes I was asked for help by some medical friends and was immediately able to share what I had learned so they could use this in their own work.

CASP INTERNATIONAL TRAINING COURSE DATE: 23-26th MARCH 2015, VENUE: KELLOGG COLLEGE, 60-62 BANBURY RD, OXFORD OX3 6PN UK

Download a PDF Flyer with more information here

Download an application form here

Critical Appraisals Skill E-Learning

If you can’t make it to Oxford and are hungry for Critical Appraisals Skills for research the check out the information in the free e-learning course set up for CASP by Anne Brice and Professor Amanda Burls. You can learn critical appraisal skills in several areas. These modules guide you through the process of learning how to find the evidence, how to assess the validity and reliability of the published research in order to provide effective and efficient healthcare.

The course is made up of 6 modules: (Click on the link & it will open up another website)

- Overall introduction to critical appraisal
- Finding the evidence
- Randomised controlled trials
- Systematic reviews
- Economic evaluations
- Making sense of results

CASPe | Critical Appraisal Skills Programme Español

CASP offers critical appraisal for research in Spanish too. The courses are taught by internationally respected authors.
Evidence Aid for Ebola Hemorrhagic Fever

The outbreak of the Ebola Hemorrhagic Fever virus is an epidemic and a human catastrophe, taking place in some of the world’s poorest countries. Evidence Aid works with partners to compile evidence-based resources to help with the response and improve communication and information provision. You can read more about the need to avoid inaccurate and contradictory information here. Evidence Aid has arranged for significant academic articles to be made freely available from publishers for a limited time so you can make informed choices about Ebola and how to help. Evidence Aid resources will be updated and kept current as the situation changes. Disaster is not only a health problem but there are tragic cultural implications and yet Ebola Hemorrhagic Fever is no respecter or culture or demographic status. When not resolved in low resource areas it spread to
developed nations. It is in every one’s best interest to provide Evidence Aid.

Two Year Old Boy’s Dad thought Ebola was Just Witchcraft

The Evidence Aid Pathway to Safe Medical Care

The Evidence Aid Pathway offers free information, potential protocols and resources not only for the Ebola virus but also for other medical emergencies that can happen when a country deals with crisis. ThinkWell supports the endeavors of Evidence Aid. Help is divided into three main categories:

Systematic reviews

Other important articles

Other resources

Nancy Writebol and Ebola Death at Her Doorway

Nancy Writebol the early USA survivor shares how she felt alone and close to death in an unprepared nation and then what it was like to be flown back home in a serious condition. Many of those deaths could have been avoided by trained people
following protocol to the letter but policy and training is a seeming luxury we set aside when in the throes on impending tragedy. Evidence Aid prepares the Evidence so the future can be a safer place.

**How Does Ebola Hemorrhagic Fever Kill**

Why is Ebola Hemorrhagic Fever so dangerous and how does it work and grow? The video below shows the Ebola strategy and how the normal body defenses break down. It also shares the difference between media hype and real danger.

**How Does Evidence Aid Help the Future; Advance Warning Directives**

Evidence Aid has the experience of working with other nations such as those encountered through the Tsunami and in war stricken nations where wounds, famines, mental distress, death and disease continue to take the healthy hostage. We have early warning systems and preparation in place for other disasters, Evidence Aid puts the machinery in place so that any nation can have a warning system and contingency plans in place. Evidence Aid is an organization with a reputation for paying it forward. Don’t wait get to the Evidence Aid now so that when the virus resurfaces there is a plan. When we fail to plan we plan to fail. The price of countless lives is too large of a price to pay by leaving disaster aid to chance. Evidence Aid saves resources and lives by providing well-timed evidence based help when it is needed the most.
Flusurvey launches on Wednesday 19th November 2014 for the 2014/5 flu season. This is an excellent project for public engagement. Simple recording symptoms and a few other things can help researchers learn more about Flu and better yet they share data with the public. ThinkWell looks forward to you joining with us to engage with this project again this year. You can read more about how this project works and then sign up!

- Log in
- Register
Amanda Burls, (Director of ThinkWell) and her colleagues have written an excellent review on the evidence about vaccinating healthcare workers and to reduce flu transmissions to sick people by health care workers. Should we or shouldn’t we vaccinate...read the paper.

This year Flusurvey is pleased to announce an exciting collaboration with i-sense, an £11M EPSRC funded interdisciplinary research collaboration led by University College London to develop early warning sensing systems for infectious disease. The podcast below share some of the interesting things researchers have found using citizen’s donated data.

https://soundcloud.com/lshtm/flusurvey-2013-14-alma-adler

Flusurvey has some exciting projects in the pipeline being developed with i-sense collaborators: Some participants this year will be able to take part in a self-swabbing exercise to see if the influenza-like symptoms that they report are being caused by a flu virus or something else.

They are also going to combine aggregated data from Flusurvey weekly symptoms surveys with that from social media and internet searches allowing flu trends to be monitored more accurately and earlier than ever before. The i-sense researchers at UCL will be using Flusurvey data to develop a mobile app which will provide up to the minute information about flu hotspots.

More information about all these developments will be available shortly – watch this space!

Why do we need Flu research? This video will show you how because of trials that were not registered or reported billions of dollars were spent on stockpiling a flu medication that may do more harm than good. One harm was billions of dollars that would otherwise be used to provide other forms of healthcare. In our Epidemiology class at Oxford taught by
Professor Amanda Burls, Dr Jose Emparanza and Dr Juan Cabello, and who are also ThinkWell Directors we were given a research paper that regulators used to decide if they needed to take action on the possibility of an H1N1 flu epidemic. After discussing the information our group decided we would respond the same way as the regulators and the World Health Organization. Sadly they did not have all the information, citizen research is important because it increases research transparency. This video shares a story of research that was hidden and how it happened then and could happen again.

To read about Flusurvey results from the 2013/2014 season, please click here. Or, read about our findings on BBC news, on The Guardian, or on the podcast: click here.

To learn more about why we need transparency in research and citizen involvement read our response to the WHO (World Health Organization) and join us in becoming citizen researchers or to critically evaluate research in our ThinkWell’s Citizens’ Research – Identification and Setting Priorities (CRISP) group.

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**Best Research Papers of All Time : WHO Calls for Public Consultation on Public Disclosure of RCTs**

WHO calls for public consultation on public disclosure of randomized controlled trials, (RCT’s) and you can contribute.
To prepare you for the journey you may want to watch the challenges and victories faced by those who wrote the best research papers of all time.

Call for public consultation: WHO Statement on Public Disclosure of Clinical Trial Results

For the next 30 days the World Health Organization welcomes a public consultation on the official WHO statement regarding public accessibility of clinical trial results. During the consultation period the public can send their feedback on the WHO statement to make all clinical trial results openly accessible. This measure comes after the WHO established the International Clinical Trials Registry Platform to improve research transparency, but found that more work was needed to ensure that trials were registered and their results made available. The WHO statement supports the disclosure of clinical trial results to enhance transparency for the public.

Please download attached comment form and enter comments into the Word file. Email completed comment forms to: ictrpinfo@who.int. The deadline for comments is 15/11/2014.

- Results Disclosure Public Consultation Comments Form.doc, 35kb
- Draft WHO Statement on Public Disclosure of Clinical Trial Results.pdf, 142kb
Reporting of Findings of Clinical Trials

When researchers embark on a clinical trial, they make a commitment to conduct the trial and to report the findings in accordance with basic ethical principles. This includes preserving the accuracy of the results and making both positive and negative results publicly available. However, a significant proportion of healthcare research remains unpublished and, even when it is published, some researchers do not make all of their results available. Selective reporting, regardless of the reason for it, leads to an incomplete and potentially biased view of the trial and its results. For more information please refer to “Reporting the Findings of Clinical Trials” in The Bulletin.

First Draft WHO Statement on Public Disclosure of Clinical Trials Results

Following a ministerial summit on Health Research in 2004, a World Health Assembly Resolution passed in 2005 called for unambiguous identification of all interventional clinical trials. This led to the establishment of the WHO International Clinical Trials Registry Platform, which collates information on trials that have been notified in a network of clinical trial registries. WHO’s existing position on registration can be found on the ICTRP website. Concerns have been raised that there may be selective publication of trials dependent on their results, with particular concern that trial results which may be viewed as “negative”, are less likely to be submitted, or accepted, for publication in the scientific literature or made public in other ways.
In the latest version of the Declaration of Helsinki it is stated that “Every research study involving human subjects must be registered in a publicly accessible database before recruitment of the first subject.” and that “Researchers have a duty to make publicly available the results of their research.” There is an ethical imperative to report the results of all clinical trials.

The draft WHO statement related to public disclosure of clinical trial results is now open for public consultation over the next 30 days. Following this period the statement will be finalized, and will become WHO’s Position with regard to reporting of clinical trial results.

Cell Science Citizens: From the Petri Dish to the Clinic

Citizen Science Collaboration and Communication
One of the best citizen and scientist environments can be experienced at the World Stem Cell Summit. I love this conference because citizens and scientists share knowledge even in direct opposition to the stance one party decides to take, however as the conference continues communication and shared knowledge are born. Scientists and patients alike share their victories and struggles. They learn together and their mandate is connect collaborate and cure.

**ThinkWell and Clinical Trials With You**

We are working on a platform where the Public can do clinical trials on areas of interest to them. You will be able to prioritize research, design studies, work with others to find research others have done and participate and analyze the research, you can build it we will help! ThinkWell did a [chocolate research lecture](#) where we all participated, yum! Until our platform is ready it could be good to look at other fields like the creative ways people are learning together as Cell Science Citizens and having fun.

**Let it Grow**

This CIRM student video is fun and beautiful with that intensity that comes when people bond together because they are intensely interested in their work and its future. These students are convinced stem cells are cell science that matters. Their motto is [Turning Stem Cells Into Cures](#) and this link will lead you to great information and education about stem cells and regenerative medicine hopes for the future and what is in process right now and ready for clinical use.
After ALS and the Ice Bucket Challenge

Did you do the ice bucket challenge? After the challenge there is work to do and funding to maintain in order to find solutions for those with ALS. Here we see what the ALS ice bucket challenge can help raise money for and on how ALS causes problems. It also shows that research is a slower process than any of would want in the face of a disease with no cure.

Bio Reactors and How they Can Help Cells Stay Safe

The next video tells us about bio reactors and their future use in clinical medicine. This is important because as they say in real estate location matters and in this video you will see why. Learning about what works and separating hope from hype is important as a Cell Science Citizen.

Emily the video creator described her video this way:

I created this video in collaboration with Dr. Elizabeth Csaszar, Development Scientist at CCRM, to show how cell culture with bioreactors is an essential step on the road towards commercializing regenerative medicine therapies. I believe this to be an accessible video that accurately and effectively explains the bioreactor’s role in the future of regenerative medicine and because there are no other comparable videos on cell culture with bioreactors, it is a useful education tool as well. For more video prize winners by scientists, students Cell Science Citizens. They are having fun, visit Professor Paul Knoepfler’s stem cell blog
Citizen Science to Try

After all this inspiration you may want to do some citizen science yourself. It is easier than you think and you will contribute to changing the world! [Zooniverse has projects for cells, the universe, animals, and much more](https://zooniverse.org/)

Perhaps you would like to experiment in the world of neuroscience? Try the [Eyewire](https://eyewire.nervecellmap.org/) where the power of humanity is working with machines to map the brain!

Keep tuned for projects you can be part of as we launch ThinkWell projects where citizens are at the heart of research and their voices are heard.