

Minutes (PART 2 - ILCOR Science meeting)

Item No	Description / Discussion
13.0	<p>Part 2 of Meeting opened at 1035. Bill Montgomery welcomed observers joining the meeting. Attendees (delegates and observers) as listed introduced themselves</p>
14.0	<p>Declarations of conflict of interest - None declared</p>
15.0	<p>Bill Montgomery outlined the process in the developing the Conference Planning Advisory Group. This group now disbanded as conference planning committee and executive now appointed. Key personnel for C2010 selected * Conference co-chairs for C2010 – David Zideman and Bob Hickey * Conflict of Interest – Jack Billi and Mike Shuster * E3 evidence guru – Peter Morley Vinay Nadkarni outlined the past, present and future time lines for C2010. Process of incorporating changes (ie: review the evidence on batch or a science dictates) General discussion followed and the time line as presented accepted in concept. David Zideman discussed the concept of video-conferencing to facilitate meetings. Agreed that this should be explored and further developed.</p>
16.0	<p>* Steering Committee Structure and Function: David Zideman presented an outline for the ILCOR organizational chart for both the ILCOR exec and conference planning committee. It was noted and agreed that the taskforce chairs should be included. It was also agreed that a conference co-ordinator to be appointed – possibly being funded from 2008 onwards. * Task forces: General discussion re taskforces was conducted. After short discussion Neonatal taskforce to be included as an ILCOR taskforce. Agreed. ID taskforce. David Rogers outlined the concept of developing a education / training / implementation taskforce. This would facilitate more of a focus of education science and implementation / translation of changes. Peter Morley and Jack Billi suggested that we needed to discuss the process before we could make this decision. First Aid Task Force: A brief discussion regarding this taskforce was undertaken. AHA have recommitted to undertaking this process. There was general support for this but not decision as to whether to include as ILCOR task force. Each council chair to notify co-chairs with there willingness to participate in this task force.</p>
17.0	<p>Conflict of Interest - Jack Billi outlined the proposed process for Conflict of Interest. Slide presentation provided specific detail. A series of recommendations regarding Col was made and these were accepted in principle.</p>
18.0	<p>CoSTR 2010: Universal guidelines? Vinay Nadkarni lead a discussion regarding the issue of universal / international guidelines and international science. Vinay Nadkarni compared and contrasted the various council guidelines for both G2000 and C2005. An extensive discussion on whether the output should be guidelines or consensus of science. Each member organization outlined their position on this matter. The discussion outlined issues of local / regional issues, lack of resources, implementation, acceptance of guidelines, legal status, future use, purpose of ILCOR. In general the consensus view was that we should continue with consensus on science but where possible provide treatment recommendations and these should be enhanced.</p>
19.0	<p>Revised Evidence Evaluation Process * Peter Morley outlined issues surrounding the previous process * Peter Morley then discussed possible work sheet flow for the 2010 process. There was further discussion as to Levels of Evidence. Various models were presented and discussed. This information had been previously circulated to delegates and observers. * Assessment of quality of individual studies. Peter Morley presented a revised version of the worksheet template. This was generally well received. Worksheet topic selection outline provided and discussed. Peter Morley suggested topic mapping may be useful to identify questions reviewed.</p>

	<p>* Taskforce chairs were announced. It was identified that a number of Col issues need to be resolved. It was also noted atht several gaps in task force chairs existed. Co-chairs to examine further and make recommendation.</p> <p>* Worksheet flow: - Peter Morley outlined further issues relating to worksheet. Feedback to Peter Morley and changes / suggestions.</p> <p>* LOE – Peter Morley provided further discussion re LOE providing several optrions / criteria. Judith Finn noted that we should consider clinical outcomes by default. This was agreed in principle. Further discussion as to the preferred LOE and a recommendation was made as to the one that's fits ILCOR needs best. It was agreed that the C2010 LOE criteria as presented by Peter Morley be adopted for the C2010 process.</p> <p>* Quality assessment: Peter Morley outlined a proposed mechanism that allows for quality assessment. A detailed discussion followed which revolved around identifying key criteria that indicates quality. The method proposed by Peter Morley was accepted in principle</p>
20.0	Day One Closed at 17:35
21.0	Day Two – Meeting reconvened at 07:45 Bill Montgomery welcomed all back to the meeting.
22.0	ENDNOTE: Peter Morley outlined that we would be using ENDNOTE as the reference manager. At this stage ENDNOTE 9 is current with ENDNOTE 10 available shortly. Tanya Semenko and Peter Morley will liaise.
21.0	Class or Recommendation: Peter Morley presented a short discussion regarding the Class of Recommendation. It was agreed that the Consensus document will not include Class of Recommendation. This may be dealt with by individual councils.
22.0	C2010 Process: Peter Morley outlined a further processes associated with the C2010 process. The selection of worksheet authors was outlined and agreed that these will be selected and subsequently invited. The issues of COI surrounding the worksheet authors would need to be co-ordinated by the COI chairs. Considerable discussion was devoted to multiple or combined worksheets. It was generally agreed that a unified worksheet if possible and then a combined summary could be produced. Teaching material: Peter Morley undertook to oversee the development of teaching / instructional materials related to the process. It was also agreed that early review and mentoring would be beneficial to all concerned. It was further agreed that the process to deal with controversial issues and non performers would need to be developed and ratified.
23.0	Authorship Peter Morley provided an detailed overview of the issues surrounding authorship and worksheet development. This discussion raised issues of publication and interaction with journals and academic credit for authors. This was identified as a complex issue and how to facilitate appropriate authorship. Jack Billi suggested developing a toolkit for translating worksheets into publications and secondly developing a mechanism for identifying worksheets though the internet. (ie google scholar) In principle agreed that this need to be progressed and discussion with Journal editors.
24.0	Worksheet Topics / Assessment: Peter Morley outlined the process for worksheet topics. This will need to be driven by the taskforce chairs. Old worksheets will need to be reviewed for quality and completeness. Peter Morley suggested a format for assessment of worksheets to assess need for review and assessing worksheets. It was further agreed to canvass each council regarding additional literature search strategies which may improve the yield. Specific deadlines need to achieved. These should be quick turn around times.
25.0	ECC Matrix Bob Hickey outlined a science matrix for consideration. Considerable discussion followed and it was agreed that this was useful template to ensure both vertical and horizontal integration of the topics and taskforces. It was noted that this would require further refinement and progression
26.0	Summary of progress

Peter Morley lead discussion of key points covered during the meeting

- * Worksheet flow – manuscript central
- * LOE - as agreed and the NHMRC (modified)
- * Assessing quality
- * Worksheets
- * Training

Specific questions and outputs discussed:

- * Guidelines: Semantics. Consensus on COSTR with as many TR as we can.
- * Worksheets: Hypothesis versus question (come up with consistent instructions)
- * Quality assessment guru: large proportion, checking on authors, check COI
- * Trial of inter-rater reliability of process (ideally compared with previous process)
- * Specific Q to authors: ensure look for info regarding harm, risks, cost implications etc
- * Worksheets should be in track changes format, accepted only by E3 or equivalent.
- * COI: specific Q regarding actual drugs, devices involved; at revision of Q point
- * Include points of COI in flow of worksheet submission process
- * Ensure educate to list outcomes if not available
- * Ensure feedback to authors re appropriateness of outcome chosen
- * Meta-analysis, need italics (or other approach) to discriminate (and separate list of quality assessment as well)
- * Work group regarding quality assessment. Need feedback from group regarding final decision on approach to quality (nil, structured, less structured). Need statement on how to deal with quality assessment of articles in previous worksheets (revision vs redo).
- * Importance of concealment as part of quality assessment (and all shown to affect outcome)
- * Clear description (eg. in summary statement with citation) of industry sponsorship.
- * Search strategy in clinical trials registry and if article not found, contact authors to ask if published
- Need info from Judith Finn regarding how to do this.
- * Circulate 2000 NHMRC document with definitions
- * Create Toolkit for development of peer reviewed publication (including Cochrane, as parallel track).
- * Ask editors regarding plan to make worksheets searchable (via medline, embase, ? Google Scholar). May be unrealistic.
- * Ask editors Resus and Circ (and others if necessary) re impact of separate publication of reviews on COSTR publication.
- * Ask editors Resus and Circ (and others journals) re potential for submission of reviews.
- * Need clear statement for inclusion regarding contribution of ILCOR etc in publication.
- * Improvements in readability of worksheet (more like CAT form) whenever possible.
- * Problems with use of Endnote in bibliography as fields created cause problems, need to give instructions to authors to avoid formatting problems during writing of COSTR.
- * Top 10-15 topics and ask individual councils to provide Class of recommendations.
- * Ask people not to work from AHA endnote database, but instead from smaller library (which would be submitted with worksheet).
- * Early review process to check for question, search strategies and planned inclusion and exclusion (though may change after review).
- * Authors invited, even if initial process is nomination.
- * Clear process for acknowledgement of assistance in authorship, and statement regarding potential conflicts of interest they might have.
- * Clear process for combination of worksheets. Early process to allow sharing of endnote libraries. *
- Mixed opinions but general support regarding need for separate development of worksheets, but ideally with some checking early to ensure same question, same articles retrieved and evaluated, same quality assessments. Iterative process with help of E3 and taskforce chairs to help develop COS and potential TR. Need to flag controversies early.
- * Consider development of more sophisticated discussion of controversies document that deals with more topics.
- * Explain to authors that final statements are draft only, and will need significant input from the taskforces and councils to develop further, before consensus reached (ie. not necessarily cut and paste COS or TR, and may change significantly).
- * Worksheets: hypothesis rather than question. Tell worksheet authors to look for harm, economic evaluation etc (not need to alter search strategy).
- * Broad search strategy (eg. major MeSH: heart arrest, CPR, defibrillators, ventricular fibrillation [and Embase equivalents]), then narrow using other terms (MeSH or just text words). More specific if doing Cochrane type review.

- * All chairs councils approached to ask regarding separate specific language search, to ensure that additional material not missed (eg Japanes for neonatal question).
- * Question development: from taskforces regarding algorithm (flow of management), from worksheets (using excel spreadsheet), and other specific areas of interest.
- * Matrix: specific leaders (\pm overlap with task force co-chairs, but part of worksheet review process for relevant topics), and possible conference around columns not rows. Stroke and ACS more like rows than columns.
- * Task force role to integrate across all areas.
- * Development quality for all types of questions, and lower levels of evidence (with Judith).
- * Concern regarding potential complexity of quality assessment process for all studies.
- * Need clearer separation of worksheets tables into supportive, neutral and opposing evidence.
- * Endnote: include field for LOE and quality.
- * Paeds: 45 old (and delete 15 but add more)
- * BLS: delete 3/47, not add new
- * ID: give back to taskforces, then review to consider.
- * ALS: divided into columns (matrix); suggest separate column (eg. reversible causes, specific scenarios). >50% questions need to be revised.
- * Consider posters eg. in Nov 2009 ILCOR meeting.
- * What are we telling people? Need to ask the relevant questions. Need clear process to deal with areas that need recommendations, but don't have evidence (within or outside of COSTR itself or possibly separate chapter).

27.0	<p>C2010 Process</p> <p>Bob Hickey lead discussion for how C2010 conference may look. It was proposed that it be a 3 day meeting followed by a 3 day writing meeting.</p> <p>3 days EE</p> <ul style="list-style-type: none"> Use Nov meeting Administrative review Posters Focus on important topics Must achieve COS Achieve treatment recommendations Time for taskforce to finalise consensus Set aside time for testing recommendations and finding holes <p>3 days writing</p> <ul style="list-style-type: none"> Type of document Editors Writing group Prep work for editorial board to shorten lock box time
28.0	<p>Next meeting.</p> <p>It was agreed that ILCOR and C2010 should meet twice yearly. It was moved that the next meeting will be held to coincide with the RESUS / AHA scientific sessions in Orlando Florida. (November 2007)</p> <p>Moved: Bob Hickey Seconded: Leo Bossaert CARRIED</p>
29.0	<p>There being no other business the meeting was closed at 15:20</p>

Next Meeting date	1 st and 2 nd November 2007
Location	Orlando Florida USA