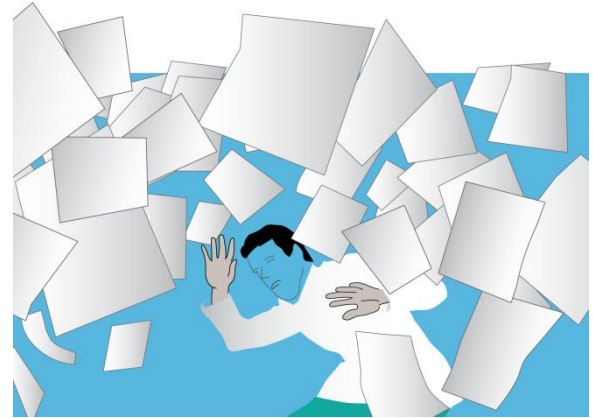


IR Reference Tool

A tool to map and summarize
the evidence base
on information retrieval for HTA

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Challenge



To stay up-to-date on the latest
developments within information
retrieval for HTA

Working Group of HTAi ISG on Information Resources

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Objective

To develop an **up-to-date** reference tool where current research evidence within information retrieval for HTA is **assembled** and **summarized**

The Tool is:

- An open access website
- A selection of up-to-date key papers presented in summarized overviews

The Tool is not:

- A methods handbook
- A comprehensive bibliography containing all published research evidence

Inclusion criteria

- Is the research question relevant to information retrieval for HTA?
- Does the paper provide most up-to-date evidence on a specific methodological issue?
- Does the paper include research findings of a completed scientific study or work?
- Are the methods described sufficiently?
- Are the research findings still valid?
- Are the results of the study or the project generalizable or usable to other HTA information specialists or transferable to other projects or studies?

A section of the new HTAi Vortal



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Evidence Based Information Retrieval

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Welcome to the IR Reference Tool, a tool that summarizes and maps the current research evidence within information retrieval for HTA. The tool is currently under development and will be launched in 2013.

Domain structure of the HTA Core Mode™, an on-going project to standardize the structure of HTA developed by EUnetHTA, has been selected to structure the Tool (see the list at the bottom).

A click on a domain name takes the user to a chapter summarizing the current research evidence within this respective domain. The reference list at the end of each chapter is linked to structured summaries of these relevant selected studies, and to a

[Search](#)

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The HTA Core Model (EUnetHTA) is used to structure the Tool:

- Health problem and current use of technology
- Description and technical characteristics of technology
- Safety
- Diagnostic accuracy
- Clinical effectiveness
- Costs and economic evaluation
- Ethical analysis
- Organizational aspects
- Social aspects
- Legal analysis



General methods

- Sources to search
- Designing search strategies
- Peer reviewing search strategies
- Documenting and reporting search process

Specific aspects of HTA

- Health problem and current use of technology
- Description and technical characteristics of technology
- [Safety](#)
- Diagnostic accuracy
- Clinical effectiveness
- Costs and economic evaluation
- Ethical analysis
- Organizational aspects
- Social aspects
- Legal analysis

Safety

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Introduction

The definitions and the terminology of safety used in HTA have not been standardized (1). One talks about side-effects, adverse events or adverse effects, complications, harms, risks and hazards, safety, tolerability and toxicity.

There are many different types of safety issues and there can be legitimate differences in the way an assessment of "safety" may be undertaken (2). Searching for information about harms can be problematic (1). Inadequate reporting and inconsistent terminology and indexing of harms data make the identification difficult.

Sources to search

Relying only on Medline is not recommended, as it is unlikely to be the most comprehensive source on adverse effects information (3).

A wide range of sources needs to be used for the search to be thorough and in order to provide the best results. (4). In a systematic review (3) and a case study on a drug (4) Golder and Loke identified a combination of sources and techniques that may provide the greatest amount of relevant adverse effects information:

- Embase
- Biosis Previews
- Derwent Drug File
- Science Citation Index
- Medline
- British Library Direct
- Medscape DrugInfo
- AHFS First
- Thomson Reuters Integrity
- Conference Papers Index
- Websites and registers of pharmaceutical companies
- Handsearching and reference checking

Tanon et al. (5) indicates CINAHL as a relevant source as well.

Designing search strategies

Even though no published adverse effects search filters seem to capture all relevant records, such filters may still be useful in retrieving adverse effects data (6).

- Subheadings seem to be particularly useful in identifying papers with adverse effects data in both Medline and Embase.
- The purpose of the search, topic under evaluation, resources available and anticipated gain in precision are factors one should take into consideration when applying such filters.

Systematic reviews of adverse effects should not be restricted to specific study types (7). The evidence indicates that there is no difference on average between estimates of harm in meta-analyses of RCTs as compared to observational studies.

Reference list

- (1) EUnetHTA Work Package 4. HTA Core Model™ for Diagnostic Technologies v. 1.0r; 2008. [[Full Reference](#)] [[Reference review](#)]
- (2) EUnetHTA Work Package 4. HTA Core Model™ for Medical and Surgical Interventions v. 1.0r; 2008. [[Full Reference](#)] [[Reference review](#)]
- (3) Golder S, Loke YK. Sources of information on adverse effects. Health Info Libr J 2010;27:176-190. [[Full reference](#)] [[Reference review](#)]
- (4) Golder S, Loke YK. The contribution of different information sources for adverse effects data. Int J Technol Assess Health Care 2012;28(2):133-137. [[Full reference](#)] [[Reference review](#)]
- (5) Tanon AA, Champagne F, Contandriopoulos AP, Pomey MP, Vadeboncoeur A, Nguyen H. Patient safety and systematic reviews: finding papers indexed in MEDLINE, EMBASE and CINAHL. Qual Saf Health Care 2010; 19(5): 452-61. [[Full reference](#)] [[Reference review](#)]
- (6) Golder S, Loke Y. The performance of adverse effects search filters in MEDLINE and EMBASE. Health Info Libr J 2012;29:141-151. [[Full reference](#)] [[Reference review](#)]
- (7) Golder S, Loke YK, Bland M. Meta-analyses of adverse effects data derived from randomised controlled trials as compared to observational studies: methodological overview. PLoS Med 2011;8(5):e1001026. [[Full reference](#)] [[Reference review](#)]

[[Full reference](#)] [[Reference review](#)]

Review of "Golder S, Loke YK. Sources of information on adverse effects. Health Info Libr J 2010;27:176-190"

Reviewer(s):

[Jaana Isojärvi](#)

Study Type:

Review

Short description:

Research has shown that most systematic reviews of adverse effects rely only on Medline, although it is unlikely to be the most comprehensive source on adverse effects information. The authors aimed to identify and summarize studies that have evaluated sources of information on adverse effects.

The results suggest that Embase, Derwent Drug File, Medline and industry submissions may be the sources of greatest amount of relevant references for adverse effects information. Also searching a wide range of sources may be a useful approach when conducting a thorough search.

Limitations:

Studies included in the review were inconsistent in outcome measures. They used different information sources which makes direct comparisons difficult. Recent research information is lacking and many of the studies are over 10 years old. Many potentially useful information sources are not covered in studies (e.g. search engines and industry clinical trial registers). Most studies used only the number of relevant references for comparison which is not a sufficient criterion to evaluate the database quality. Also, the cost of searching different sources has not been studied.

Full Reference:

[Sources of information on adverse effects: a systematic review.](#)

Related Chapters:

[Safety](#)

Tags: [Safety](#)

Submitted by [administrator](#) on Thu, 06/21/2012 - 07:47

Next steps

- Provide content to the website
- Recruit further content experts
- Release the content for comments
- Make the website searchable
- Provide RSS feeds or e-mail updates of new additions

When launched in 2013...

The IR Reference Tool will:

- Contribute to an evidence-based information retrieval practice
- Contribute to standardization of search methods
- Serve as a common platform for HTA information specialists in different countries