



University
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Development of SPIRIT-CONSORT surrogate extensions

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Disclosures

- No personal conflicts
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Reporting Guideline Development

OPEN ACCESS Freely available online

PLoS MEDICINE

Guidelines and Guidance

Guidance for Developers of Health Research Reporting Guidelines

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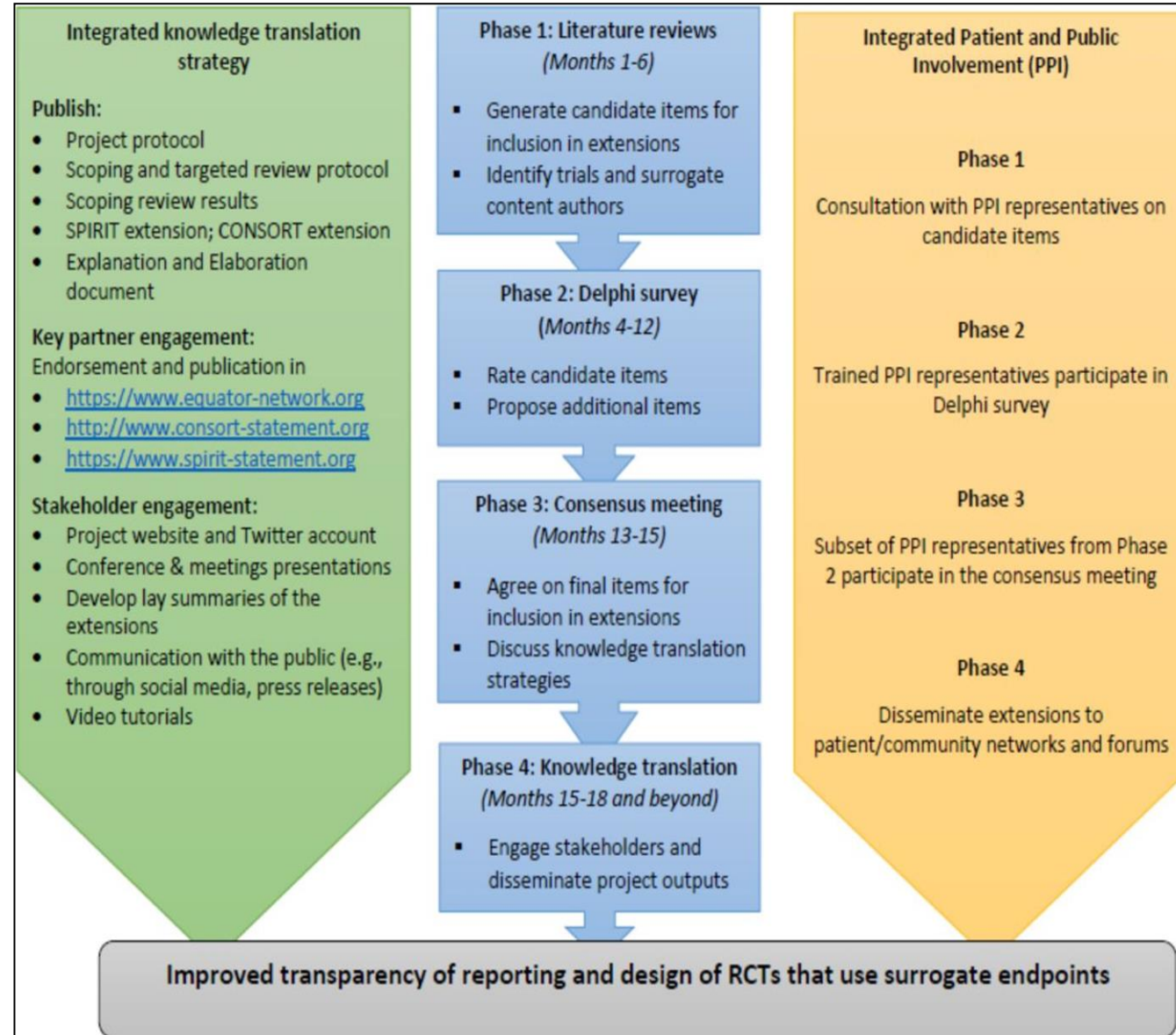
Search for reporting guidelines

Browse for reporting guidelines by selecting one or more of these drop-downs:

Study type: Please select... and Clinical area: Please select... and

Reporting guidelines for main study types

- Randomised trials
- CONSORT
- Extensions
- Observational studies
- STROBE



Phase 1: Literature reviews

► Scoping review

- Definitions
- Acceptability
- Limitations
- Guidance/advice in design and reporting

► Data from 90 records synthesised into 17 candidate items



Phase 1: Literature reviews

▶ Targeted review

- ▶ ~3500 trials and protocols published in last 5 years identified
- ▶ 1400 trial authors invited to participate in the Delphi survey
- ▶ Synthesis of the completeness of reporting in protocols and reports using surrogate primary endpoints

Phase 2: e-Delphi survey

- 212 registered and were eligible
 - 195 (92%) rated items in Round 1, 176 (83%) in Round 2
- Representation from 31 countries & >26 clinical/research areas
- Multistakeholder effort:
 - Clinicians, trial investigators, methodologists, statisticians, PPI partners, HTA experts, funding panel members, surrogate content experts, journal editors, regulatory assessor, ethics committee members, funding panel members
- Round 1 open from 24th August to 10th October 2022; and Round 2: 31st October to 11th December 2022.

Consensus definition

- ▶ As per the project protocol, consensus was defined as follows:
 - ▶ Consensus for inclusion: $\geq 70\%$ participants scoring 7-9 and $< 15\%$ participants scoring 1-3
 - ▶ Consensus for exclusion: $\geq 70\%$ participants scoring 1-3 and $< 15\%$ of participants scoring 7-9
 - ▶ No consensus for inclusion or exclusion: failure to achieve both the above

Rated items and consensus

- The 17 items identified from scoping review refined to 13 CONSORT items and 9 SPIRIT items
 - Rating for CONSORT and SPIRIT items done in a single Delphi survey
 - One more item for both CONSORT and SPIRIT added in Round 2
- **10 CONSORT and 7 SPIRIT items** achieved consensus for inclusion after Delphi Round 2
- 4 CONSORT and 3 SPIRIT items did not reach consensus – discussed in Consensus meeting

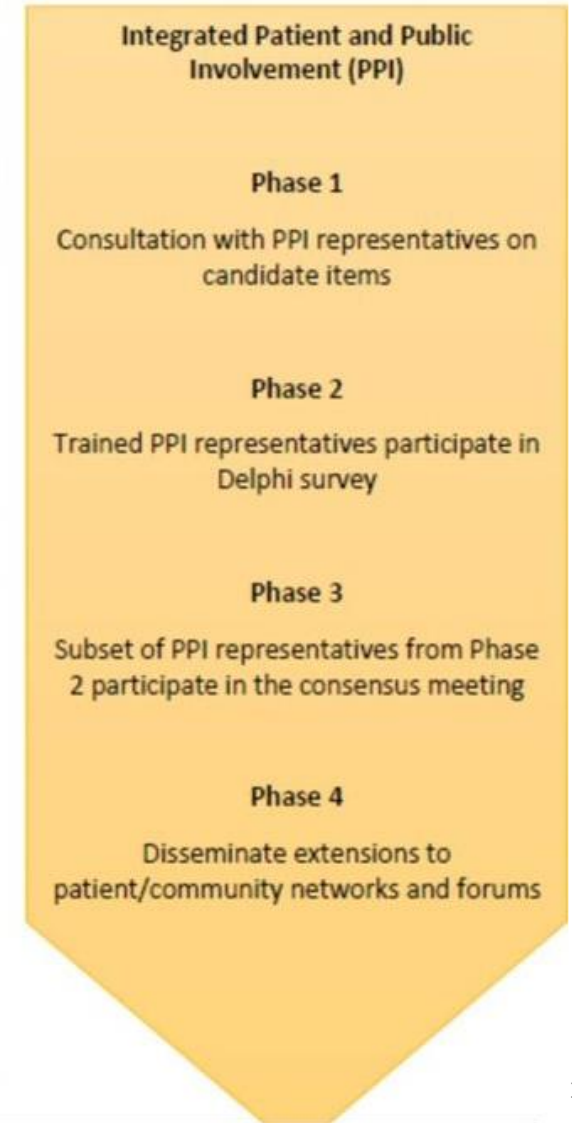
Consensus meeting

- ▶ Hybrid meeting on 13th-14th March 2023
- ▶ 33 delegates (10 in Glasgow + 23 virtual), 4 observers
- ▶ Discussion and vote on 3 for SPIRIT and 4 for CONSORT items
- ▶ Consensus: 5 for inclusion and 2 for exclusion
- ▶ Fine tune items that reached consensus for inclusion



Integration of PPI in the project

- Virtual learning workshop on 15th August 2022
- 19 PPI partners attended
- Interactive learning on what are surrogate endpoints and project rationale
- Most of PPI partners attending workshop participated in Delphi survey
- Four joined the Consensus Meeting



Phase 4: Knowledge translation

Integrated knowledge translation strategy

Publish:

- Project protocol
- Scoping and targeted review protocol
- Scoping review results
- SPIRIT extension; CONSORT extension
- Explanation and Elaboration document

Key partner engagement:

Endorsement and publication in

- <https://www.equator-network.org>
- <http://www.consort-statement.org>
- <https://www.spirit-statement.org>

Stakeholder engagement:

- Project website and Twitter account
- Conference & meetings presentations
- Develop lay summaries of the extensions
- Communication with the public (e.g., through social media, press releases)
- Video tutorials

Need for better reporting of trials with surrogate endpoints: SPIRIT|CONSORT-SURROGATE extensions

Oriana Ciani,¹ Anthony Manyara,² Rod S Taylor³

Opinion

Surrogate endpoints in trials—a call for better reporting

BMJ 2022 ; 378 doi: <https://doi.org/10.1136/bmj.o1912> (Published 29 July 2022)
Cite this as: *BMJ* 2022;378:o1912

Article Related content Metrics Responses

Oriana Ciani, associate professor of practice¹, Anthony M Manyara, research assistant², Rod S Taylor, professor of population health research³

Ciani et al. *Trials* (2022) 23:991
<https://doi.org/10.1186/s13063-022-06904-7>

COMMENTARY

Open Access

Surrogate endpoints in trials: a call for better reporting

Oriana Ciani¹, Anthony M. Manyara², An-Wen Chan³, Rod S. Taylor^{4*} and on behalf of the SPIRIT-SURROGATE/CONSORT-SURROGATE project group

alzheimer's association

Alzheimer's Disease

Translational Research & Clinical Interventions

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A call for better reporting of trials using surrogate primary endpoints

Anthony Muchai Manyara✉, Oriana Ciani, Rod S. Taylor

First published: 26 July 2022 | <https://doi.org/10.1002/trc2.12340>

JOURNAL ARTICLE

Surrogate end points in cardio-thoracic trials: a call for better reporting and improved interpretation of trial findings

Oriana Ciani✉, Anthony Muchai Manyara, Rod S Taylor

European Journal of Cardio-Thoracic Surgery, Volume 62, Issue 4, October 2022, ezac449,
<https://doi.org/10.1093/ejcts/ezac449>

Trials

September 2022 Article history ▾

Open access

Protocol






BMJ Open Scoping and targeted reviews to support development of SPIRIT and CONSORT extensions for randomised controlled trials with surrogate primary endpoints: protocol

Anthony Muchai Manyara ¹, Philippa Davies,² Derek Stewart,³ Valerie Wells,¹ Christopher Weir ⁴, Amber Young ², Rod Taylor,^{1,5} Oriana Ciani⁶

Open access

Protocol

BMJ Open Protocol for the development of SPIRIT and CONSORT extensions for randomised controlled trials with surrogate primary endpoints: SPIRIT-SURROGATE and CONSORT-SURROGATE

Anthony Muchai Manyara ¹, Philippa Davies,² Derek Stewart,³ Christopher J Weir ⁴, Amber Young ², Nancy J Butcher ^{5,6}, Sylwia Bujkiewicz,⁷ An-Wen Chan,^{8,9} Gary S Collins ¹⁰, Dalia Dawoud,¹¹ Martin Offringa ⁶, Mario Ouwens,¹² Joseph S Ross,^{13,14} Rod S Taylor,^{1,15} Oriana Ciani¹⁶

Lancet eClinicalMedicine
2023;65: 102283

Articles

A framework for the definition and interpretation of the use of surrogate endpoints in interventional trials



Oriana Ciani,^{a,ap} Anthony M. Manyara,^{b,ap} Philippa Davies,^c Derek Stewart,^d Christopher J. Weir,^e Amber E. Young,^f Jane Blazeby,^{c,f,g} Nancy J. Butcher,^{h,i} Sylwia Bujkiewicz,^j An-Wen Chan,^{k,l} Dalia Dawoud,^m Martin Offringa,^{h,n} Mario Ouwens,^o Asbjorn Hróbjartsson,^{p,q} Alain Amstutz,^r Luca Bertolaccini,^s Vito Domenico Bruno,^t Declan Devane,^{u,v} Christina D. C. M. Faria,^w Peter B. Gilbert,^x Ray Harris,^d Marissa Lassere,^y Lucio Marinelli,^{z,aa} Sarah Markham,^{ab} John H. Powers,^{ac} Yousef Rezaei,^{ad,ae,af} Laura Richert,^{ag} Falk Schwendicke,^{ah} Larisa G. Tereshchenko,^{ai} Achilles Thoma,^{aj} Alparslan Turan,^{ak} Andrew Worrall,^d Robin Christensen,^{al} Gary S. Collins,^{am} Joseph S. Ross,^{an,ao} and Rod S. Taylor^{b,*,ap}



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