

Top Research Priorities in Liver and Gallbladder Disorders in the UK

Gurusamy et al. (2019)

<https://doi.org/10.1136/bmjopen-2018-025045>

For which topic were research priorities identified?

gallbladder disorders and liver disorders

In which location was the research priority setting conducted?

Europe - United Kingdom

Why was it conducted at all?

Failure to address treatment uncertainties by research can lead to significant suffering and deaths. It is important that research in any field of medicine takes into account the shared interests of patients, carers and clinicians. However, there is a mismatch between research questions that are considered important jointly by patients, carers and healthcare professionals and the research performed in many fields of medicine.

What was the objective?

to work with patients, their carers and healthcare professionals treating them to identify uncertainties about the diagnostic tests and effects of prevention and treatments for non-alcohol-related liver and gallbladder disorders, to agree by consensus a prioritized list of those uncertainties for research, to publicize the results and process, and to take the results to research commissioning bodies to be considered for funding and researchers to encourage them to submit grant applications addressing these uncertainties

What was the outcome?

a ranking list of 10 research questions

How long did the research prioritization take?

No information provided.

Which methods were used to identify research priorities?

JLA method

How were the priorities for research identified exactly?

Step 1: setting up PSP: formation of partnership, steering committee was formed, establishment of scope: steering committee members discussed and decided scope. Step 2: identifying potential research questions: via survey and searching UK Database of Uncertainties about the Effects of Treatments (UK DUETs), research recommendations in high-quality systematic reviews and clinical guidelines, and registers of ongoing research, survey resulted in 209 unique research questions, in addition 219 unique questions were identified from literature. Step 3: data processing: overall 428 unique valid research questions were identified, none of them were answered by recent high-quality systematic reviews, research questions were then refined, reviewed and combined. Step 4: interim ranking: participants were asked to select top 10 questions, total of 48 research priorities were identified. Step 5: 3-rounds of Delphi: with shortlist of 48 research priorities, participants were asked to rate importance.

Which stakeholders took part?

Patients, carers and healthcare professionals. Survey: 126 patients, carers, and those at risk of developing non-alcohol-related liver and gallbladder disorders, and 13 healthcare professionals. Delphi: 33 participants in all 3 rounds: 17 healthcare professionals (6 hepatologists, 4 surgeons, 2 hepatology nurses, 1 general practitioner, 1 hepato-pancreato biliary surgery nurse, 1 organ preservation biologist, 1 dietician, 1 pharmacist) and 16 patients, carers and general public.

How were stakeholders recruited?

The Delphi panel was formed by using 'snowballing' sampling methods and by contacting people through emails, online liver patient forums (British Liver Trust Health Unlocked forum) and newsletter.

Were stakeholders actively involved or did they just participate?

Stakeholders not only participated but were also actively involved in the research prioritization process: They were part of a steering group. The steering group consisted of 10 members. The members decided on the scope and were involved in interim ranking.