

Prioritizing Research for Patients Requiring Surgery in Low- And Middle-Income Countries

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For which topic were research priorities identified?
surgery

In which location was the research priority setting conducted?
international

Why was it conducted at all?
Previous research prioritization exercises have been limited to individual LMICs. To improve global provision for, and outcome from, surgically treated diseases, a structured process is required to select topics objectively for future large-scale international research studies. Embedding front-line stakeholders at every stage of the process will ensure clinical relevance to both patients and healthcare systems.

What was the objective?
to identify and prioritize collaboratively derived research questions that will address the areas of greatest unmet need for patients with surgical conditions in LMICs

What was the outcome?
a list of 3 research areas

How long did the research prioritization take?
April 2017 - November 2017

Which methods were used to identify research priorities?
Delphi; workshop

How were the priorities for research identified exactly?
Step 1: Delphi round 1: via discussion group: collecting research topics representing the greatest needs in LMIC surgical practice, all identified topics were then categorized into thematic domains, resulting in 32 research topics along 6 broad domains. Step 2: Delphi round 2: survey: participants were asked to rate each topic, then topics were ranked based on mean score, results were discussed at teleconference, steering committee selected eight research topics to proceed based on perceived feasibility. Step 3: Delphi round 3: survey: participants were asked to rate each topic along criteria, steering group reviewed and discussed results and selected top 3 topics. Step 4: multidisciplinary 2-day workshop: to develop specific research proposals

Which stakeholders took part?
Surgeons and anaesthetists, patients, expert methodologists. Delphi round 1: 141 participants: 119 participants from 40 LMICs and 75 participants from 22 HICs. Workshop: 67 participants.

How were stakeholders recruited?
The second voting was e-mailed to individuals who had previously participated in either of two international surgical cohort studies. In addition, the survey was disseminated through social media, including Twitter and Facebook.

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 Hub and Spoke leads, and representatives of the NIHR Global Health Research Unit on Global Surgery, including surgeons, anaesthetists, public health physicians and methodologists with LMIC research experience. The members identified research topics and discussed voting results. The members met via teleconferences and held email discussions.