

# Research Priorities for Shoulder Surgery: Results of the 2015 James Lind Alliance Patient and Clinician Priority Setting Partnership

Rangan et al. (2016)

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## For which topic were research priorities identified?

shoulder surgery

## In which location was the research priority setting conducted?

Europe - United Kingdom

## Why was it conducted at all?

Shoulder pain is the third most common musculoskeletal symptom suffered by patients in primary care with 2.4% adult prevalence for general practitioner (GP) consultations each year in the UK. As such, referrals to secondary care are increasing and, with employment implications, cost estimates of £100 million have been suggested. Some shoulder operations have increased 700% in 8 years. With most aspects of health provision, there remains a lack of high-level evidence for management pathways and therefore uncertainty still exists about some aspects of shoulder surgery, such as when the best time to operate on patients with shoulder problems is, which patients need surgery and which patients are best treated non-operatively.

## What was the objective?

to run a UK based James Lind Alliance Priority Setting Partnership for 'Surgery for Common Shoulder Problems' and to identify the unanswered questions about surgical treatments for common shoulder problems

## What was the outcome?

a ranking list of 10 research questions

## How long did the research prioritization take?

January 2014 - July 2015

## Which methods were used to identify research priorities?

JLA method

## How were the priorities for research identified exactly?

Step 1: setting up PSP: identification and invitation of potential partners, steering group established, initial stakeholder meeting and awareness raising. Step 2: identifying treatment uncertainties: survey asking for common shoulder problems, 652 questions submitted. Step 3: data processing: refining questions, resulting in 49 collated indicative questions. Step 4: interim ranking: survey with 49 questions asking participants to indicate yes (important), no (not important) and unsure for each question, resulting in shortlist of 25 questions. Step 5: final prioritization: workshop: group discussions and plenary sessions

## Which stakeholders took part?

UK shoulder patients, carers and clinicians involved in treating patients with shoulder pain and shoulder problems. Survey: 371 participants. Interim ranking: steering group.

## How were stakeholders recruited?

The survey was distributed via partner organizations.

## 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 patients, physiotherapists, GPs, shoulder surgeons, anesthetists, pain control experts, orthopaedic nurses, and academic clinicians. The members were involved in all steps.