

Collaborating and sharing resources to support critical appraisal training across the LIHNN network



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- Critical appraisal skills are valuable even if not holding training sessions!

- The need for reinsurance..

I was fortunate..

- My predecessor Tracey Pratchett had already created and delivered a lesson plan.
- I was able to attend two of Michelle Maden's critical appraisal sessions.
- I was able to test what I'd learnt in several one-to-one sessions.

- But for various reasons, I still needed reassurance..
- This is a normal response..

John Gale's article (Issue 49, Autumn 2015)

Pain free critical appraisal (you can even enjoy it!)

Like 'service review,' and 'costings framework,' 'critical appraisal,' is a phrase that can send a shudder down the average librarian's spine.

Many – perhaps most – librarians did their degrees in arts subjects so the prospect of tangling with standard deviations, forest plots and meta-analysis can be a daunting one; particularly when the people we are teaching might know a lot more about them than us.

I teach a couple of sessions on critical

points up for discussion later and, even better, *it didn't involve any maths.*

Having been to the LIHNN Presentation Skills course on the 12th of June I was aware that I can have a deadpan, slightly Jack-Dee-style delivery. This actually works quite well for more humorous material but can be a bit monotonous for more serious topics. One of the tips I gleaned from the Presentation Skills course was to break things up a bit by getting the class to contribute, so after a quick introduction to the themes of the course I got them talking again – this

I followed this with an example taken from

Evidence-based practice workbook by Paul Glasziou, Chris Del Mar and Janet Salisbury (2nd ed) Blackwell, 2007. I found this book really useful when preparing the course, not least because it contains potted examples of RCTs you can get the class working through. This particular example concerned a drug called Flecainide which was found to be brilliant at stopping heart arrhythmia. It was enthusiastically adopted in the U.S. until the rather more relevant outcome of patients not

Relative and absolute risk



Confidence Intervals



Relative and absolute risk



(Taken from John Gale's training slides)

CATNiP



The screenshot shows a workspace interface with a pink header. At the top left, there are tabs for 'Wiki' and 'Pages & Files'. A search bar on the right says 'Search this workspace'. The main content area is titled 'VIEW' and 'CATNiP'. It shows the page was last edited by Michelle Maden 6 years, 7 months ago. There is a black silhouette of a cat on the left and the Edge Hill University Learning Services logo on the right. The main heading is 'Welcome to CATNiP: Critical Appraisal Toolkit Navigating into Practice'. Below this is a paragraph explaining the wiki's purpose. A section titled 'Critical appraisal resources on the wiki include:' is followed by a bulleted list of resources. Another paragraph describes the toolkit's use. A red text block requests feedback. Contact information for Michelle Maden is provided. A disclaimer is at the bottom. On the right sidebar, there are three panels: 'Navigator' with a tree view of folders (Adding to wiki, Exercises, Facilitation skills, Resources, Training, CATNiP), 'SideBar' with 'Critical Appraisal Resources' and 'Exercises' lists, and 'Recent Activity' showing recent edits and comments.

Wiki Pages & Files Search this workspace

VIEW

CATNiP

last edited by Michelle Maden 6 years, 7 months ago Page history



Welcome to CATNiP: Critical Appraisal Toolkit Navigating into Practice

The CATNiP wiki has been developed to supplement the LiHNN Critical Appraisal Training Workshops. It aims to provide support and resources for those intending to deliver critical appraisal training.

Critical appraisal resources on the wiki include:

- Links to online training and workshops to improve your own critical appraisal knowledge
- Download exercises to use in your training sessions
- Links to critical appraisal checklists and databases containing pre-appraised articles
- Advice on setting up your own critical appraisal training and facilitation tips
- Critical appraisal bibliography

The toolkit allows you to download and use the resources in your own training sessions. It allows you to design your own workshops by providing the background materials and exercises for you to build up a workshop suited to the level of your end-users. It does not provide powerpoint slides with pre-prepared presentations. Use the Navigator on the right-hand sidebar to locate the resources.


Please note this is a work in progress and the wiki will be moving to the new LiHNN wiki platform shortly.

Your feedback on the CATNiP resources is vital to determine whether your resource and support needs are being met and to identify further requirements. For example if you have used any of the exercises on this site please let us know, it will give us an idea of how useful certain aspects are. Comments may be left on each page visited, simply scroll down to the bottom of each page, alternatively click [here](#) to add your feedback.

If you would like to get involved in contributing to the wiki please contact Michelle Maden: madenm@edgehill.ac.uk

Disclaimer: Every effort has been made to ensure that the information supplied is accurate, current and complete. No responsibility can be accepted for any action taken on the basis of this information.

Comments (2)

 **Anne Gray** said
at 10:54 am on Dec 9, 2010

Navigator

- Adding to wiki
- Exercises
- Facilitation skills
- Resources
- Training
- CATNiP

Pages Files options

SideBar






Critical Appraisal Resources

- [Critical Appraisal Bibliography](#)
- [Critical Appraisal Checklists](#)
- [Critical Appraisal Checklists Locator](#)
- [Critical Appraisal Databases](#)
- [Critical Appraisal Presentations](#)
- [Glossaries](#)

Exercises

- [RCTs: Allocation Concealment](#)
- [RCTs: Per-protocol analysis](#)
- [Statistics: Forest plots](#)
- [Statistics: P-values](#)
- [Statistics: Relative risk and absolute risk reduction](#)
- [Study Designs: Cohort Studies](#)
- [Study Designs: Identify the Study Design](#)
- [Study Designs: Identify the Abstract](#)
- [Study Designs: Levels of Evidence](#)

Recent Activity

-  **Critical Appraisal Checklists**
edited by Michelle Maden
-  **Critical Appraisal Databases**
edited by Michelle Maden
-  **Critical Appraisal Databases**
edited by Michelle Maden
-  **Study Design: Identify the Study Design**
commented on by jill.rutland@nhs.net
-  **Critical Appraisal Databases**

Introduction to Critical Appraisal

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The
Library

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Patient care
is what
drives us...
Helping you
to help them

Aim to support critical appraisal:

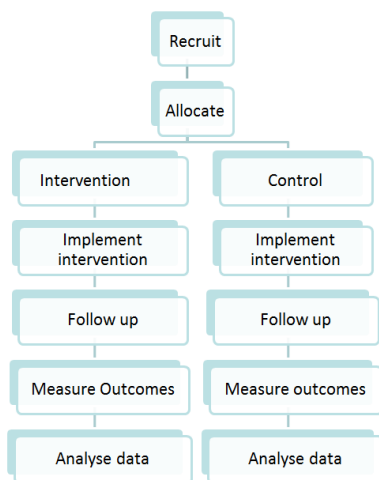
- Identifying the most appropriate study designs
- Discuss the occurrence of bias in research
- Some key statistical terminology
- Attendance at journal club

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Patient care
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Current CA session adapted from Tracey Pratchett's original lesson plan.

ASCOT trial

- A great example to use for 'measurement of effectiveness' calculations, to look at randomisation, confounders etc.
- Generates interesting discussions about statins.

Prevention of coronary and stroke events with atorvastatin in hypertensive patients who have average or lower-than-average cholesterol concentrations, in the Anglo-Scandinavian Cardiac Outcomes Trial--Lipid Lowering Arm (ASCOT-LLA): a multicentre randomised controlled trial.

Sever PS¹, Dahlöf B, Poulter NR, Wedel H, Beevers G, Caulfield M, Collins R, Kjeldsen SE, Kristinsson A, McInnes GT, Mehlsen J, Nieminen M, O'Brien E, Ostergren J; ASCOT investigators.

⊕ Author information

Abstract

BACKGROUND: The lowering of cholesterol concentrations in individuals at high risk of cardiovascular disease improves outcome. No study, however, has assessed benefits of cholesterol lowering in the primary prevention of coronary heart disease (CHD) in hypertensive patients who are not conventionally deemed dyslipidaemic.

METHODS: Of 19342 hypertensive patients (aged 40-79 years with at least three other cardiovascular risk factors) randomised to one of two antihypertensive regimens in the Anglo-Scandinavian Cardiac Outcomes Trial, 10305 with non-fasting total cholesterol concentrations 6.5 mmol/L or less were randomly assigned additional atorvastatin 10 mg or placebo. These patients formed the lipid-lowering arm of the study. We planned follow-up for an average of 5 years, the primary endpoint being non-fatal myocardial infarction and fatal CHD. Data were analysed by intention to treat.

FINDINGS: Treatment was stopped after a median follow-up of 3.3 years. By that time, 100 primary events had occurred in the atorvastatin group compared with 154 events in the placebo group (hazard ratio 0.64 [95% CI 0.50-0.83], $p=0.0005$). This benefit emerged in the first year of follow-up. There was no significant heterogeneity among prespecified subgroups. Fatal and non-fatal stroke (89 atorvastatin vs 121 placebo, 0.73 [0.56-0.96], $p=0.024$), total cardiovascular events (389 vs 486, 0.79 [0.69-0.90], $p=0.0005$), and total coronary events (178 vs 247, 0.71 [0.59-0.86], $p=0.0005$) were also significantly lowered. There were 185 deaths in the atorvastatin group and 212 in the placebo group (0.87 [0.71-1.06], $p=0.16$). Atorvastatin lowered total serum cholesterol by about 1.3 mmol/L compared with placebo at 12 months, and by 1.1 mmol/L after 3 years of follow-up.

INTERPRETATION: The reductions in major cardiovascular events with atorvastatin are large, given the short follow-up time. These findings may have implications for future lipid-lowering guidelines.

Reboot CATNiP as a LIHNN resource?

- Boost confidence
- Reassure
- Provide examples:

Lesson plans

Journal club – pre-appraised articles and notes for different clinical groups