

Most of the Chilean clinical research does not address locally-prioritised topics: First steps towards an evidence-informed research agenda

Mapping Chilean clinical research: a protocol for a scoping review and multiple evidence gap maps

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Background

- Funding agencies should look for projects addressing prioritised research topics, while being aware of population needs, cost-effectiveness aspects, and methodological quality.
- In Chile, no local diagnosis regarding recent clinical research that might inform prioritisation for funding allocation has been conducted.
- Mainly based on their burden, the Chilean Ministry of Health has prioritised 85 health problems through the ‘General Regime of the Health Guarantees Act’ (GES, according to its acronym in Spanish).

Objectives

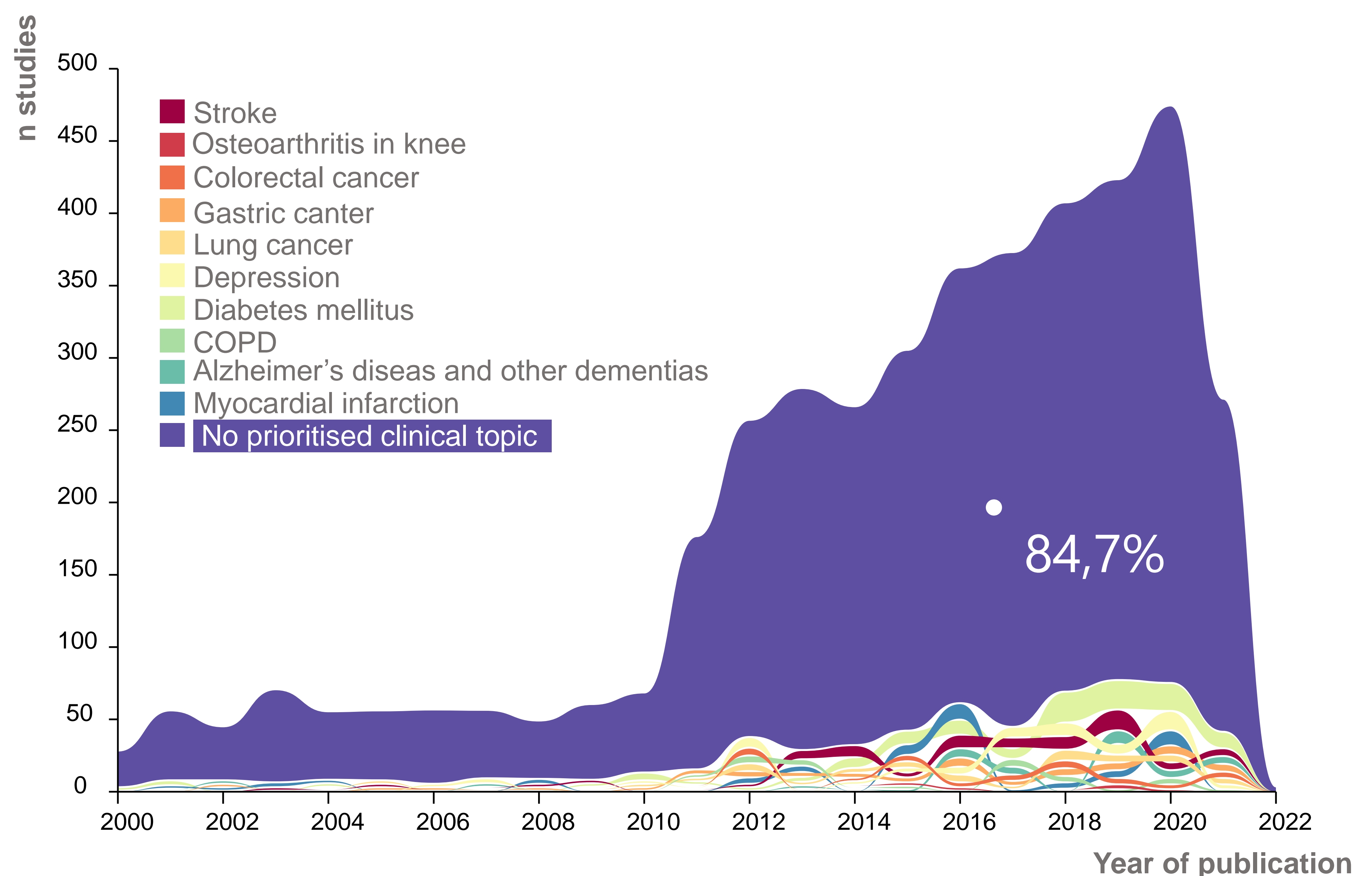
- To comprehensively identify and classify the Chilean clinical research studies from 2000 onwards.
- To characterise their design, health topic, authorship and affiliations—in preparation for identifying gaps of evidence in the main prioritised local health conditions sorted by the burden of disease.

Methods

- We conducted a scoping review.
- We searched MEDLINE, Embase, PsycINFO, CINAHL, LILACS, and WoS, and performed hand searches aiming to retrieve all studies conducted in Chile or by authors whose affiliations were based in Chile.
- We excluded narrative reviews, opinion pieces, protocols, etc.

Preliminary results

- After deduplication, we screened **56,283** studies by title and abstract, of which **24,510** are being assessed for eligibility. To date, we have completed the **82.5%** of the selection process (**12,604** included studies).
- So far, we have performed data extraction and analysis on **3,987** included studies, of which **84,7%** addressed no prioritised topics.



Future challenges

- We will elaborate evidence matrices for each condition selected from those defined under GES criteria.
- To elaborate the evidence gap maps, we will consider prioritised interventions and core outcome sets (COS).

