

## Impact of the Restoring Invisible & Abandoned Trials (RIAT) initiative on Cochrane evidence products Background

The Restoring Invisible & Abandoned Trials (RIAT) initiative is an international effort to tackle bias in the way research is reported. Cochrane should pay attention to and benefit from this project.

## **Objectives**



To identify the Cochrane evidence products directly concerned by two trials, one on evolocumab and the other on plasma rich in growth factors (PRGF), recently restored through RIAT projects, and also explore potential changes to be implemented.

## Methods

Two searches in the 'All Text' box of the Cochrane Library were performed on 15/02/2023 using

### "evolocumab" and "PRGF" as search terms.

All identified results were screened looking for Cochrane products including the original trials (FOURIER [doi:10.1056/NEJMoa1615664] and BTI-01-EC/07/ART [doi:10.1016/j.arthro.2012.05.011])

Following the restored version of both original trials by RIAT researchers (doi:10.1136/bmjopen-2021-060172; doi:10.1186/s13063-022-07049-3), some areas in need of updating were highlighted.

### Results

**RESULTS OF THE COCHRANE PRODUCTS INCLUDING FOURIER AND BTI-01-EC/07/ART** 

### **COCHRANE PRODUCTS LINKED TO FOURIER:**

PCSK9 monoclonal antibodies for the primary and secondary prevention of cardiovascular disease (Review)

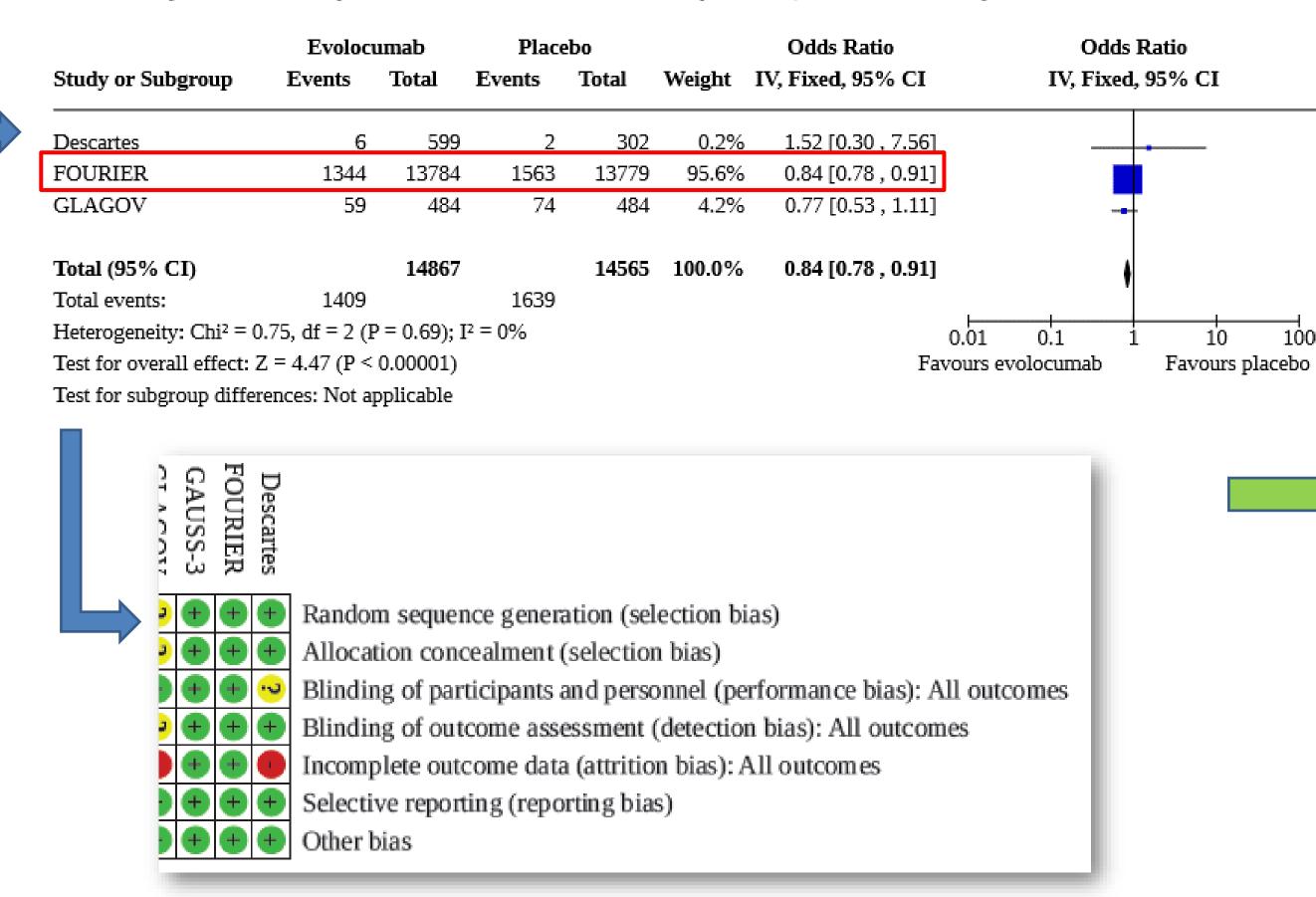
Schmidt AF, Carter J-PL, Pearce LS, Wilkins JT, Overington JP, Hingorani AD, Casas J. Cochrane Database of Systematic Reviews 2020, Issue 10. Art. No.: CD011748. DOI: 10.1002/14651858.CD011748.pub3.

Analysis 2.1. Comparison 2: Evolocumab versus placebo, Outcome 1: Any cardiovascular disease

**PCSK9** inhibition for primary prevention of ischaemic heart disease in heterozygous familial hypercholesterolaemia (Protocol)

Ryan A, Nevitt SJ, Byrne CD, Cook P. Cochrane Database of Systematic Reviews 2018, Issue 1. Art. No.: CD012917. DOI: 10.1002/14651858.CD012917.

Cochrane Clinical Answers



#### **Question:**

#### What are the effects of PCSK9 monoclonal antibodies for preventing cardiovascular disease?

Adarsh Gupta 24 November 2020

https://doi.org/10.1002/cca.3409

#### **Clinical Answer:**

respectively). The analysis for the incidence of cancer included only 3806 participants and the result was imprecise. Highcertainty evidence shows that evolocumab also reduced the number of people who experienced a cardiovascular event (97 vs 113 per 1000 people), MI (34 vs 46 per 1000 people), or stroke (15 vs 19 per 1000 people), with little to no effect on mortality. Risk of developing type 2 diabetes did not appear to be increased with evolocumab (based on 29,433 participants); no trials reported on

development of hypertension or incidence of cancer.

This was contradicted by the subsequent published restored trial based on its Clinical Study Report, which will likely lead to not being categorized as low risk in 'Reporting' and 'Other bias' domains.

### **COCHRANE PRODUCTS LINKED TO <u>BTI-01-EC/07/ART</u>:**

Autologous blood product injections including platelet-rich plasma for osteoarthritis of the knee (Protocol)

Both ongoing protocols identified are expected to consider the restored trials for inclusion.

Whittle SL, Johnston RV, McDonald S, Paterson KL, Buchbinder R. Cochrane Database of Systematic Reviews 2019, Issue 5. Art. No.: CD013341. DOI: 10.1002/14651858.CD013341.

## Conclusions

In the examples above, the certainty of evidence would likely be downgraded when restored versions of trials are considered.

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Cochrane reviews including restored trials are in need of a rapid update to reflect the best available evidence, particularly when restored trials had a major weight on their reviews.

In parallel, Cochrane Central could link restored and original versions of trials to assist authors with the search and identification of restored trials.

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