

Identify, Measure and Value: Guidelines for Reporting on Interventions (TIDieR)

Anyone who has attended one of the CREST health economics workshops will undoubtedly have heard one of us say that the key steps in undertaking an economic evaluation are being able to identify, measure and value the costs and outcomes. Whether such analyses are conducted alongside clinical trials, or once trials have been completed, it is crucial that in order to evaluate the effectiveness or cost-effectiveness of an intervention, everyone is clear on precisely what has been done, to whom, how often, for how long and to what extent. The Template for Intervention Description and Replication (TIDieR) checklist and guide (Hoffmann et al 2014) builds on the CONSORT/SPIRIT statements and is designed to improve the completeness of reporting. It provides a guide to how information on interventions could be presented to improve reporting by authors, and importantly the ability of others to use that information.

TIDieR comprises 12 items describing the intervention (*item names are shown in bold*):

- **Name** of the intervention.
- **Why** it was given (rationale).
- **What** was given in terms of the materials?
- **What** was given in terms of the procedures for delivery?

- **Who provided** the intervention?
- **How** was the intervention delivered?
- **Where** was the intervention delivered?
- **When and how much** (eg. duration, dose) of the intervention was provided?
- Was there **Tailoring** of the intervention (targeting, titrating)?
- Were there **Modifications** during the study?
- What were the planned measures of **How well** intervention adherence or fidelity was met?
- What were the actual measures of **How well** intervention adherence or fidelity was met?

For a researcher seeking to understand the details of a study's interventions, whether it's for the purposes of developing policy, replication or conducting an economic evaluation say, the use of the TIDieR checklist will facilitate improved information availability and consistency. Being able to identify and measure how patients are treated in a study should therefore be easier if that information is being provided in a comprehensive and consistent manner. A link to the TIDieR publication is available under "Recent Papers of Interest" through the CREST website at:

<http://cfsites1.uts.edu.au/chere/crest/>

Contact the Cancer Research Economics Support Team:
<http://www.chere.uts.edu.au/crest>

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CREST Workshops

At the beginning of March, CREST hosted a workshop; *Developing and Applying Models in Economic Evaluations of Cancer*. 20 participants – including clinicians, trial group Executive officers, clinical trial researchers – representing 11 CTGs attended the two day workshop to gain hands-on experience in building an economic model for use in evaluating a health care intervention.

Participants had the opportunity to hear about the rationale for developing models, but most importantly to gain hands-on experience with a widely used modelling package to build and evaluate two types of economic models (a decision tree

and a Markov model). This not only exposed participants to a new piece of software, but also to the logic behind model building – allowing some to start building their own models during the two day course! The engagement and feedback from participants was positive, and there are plans to offer this workshop again in 2015.

The next CREST workshop is for consumer representatives of the Trial Groups, and is to be held in Sydney on April 14th. This workshop is for consumer representatives who would like to gain an insight into how health economics fits with clinical trials and the role it plays in

making health care available, in particular pharmaceuticals and medical services. A repeat of this workshop will be run in Melbourne on July 16th.

Finally, the *Understanding Health Economics in Cancer Research* workshops will continue in 2014. The first workshop is planned for June 17th and will be held in Melbourne. The second will be held alongside the COSA meeting later in the year. Look out for flyers seeking registration for these workshops closer to the time.

Joint PoCoG/ANZCHOG/ CanTeen Concept Development Workshop.

We are pleased to announce the 2014 Joint PoCoG/ANZCHOG/ CanTeen Concept Development Workshop. This meeting will enable a unique forum for cross-fertilisation of research ideas and identifying possible collaborative opportunities between our researchers and our groups.

This workshop will provide an opportunity for the development of high quality studies of clinical relevance and importance, in the paediatric and AYA psycho-oncology arena. We aim to provide a supportive environment for intensive input on study design and methods from scientific committee members and colleagues with expertise in

biostatistics, health economics, quality of life measurement, as well as paediatric and AYA clinical service delivery and research. Participants will also have access to input from members of the PC4/ PoCoG Community Advisory Group (JCAG), CanTeen's YCS Youth Advisory Group, ANZCHOG's National Patient and Carer Advisory Group (NPCAG) and CREST.

The 2014 Joint Concept Development Workshop will provide a foundation for collaboration between our groups and an opportunity to capitalise on each group's expertise and experience to enhance research development.

We are calling for concept proposals to be submitted in the area of paediatric and AYA psycho-oncology. Applications from early career researchers are encouraged. For more information and submission forms please visit the CDW website <http://www.pocog.org.au/content.aspx?page=jointcdwJuly2014>

Applications close on Monday 26 May 2014.



ALLG Report.

Professor Mark Hertzberg
Chairman Scientific Advisory Com-
mittee ALLG

The Australasian Leukaemia and Lymphoma group celebrated the 40th anniversary of its foundation in 2013. As the oldest cancer collaborative trials group in Australia, the ALLG traces its existence back to the establishment of the Australian and New Zealand Lymphoma Group (ANZLG) in 1973. The very first trial ran between 1974 and 1997 and was published in 1982.

As part of the 40th anniversary commemoration, the group established a Hall of Fame with the aim of giving recognition to those who have made an outstanding contribution to clinical research in blood cancers through the ALLG. Four people were inducted at a gala dinner in November.

Dr Ian Cooper (Peter MacCallum Cancer Centre) chaired the ANZLG for over 20 years. Ian Cooper was PI or co-PI on the first five studies. With his scientific integrity, wisdom and commitment, Ian established a standard that has remained with the group to today. Ian's unfailing caring attitude, sensitivity, sympathy for patients and mentoring of haematologists and other staff have left indelible memories. Ian retired in 1995 and died sadly the following year. The award was pre-

sented posthumously to his son Mark.

The Australian Leukaemia Study Group (ALSG) began as a separate group in 1982. The first trial ran between 1983 and 1984. **Prof Ray Lowenthal AO** (Royal Hobart Hospital) was its inaugural Chairman. Ray's particular contribution was the promotion of the use of idarubicin in acute myeloid leukaemia, which became a standard component of group trial regimens. Ray is well known in the haematology/oncology community for his wide interests. He published one of the first books on cancer for consumers in 1990 and in 2005 convened a conference in Darwin on cancer in Indigenous Communities. He has been the recipient of many awards most notably the Officer of the Order of Australia in 2006. Ray has recently retired from clinical practice.

The second Chairman of the ALSG from 1984 to 1993, **Prof Jim Bishop AO** was a key driver of the ALSG leukaemia trial program which helped establish new Australian standards of care for AML. As PI or co-PI of many AML studies he led trials which made important contributions to shaping clinical care in AML nationally and internationally. Jim's subsequent career has taken him to leading positions in other

agencies, including chair of the Cancer Institute NSW, Chief Medical Officer of Australia and most recently Executive Director of the Victorian Comprehensive Cancer Centre.

A central figure in both early groups was **Dr Jane Matthews**, biostatistician. Jane made an impact on almost every aspect of the ALLG and its predecessors. She served on many committees and was responsible for statistical input for the vast majority of protocols from 1973 and almost every publication of trial results until her retirement in 2003. Jane brought her high standards to play in particular in relation to ethical issues and data integrity and her trial reports set a standard of comprehensiveness, level of detail, clarity of expression and scientific accuracy that remains a model to this day.

Jane Matthew's contribution is incalculable. Without Jane the ALLG would not be what it is today.

In 1999 the two groups, the ANZLG and the ALSG fused to form the ALLG. The gala dinner on 14 November celebrated the group's research achievements over 40 years and the people who have made this possible.

Do you have a trials group newsletter?

CREST can provide articles which introduce CREST services, or which provide commentary on a health economics topic of interest to your members.

Please contact us if you would like to discuss the possibilities.

CREST Structured Training Opportunities

Being hands on is a great way to build skills and knowledge. This applies to building skills in the use of health economic methods for the analysis of clinical trials or similar projects. To facilitate that learning, CREST has a program of Structured Training Opportunities available to members of Cancer Australia CTG.

Essentially, these are projects conducted by an eligible CTG member under the guidance of a CREST health economist. For suitable projects, 20-40 hours mentoring and

training time will be available. Ideally, mentoring will be a combination of some face to face time (eg. coming to spend time at CHERE to work on the project with specific questions in mind), and follow-up via regular telephone or e-mail contact for guidance. Including time at CHERE and depending on the nature of the project, mentoring might typically be spread out over a three month period.

If you are a member of a Cancer Australia CTG, have a project with a

health economics component, and you are interested in discussing whether it might be suitable as a Structured Training Opportunity project, please contact:

Richard.deabreulourenco@chere.uts.edu.au

Please be aware that CHERE is unable to sponsor individuals to participate in these training opportunities.

CREST Presents

On March 28th, Richard De Abreu Lourenço from CREST presented at the ANZGOG Annual Scientific Meeting in Canberra, on the role of CREST and an introduction to health economics in cancer research. Understanding how health care resources are used and the effects they produce is an important input into deciding between competing treatments. The desire to build such an understanding helps to inform the design of clinical trials, as well as their analysis. Providing health eco-

nomics advice during the trial process is therefore important in order to obtain the information required to address questions of competing resource allocation. Such questions can also be informed by data collected outside of trials in the form of registries or administrative data (such as hospital records or Medicare Australia utilisation). This session provided an overview of these and other health economic methods, as well as the interaction between health economics and the clinical

trial process, and the questions they might seek to answer.

Sneaking just outside of this quarter, in the first week of April, Professor Marion Haas will be attending and presenting at the TROG Annual Scientific Meeting (April 1st-4th). Marion will address the growing interest in and use of observational data such as cohort studies and, in particular, registry data, to answer clinical and economic questions.

What has CREST been up to?

The CREST team had a busy first quarter:

Trial Group Collaborations:

- Involvement as investigators (at either the CI or AI level) in eleven NHMRC project grants.
- Conduct of trial protocol reviews/audits, and provision of advice on the use of health economic data (quality of life and

cost information) for forthcoming trials.

- Presentation to the ANZGOG Scientific Meeting (28th March 2014).

Health Economics Workshops:

- Two day modelling workshop held in Sydney, March 2014.

Website Updates:

- Ongoing updates of the CREST website: <http://www.chere.uts.edu.au/CREST>, including new Factsheets and publications of interest.

Other Activities:

- Meetings with the Clinical Trial Group Executive Officers as required, and individual study representatives as needed.