SWAR 29: To evaluate equity, diversity and inclusion (EDI) of research which is referenced in evidenced-based clinical practice guidelines for the end-stage kidney failure population.

Objective of this SWAR
1. To use the PRO EDI assessment tool to extract and evaluate participant characteristics from randomised trials used in clinical practice guidelines.
2. To use the findings to determine if the data from randomised trials are representative of the end-stage kidney disease population.
3. To identify common characteristics in the extracted data and make future recommendations.

Study area: Participant EDI, Evidence-based guidelines
Sample type: Practitioners, Stakeholders
Estimated funding level needed: Unfunded

Background
Clinical guidelines, usually based on evidence syntheses, are a primary pathway to change routine practice, making it essential that their underpinning evidence includes people who have the most to gain from improved health care (particularly underserved groups). Considering all people who will benefit from research findings, regardless of their age, gender, sex, race, and where they live is termed equity, diversion and inclusion (EDI).

End-stage kidney disease (ESKD) may disproportionally effect people based on some of these factors. For these reasons, it is crucial that EKSD research includes these disproportionally affected groups so that best practice and new treatments are offered to people who are most affected by disease burden, and therefore have the most to gain. This may also identify and overcome some of the barriers that prevent research findings being translated into clinical practice.

The PRO EDI form [1] (which is partly based on the PROGRESS-PLUS tool [2]) has been developed by the Trial Forge initiative and extracts information regarding participants' characteristics (including age, sex, gender, race, ethnicity, socioeconomic status, level of education, and location). This Study Within a Review (SWAR) will extract EDI data from randomised trials cited in clinical practice guidelines in ESKD using the PRO EDI form. We will then determine whether the data extracted from the randomised trials are representative of the ESKD population and make recommendations based on our findings.

Interventions and comparators
Intervention 1: PRO EDI assessment tool.

Index Type: Not applicable

Method for allocating to intervention or comparator
Not applicable

Outcome measures
Primary: equity, diversity and inclusion (EDI) in randomised trials cited in clinical practice guidelines for the EKSD population.
Secondary: representation of individuals with EKSD in the renal clinical practice guidelines; and recommendations for future research practice.

Analysis plans
An assessment of EDI of the randomised trials referenced in the EKSD clinical practice guidelines using the PRO EDI assessment tool.

Possible problems in implementing this SWAR
Data collection will rely on the EDI information provided in the publications of interest and communication with the authors.

References

1. Trial Forge PRO EDI: Improving how equity, diversity and inclusion is handles in evidence synthesis 2023. Available at https://www.trialforge.org/trial-forge-centre/pro-edi-improving-how-equity-diversity-and-inclusion-is-handled-in-evidence-synthesis (accessed on 29 February 2024).
2. O'Neill J, Tabish H, Welch V, Petticrew M, Pottie K, Clarke M, et al. Applying an equity lens to interventions: using PROGRESS ensures consideration of socially stratifying factors to illuminate inequities in health. Journal of Clinical Epidemiology 2014;67(1):56-64.

Publications or presentations of this SWAR design

Examples of the implementation of this SWAR

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Revisions made by:
Date of revisions: