

How to Scientifically Critique a Literature for Make a Sense of a Randomized Controlled Trial: Question of a Young Researcher

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Literature Critiquing is a scientific process of evaluation and interpretation of a literature. At the very beginning of a literature review, it is necessary to go through the background of that respective article. It will create an image in mind about the specific topic. Usually, Critical Appraisal Skills Program (CASP) is used to make a sense of Randomized Controlled trial (RCT). This literature critiquing technique consisted with 3 different sections including 11 questions. The first section titled "Section A: Are the results of the trial valid?" consisted with 6 questions. The second section titled "Section B: What are the results?" consisted with 2 questions. In addition, the 3rd section titled "Section C: Will the results help locally?" consisted with rest of the 3 questions. "Section A" and "Section B" used to measure the internal validity. On the other hand, "Section C" used to measure the external validity of a RCT. For appraisal of a literature, the researcher must need to assure the reference of the authors of that respective article [1].

As a researcher, my research interest is in "Urinary Incontinence of Women". Therefore, my probable concept to critiquing a literature using the CASP is described in the following:

"Section A: Are the results of the trial valid?"			
			Comments (as an example)
"1. Did the trial address a clearly focused issue?"	"Yes"	"HINT: An issue Can be focused in terms of	• The trial described about the population studied (eg, Stress urinary Incontinence among the Postpartum Women)
	"Can't tell" "No"	• The population studied	• The trial properly described about the intervention given
		• The intervention give	• The study considered the objective or subjective mea- surements tools to measure the primary and secondary outcome. If the study used only subjective measuremen tool, then needs to describe about the assurance of reli- ability and validity of that respective measurement tool
		• The comparator given	
		The outcomes considered"	
			which would eliminate the bias towards the treatment
			effect.

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			Comments (as an example)
"2. Was the assignment of patients to treat- ments random- ized?"	"Yes" "Can't tell" "No"	 "HINT: Consider How this was carried out Was the allocation se- 	• The study assigned the patients to treatment random- ized by diagnostic procedure through clinical parameters, inclusion and exclusion criteria avoiding confounding variable.
		quence concealed from researchers and patients"	• The study conducted randomization by Random Alloca- tion Software (RAS) & block randomization (usually the study mentioned about the randomization process)
			• Group allocation was concealed by a blinded 3 rd person.
			Comments (as an example)
"3. Were all of	"Yes"	"HINT: Consider	• All the patients who entered the trail properly accounted for its conclusion; in other words the trial assured the
the patients who entered the trial properly ac- counted for at its conclusion?"	"Can't tell"	• Was the trial stopped early	Intention-to-treat analysis (ITT).
	"No"	 Were patients analyzed in the groups to which they were randomized" 	• The trial clearly mentioned about the completion of inter- vention period.
		were fundomized	• The trial mentioned about the patients analyzed in the groups to which they were randomized.
Is it worth continu	ing?		
			Comments (as an example)
<i>"</i>	"Yes"		• Both the therapist and patients were blinded towards the treatment.
"4. Were pa- tients, health workers and	"Can't tell"		or
study personnel	"No"		Neither the respondents nor the therapist was blinded
'blind' to treat- ment?"	NO		towards the treatment group.
ment?			• Moreover, random allocation was conducted by a blinded 3 rd person which would minimize the bias.
			The statistician was blinded
"5. Were the groups similar at the start of the trial?"			Comments (as an example)
	"Yes"	"HINT: Consider	• The groups were similar at baseline and there were no
	"Can't tell"	• Other factors that might af-	significant differences between the groups.
	"No"	fect the Can't Tell outcome, such as; age, sex, social	Or
		class?"	• The groups were similar at baseline and there were no significant differences between the groups in terms of respective variables.

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			Comments (as an example)
"6. Aside from the experimental intervention, were the groups treated equally?"	"Yes" "Can't tell" "No"		 The control group didn't receive any treatment. Therefore, outcome of experimental group is difficult to compare with single intervention. Or Both the groups receive basic intervention which assures the groups were treated equally. Therefore, the outcome indicates the experimental intervention only.
Section B: What are the results?			
			Comments (as an example)
			The minimum entropy of an elder of his the study was

"7. How large was the treat- ment effect?"	"Yes" "Can't tell" "No"	 "HINT: Consider What outcomes were measured? Is the primary outcome clearly specified? What results were found for each outcome?" 	 The primary outcome considered by the study was measurement of severity of SUI. The primary outcome measured by the translated and validated International Consultation on Incontinence Questionnaire (ICIQ). Or Any other subjective or objective measurement tool. The intervention group showed better outcome according to each outcome measure within and in between the groups.
"8. How precise was the estimate of the treatment effect?"	"Yes" "Can't tell" "No"	"HINT: ConsiderWhat are the confidence limits?"	Comments (as an example) • Effect size of intervention need to mention. For example level of significance of intervention considered the p value ≤ 0.05.
"Section C: Will th	ne results hel	p locally?"	
"9. Can the results be ap- plied to the local population, or in your context?"	"Yes" "Can't tell" "No"	 "HINT: Consider whether The patients covered by the trial are similar enough to the patients to whom you will apply this? How they differ?" 	 Comments (as an example) The study results would be possible to apply to the similar studied population. The just might: A. The present literature conducted among the women with SUI who will be able to participate in outpatient unit. B. Those who will be unable to attend the outpatient session will allow to do home Pelvic Floor Muscle Training (PFMT).

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"10. Were all clinically impor- tant outcomes considered?"	"Yes" "Can't tell" "No"	 "HINT: Consider whether There is other information you would like to have seen? If not, does this affect the decision?" 	 Comments (as an example) The researcher may critique the literature as- better to use objective measurement Pad test to measure the amount of SUI.
"11. Are the benefits worth the harms and costs?"	"Yes" "Can't tell" "No"	 "HINT: Consider Even if this is not ad- dressed by the trial, what do you think?" 	Comments (as an example) The intervention is not harmful or doesn't have any side effects. The treatment will be cost effective, if it would apply.

Bibliography

1. Critical Appraisal Skills Programme. CASP (insert name of checklist i.e. Randomised Controlled Trial) Checklist (2018).

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