



## ORIGINAL ARTICLE

## An international survey and modified Delphi approach revealed numerous rapid review methods

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**Abstract**

**Objectives:** To solicit experiences with and perceptions of rapid reviews from stakeholders, including researchers, policy makers, industry, journal editors, and health care providers.

**Study Design and Setting:** An international survey of rapid review producers and modified Delphi.

**Results:** Forty rapid review producers responded on our survey (63% response rate). Eighty-eight rapid reviews with 31 different names were reported. Rapid review commissioning organizations were predominantly government (78%) and health care (58%) organizations. Several rapid review approaches were identified, including updating the literature search of previous reviews (92%); limiting the search strategy by date of publication (88%); and having only one reviewer screen (85%), abstract data (84%), and assess the quality of studies (86%). The modified Delphi included input from 113 stakeholders on the rapid review approaches from the survey. Approach 1 (search limited by date and language; study selection by one reviewer only, and data abstraction and quality appraisal conducted by one reviewer and one verifier) was ranked the most feasible (72%, 81/113 responses), with the lowest perceived risk of bias (12%, 12/103); it also ranked second in timeliness (37%, 38/102) and fifth in comprehensiveness (5%, 5/100).

**Conclusion:** Rapid reviews have many names and approaches, and some methods might be more desirable than others. © 2015 Elsevier Inc. All rights reserved.

**Keywords:** Rapid review; Survey; Systematic review; Delphi; Consensus; Knowledge synthesis

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### 1. Introduction

The methods for the conduct of a systematic review are well established [1–4]. Rapid reviews are knowledge synthesis products in which certain aspects of the

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recommended systematic review process are modified or omitted to produce timely information [5]. A formal definition of a rapid review does not exist [5]. However, one definition that has been proposed is “a rapid review is a type of knowledge synthesis in which components of the systematic review process are simplified or omitted to produce information in a shorter period of time” [5].

Numerous centers are conducting rapid reviews internationally. Many health technology assessment agencies are conducting rapid reviews in response to requests from decision-making agencies [6]. For example, the Canadian Agency for Drugs and Technologies in Health (CADTH; [www.cadth.ca](http://www.cadth.ca)) has conducted more than 3,000 rapid reviews [7], and the US ECRI Institute ([www.ecri.org](http://www.ecri.org)) has conducted more than 4,000 rapid reviews [8] in the past decade alone. Rapid reviews are increasingly being

**What is new?****Key findings**

- Eighty-eight rapid review products reporting numerous streamlined methods were identified. More than 30 different terms were used to describe a rapid review. The primary rationale for conducting a rapid review was the decision makers' need for timely access to information. The commissioning agency was often a government agency or health care organization. Through the modified Delphi approach, different issues related to rapid reviews were identified and one rapid review approach (search limited by date and language; study selection by one reviewer only, and data abstraction and quality appraisal conducted by one reviewer and one verifier) was ranked the highest compared to the others, suggesting that some streamlined steps might be more desirable than others.

**What this adds to what was known?**

- This research provides up-to-date information on the experiences and perceptions of a range of stakeholders regarding rapid reviews.

**What is the implication and what should change now?**

- Numerous knowledge synthesis centers are conducting rapid reviews internationally, yet few studies have evaluated the accuracy, comprehensiveness, potential risk of bias, timeliness, and feasibility of rapid review approaches.
- Further research on rapid reviews is warranted, such as the development of formal method guidance for rapid reviews and a prospective study comparing the results of rapid reviews to those obtained through systematic reviews on the same topic is necessary.

published in journals [9–13], including a recent example in the Journal of Clinical Epidemiology [14].

Evidence suggests that decision makers are currently using rapid reviews to inform their decision-making processes. Indeed, surveys of policy makers indicate that evidence from rapid reviews influenced decision making in most cases (>70%) [15–19]. Rapid reviews have been noted as being particularly useful for urgent and emergent decision making [6].

A recent article summarized evidence from 12 review articles of rapid reviews [20]. Inconsistency in definitions, methods, and applications was identified. In a related article,

more than 35 different rapid reviews produced by 20 different organizations were summarized [21]. Four different types of rapid reviews were identified, including inventories, rapid responses, rapid reviews, and automated approaches, which ranged in timeliness from 5 minutes (computer algorithm in which users can enter a query) to 8 months [21].

Although numerous knowledge synthesis centers are conducting rapid reviews internationally, few studies have evaluated the accuracy, comprehensiveness, potential risk of bias, timeliness, and feasibility of rapid review approaches. As rapid reviews are becoming more popular and useful for decision making [22], we aimed to solicit the experiences and perceptions regarding rapid reviews from a wide range of stakeholders, including researchers, policy makers, industry, journal editors, and health care providers.

**2. Methods***2.1. Protocol*

A protocol to conduct an electronic survey and Delphi was compiled and revised on feedback received from the Canadian Institutes for Health Research peer-review panel. It is available from the corresponding author on request.

*2.2. Methods for the electronic survey*

Organizations that produce rapid reviews were identified through the International Network of Agencies for Health Technology Assessment's (INAHTA) list of members (<http://www.inahta.org/>) and general Internet searches. A full list of the organizations that were invited to respond is presented in Appendix A at [www.jclinepi.com](http://www.jclinepi.com).

A 16-item questionnaire was developed based on a previous survey of rapid review producers [6]. Before embarking on the online survey, we assessed face validity and pilot tested our questionnaire by sending it to 10 members of the Knowledge Synthesis Center at St. Michael's Hospital who were not involved with the survey development. The survey was revised, as necessary, and the final version is presented in Appendix B at [www.jclinepi.com](http://www.jclinepi.com).

We used the definition of a rapid review put forth by Khangura et al. [5]. We asked participants about the terms they used to name a rapid review, amount of time it typically takes to conduct a rapid review, rationale for undertaking a rapid review, commissioning agency for the rapid review, intended audience for the rapid review, and whether a knowledge user panel is used. Each participant was asked to detail the aforementioned items for up to three unique rapid reviews. We also asked questions regarding the specific methods that were used to conduct the rapid review. The online survey was administered using Fluid-Surveys (<http://fluidsurveys.com>) between October 24, 2014, and January 31, 2015.

To increase the response rate on the online survey, effective survey methods for performing mail- and Internet-based surveys were used [23–25]. Specifically, participants

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