

Revised Cochrane risk-of-bias tool for randomized trials (RoB 2) TEMPLATE FOR COMPLETION

Edited by Julian PT Higgins, Jelena Savović, Matthew J Page, Jonathan AC Sterne
on behalf of the RoB2 Development Group

Version of 22 August 2019

The development of the RoB 2 tool was supported by the MRC Network of Hubs for Trials Methodology Research (MR/L004933/2- N61), with the support of the host MRC ConDuCT-II Hub (Collaboration and innovation for Difficult and Complex randomised controlled Trials In Invasive procedures - MR/K025643/1), by MRC research grant MR/M025209/1, and by a grant from The Cochrane Collaboration.



This work is licensed under a [Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License](https://creativecommons.org/licenses/by-nc-nd/4.0/).

Study details

Reference

Chen C. et al. Is rehabilitation intervention during hospitalization enough for functional improvements in patients undergoing lumbar decompression surgery? A prospective randomized controlled study. *Clinical Neurology and Neurosurgery* 129 S1 (2015) S41-S46

Study design

- Individually-randomized parallel-group trial
- Cluster-randomized parallel-group trial
- Individually randomized cross-over (or other matched) trial

For the purposes of this assessment, the interventions being compared are defined as

Experimental:

Patient education, breathing exercises, early postoperative mobilization, trunk and extremity exercises

Comparator:

No active early mobilization strategies

Specify which outcome is being assessed for risk of bias

VAS back, VAS leg, RMDQ, SF-12

Specify the numerical result being assessed. In case of multiple alternative analyses being presented, specify the numeric result (e.g. RR = 1.52 (95% CI 0.83 to 2.77) and/or a reference (e.g. to a table, figure or paragraph) that uniquely defines the result being assessed.

Mean (SD)
Table 3, page S45.

Is the review team's aim for this result...?

- to assess the effect of *assignment to intervention* (the 'intention-to-treat' effect)
- to assess the effect of *adhering to intervention* (the 'per-protocol' effect)

If the aim is to assess the effect of *adhering to intervention*, select the deviations from intended intervention that should be addressed (at least one must be checked):

- occurrence of non-protocol interventions
- failures in implementing the intervention that could have affected the outcome
- non-adherence to their assigned intervention by trial participants

Which of the following sources were obtained to help inform the risk-of-bias assessment? (tick as many as apply)

- X Journal article(s) with results of the trial
- Trial protocol
- Statistical analysis plan (SAP)
- Non-commercial trial registry record (e.g. ClinicalTrials.gov record)
- Company-owned trial registry record (e.g. GSK Clinical Study Register record)
- "Grey literature" (e.g. unpublished thesis)
- Conference abstract(s) about the trial
- Regulatory document (e.g. Clinical Study Report, Drug Approval Package)
- Research ethics application
- Grant database summary (e.g. NIH RePORTER or Research Councils UK Gateway to Research)
- Personal communication with trialist
- Personal communication with the sponsor

Risk of bias assessment

Responses underlined in green are potential markers for low risk of bias, and responses in **red** are potential markers for a risk of bias. Where questions relate only to sign posts to other questions, no formatting is used.

Domain 1: Risk of bias arising from the randomization process

Signalling questions	Comments	Response options
1.1 Was the allocation sequence random?	1.1 <u>Y</u> 1.2 <u>PY</u>	<u>Y</u> / <u>PY</u> / PN / N / NI
1.2 Was the allocation sequence concealed until participants were enrolled and assigned to interventions?	Quote: “The patients were randomly allocated to either the perioperative group (PG) or the control group (CG) by a health professional who did not take part in the trial and only had patients fill in a baseline questionnaire” (p. S42).	<u>Y</u> / <u>PY</u> / PN / N / NI
1.3 Did baseline differences between intervention groups suggest a problem with the randomization process?	1.3 <u>N</u> Quote: “The demographic profiles of the patients were similar in both groups (Table 1) (p. S43).	Y / PY / <u>PN</u> / <u>N</u> / NI
Risk-of-bias judgement	Low	Low / High / Some concerns
Optional: What is the predicted direction of bias arising from the randomization process?		NA / Favours experimental / Favours comparator / Towards null / Away from null / Unpredictable

Domain 2: Risk of bias due to deviations from the intended interventions (*effect of assignment to intervention*)

Signalling questions	Comments	Response options
2.1. Were participants aware of their assigned intervention during the trial?	2.1 Y 2.2 Y	Y / PY / <u>PN</u> / N / NI
2.2. Were carers and people delivering the interventions aware of participants' assigned intervention during the trial?	Comment: It is not possible to blind the intervention.	Y / PY / <u>PN</u> / N / NI
2.3. If Y/PY/NI to 2.1 or 2.2: Were there deviations from the intended intervention that arose because of the trial context?	2.3 PN p. S42: "The two patient groups and their healthcare staff were kept separated during the study period; neither were they allowed to discuss the intervention, nor were the healthcare personnel treating the CG aware of the procedures for the PG."	NA / Y / PY / <u>PN</u> / N / NI
2.4 If Y/PY to 2.3: Were these deviations likely to have affected the outcome?		NA / Y / PY / <u>PN</u> / N / NI
2.5. If Y/PY/NI to 2.4: Were these deviations from intended intervention balanced between groups?		NA / <u>Y</u> / PY / PN / N / NI
2.6 Was an appropriate analysis used to estimate the effect of assignment to intervention?	2.6 PY Quote: "Continuous variables were described in terms of mean and standard deviation, while ordinal variables and nominal variables were described in terms of percentage. The Shapiro-Wilk test was used to determine if the data were normally distributed. ANOVAs with repeated measures were used to examine the differences in the outcomes between groups and at the different time points. When non-parametric statistics were for the analyses, the Friedman test and Wilcoxon signed-rank test were performed to compare the change before and after surgery over time within the group. The Mann-Whitney U test was used to compare the difference between the two groups before and after surgery. The significance level was defined with a set at 0.05. Intention to treat (ITT) analysis was conducted, and the mean was used to input a dropout patient's missing data. Data were analyzed using SPSS for Windows, version 18.0 (SPSS Inc., Chicago, IL, USA)" (p. S43)	<u>Y</u> / PY / PN / N / NI

	Comment: The authors do not describe which tests were applied to which variables. That should have been done.	
2.7 If N/PN/NI to 2.6: Was there potential for a substantial impact (on the result) of the failure to analyse participants in the group to which they were randomized?		NA / Y / PY / <u>PN</u> / N / NI
Risk-of-bias judgement	Low	Low / High / Some concerns
Optional: What is the predicted direction of bias due to deviations from intended interventions?		NA / Favours experimental / Favours comparator / Towards null / Away from null / Unpredictable

Domain 2: Risk of bias due to deviations from the intended interventions (*effect of adhering to intervention*)

Signalling questions	Comments	Response options
2.1. Were participants aware of their assigned intervention during the trial?		Y/PY/PN/N/NI
2.2. Were carers and people delivering the interventions aware of participants' assigned intervention during the trial?		Y/PY/PN/N/NI
2.3. [If applicable:] If Y/PY/NI to 2.1 or 2.2: Were important non-protocol interventions balanced across intervention groups?		NA/Y/PY/PN/N/NI
2.4. [If applicable:] Were there failures in implementing the intervention that could have affected the outcome?		NA/Y/PY/PN/N/NI
2.5. [If applicable:] Was there non-adherence to the assigned intervention regimen that could have affected participants' outcomes?		NA/Y/PY/PN/N/NI
2.6. If N/PN/NI to 2.3, or Y/PY/NI to 2.4 or 2.5: Was an appropriate analysis used to estimate the effect of adhering to the intervention?		NA/Y/PY/PN/N/NI
Risk of bias judgement		Low / High / Some concerns
Optional: What is the predicted direction of bias due to deviations from intended interventions?		NA / Favours experimental / Favours comparator / Towards null / Away from null / Unpredictable

Domain 3: Missing outcome data

Signalling questions	Comments	Response options
3.1 Were data for this outcome available for all, or nearly all, participants randomized?	3.1 N Quote: “The dropout rate of follow-up appointments was only 5% for the first follow-up clinic visit. After three months, the follow-up rate was nearly 50% because of patient recovery and limits geographic boundaries... Nearly half of the study patients completed the full program” p. S45.	<u>Y</u> / <u>PY</u> / PN / N / NI
3.2 If <u>N/PN/NI</u> to 3.1: Is there evidence that the result was not biased by missing outcome data?	3.2 N	NA / <u>Y</u> / <u>PY</u> / PN / N
3.3 If <u>N/PN</u> to 3.2: Could missingness in the outcome depend on its true value?	3.3 PN Quote: “Patients often could not follow the schedule of clinic visits due to geographic boundaries and the fact that patients came from all over different parts of Taiwan” p. S45).	NA / Y / PY / <u>PN</u> / <u>N</u> / NI
3.4 If <u>Y/PY/NI</u> to 3.3: Is it likely that missingness in the outcome depended on its true value?	3.4	NA / Y / PY / <u>PN</u> / <u>N</u> / NI
Risk-of-bias judgement		Low / High / Some concerns
Optional: What is the predicted direction of bias due to missing outcome data?		NA / Favours experimental / Favours comparator / Towards null / Away from null / Unpredictable

Domain 4: Risk of bias in measurement of the outcome

Signalling questions	Comments	Response options
<p>4.1 Was the method of measuring the outcome inappropriate?</p>	<p>4.1 N</p> <p>AIM</p> <p>Quote: “The aim of this study was to examine the outcomes of patients after lumbar decompression surgery (LDS) receiving perioperative rehabilitation. Thus, our study hypothesis was that outcomes would improve by early perioperative rehabilitation, and that patients would experience pain and disability over a shorter time post-operation” p. S42.</p> <p>METHOD OF MEASURING THE OUTCOME</p> <p>Quote: “The outcome measures used in this study were the Visual Analogue Scale (VAS), the Global Rate of Change (GROC) scale, the Roland-Morris Disability Questionnaire (RMDQ), and the Short Form (SF)-12 Health Survey” p. S43-S44.</p>	<p>Y / PY / <u>PN / N</u> / NI</p>
<p>4.2 Could measurement or ascertainment of the outcome have differed between intervention groups?</p>	<p>4.2. PN</p> <p>Comment: Comparable methods of outcome measurement and time points.</p>	<p>Y / PY / <u>PN / N</u> / NI</p>
<p>4.3 If <u>N/PN/NI</u> to 4.1 and 4.2: Were outcome assessors aware of the intervention received by study participants?</p>	<p>4.3 Y</p> <p>Comment: The outcome assessor is the study participant.</p>	<p>NA / Y / PY / <u>PN / N</u> / NI</p>
<p>4.4 If <u>Y/PY/NI</u> to 4.3: Could assessment of the outcome have been influenced by knowledge of intervention received?</p>	<p>4.4. PY</p> <p>Comment: Knowledge of the assignment could influence participant-reported outcomes.</p>	<p>NA / Y / PY / <u>PN / N</u> / NI</p>
<p>4.5 If <u>Y/PY/NI</u> to 4.4: Is it likely that assessment of the outcome was influenced by knowledge of intervention received?</p>	<p>4.5 PN</p> <p>Comment: There is no reason to believe that knowledge of the intervention status could have influenced outcome.</p>	<p>NA / Y / PY / <u>PN / N</u> / NI</p>

Risk-of-bias judgement		Low / High / Some concerns
Optional: What is the predicted direction of bias in measurement of the outcome?		NA / Favours experimental / Favours comparator / Towards null / Away from null / Unpredictable

Domain 5: Risk of bias in selection of the reported result

Signalling questions	Comments	Response options
5.1 Were the data that produced this result analysed in accordance with a pre-specified analysis plan that was finalized before unblinded outcome data were available for analysis?	5.1 NI Comment: The researchers' pre-specified intentions are not available in sufficient details.	<u>Y / PY</u> / PN / N / NI
Is the numerical result being assessed likely to have been selected, on the basis of the results, from...		
5.2. ... multiple eligible outcome measurements (e.g. scales, definitions, time points) within the outcome domain?	5.2 NI Comment: Analysis intentions are not available.	Y / PY / <u>PN / N</u> / NI
5.3 ... multiple eligible analyses of the data?	5.3 NI Comment: Analysis intentions are not available.	Y / PY / <u>PN / N</u> / NI
Risk-of-bias judgement	Some concerns	Low / High / Some concerns
Optional: What is the predicted direction of bias due to selection of the reported result?		NA / Favours experimental / Favours comparator / Towards null / Away from null / Unpredictable

Overall risk of bias

Risk-of-bias judgement		Low / High / Some concerns
Optional: What is the overall predicted direction of bias for this outcome?		NA / Favours experimental / Favours comparator / Towards null / Away from null / Unpredictable



This work is licensed under a [Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License](https://creativecommons.org/licenses/by-nc-nd/4.0/).