

4. Evidence synthesis: practices

- Country-level Guidance
- Can modelling play a role?
- A tool for supporting country decision-making

4.1 Review of pertinent evidence

4.2 Checked for quality and appropriateness

4.3 Conflicting data should be investigated

4.4 Routine data should be checked for appropriate use

4.5 Decisions informed by expert opinion.. SB validated where poss

4.6 Implications of parameter uncertainty on results SB investigated

4.7 Model calibrations should be reported in full

4. Evidence synthesis: practices

4.1 Review of pertinent evidence

- *What is pertinent? – in National TB Programme terms*
- *Pertinent to which Research Q?*
- *Check list for getting started?*

4.2 Checked for quality and appropriateness

- *Guidance for NTPs on what the likely issues are?*

4.3 Conflicting data should be investigated

- *Guidance on what NTPs could/should do?*

4.4 Routine data should be checked for appropriate use

- *Define minimum set of data quality/ availability: sine qua non for decision-making?*

4. Evidence synthesis: practices

4.5 Decisions informed by expert opinion should be validated where possible

- *For influential parameters it may be good to seek data from multiple experts using formal elicitation techniques*

4.6 Implications of parameter uncertainty on results SB investigated

- *Suggests deterministic and probabilistic... oddly specific for rest of document*

4.7 Model calibrations should be reported in full

- *Math models commonly calibrated to observed data... again quite technical*

My comments

- **Aiming to be a CONSORT or a CHEERS?**
- **“Cognitive interviewing” with programme managers to “translate” *concepts* and *data* from programme to modeling needs**
 - Case-notification rates versus incidence of disease
- **Guidance for mapping questions to data needs: examples**
- **Prototype research protocols to inform modelling for the NTP**
- **External peer review... Global Fund Research choices often poor**
- **Basic categorisation of countries to help getting started with model choice**
 - HIV, MDR TB
 - Growing or aging populations
 - Epidemics in clear decline
 - Rural vs urban
 - Underlying health systems --- private sector etc