

Review protocol for Barrett's Oesophagus

Systematic reviews

	Details	Notes and status
Review question	For adults with Barrett's oesophagus with high-grade dysplasia or intra-mucosal cancer, is ablative therapy effective in reducing progression to cancer and recurrence of Barrett's oesophagus? Which is the most effective ablative therapy?	
Objective(s)	To determine the effectiveness of ablative therapies	
Criteria for considering studies	Systematic reviews	Cochrane reviews have already been identified
Population	Adults with a diagnosis of Barrett's oesophagus with high-grade dysplasia or intra-mucosal cancer	
Intervention(s)	Ablative therapies, specifically <ul style="list-style-type: none"> • endoscopic resection • argon plasma coagulation (APC) • photodynamic therapy (PDT) • laser ablation • multipolar electrocoagulation (MPEC) • radiofrequency ablation (RFA) 	
Comparator(s)	<ul style="list-style-type: none"> • oesophageal surgery • surveillance and proton-pump inhibitors • other ablative therapies (comparing one against the other) 	
Outcome(s)	<ul style="list-style-type: none"> • risk of progression to oesophageal adenocarcinoma in those who have had ablative therapy 	

	<p>for Barrett's oesophagus</p> <ul style="list-style-type: none"> • risk of recurrence of Barrett's oesophagus, including the development of high grade dysplasia, after ablative therapy • reported adverse effects of ablative therapy, immediate and long term • health related quality of life • resource use and costs. 	
How to be searched	<p>As per the Guidelines Manual. No additional databases are required.</p> <p>Date restriction: 2004 onwards</p> <p>Language restriction: English language</p> <p>Study design: systematic reviews</p>	Date restriction set
Review strategy	Narrative summary or to use for identifying primary studies missed through our searches, daisy-chaining	

Primary studies for evidence map

	Details	Notes and status
Review question	For adults with Barrett's oesophagus with high-grade dysplasia or intra-mucosal cancer, is ablative therapy effective in reducing progression to cancer and recurrence of Barrett's oesophagus? Which is the most effective ablative therapy?	
Objective(s)	To determine the effectiveness of ablative therapies	
Criteria for considering studies	Primary studies	We are not placing any restriction here on study design, but are using the results of the searches to assess the amount and level of evidence published
Population	Adults with a diagnosis of Barrett's oesophagus with high-grade dysplasia or intra-mucosal cancer	
Intervention(s)	Ablative therapies, specifically <ul style="list-style-type: none"> • endoscopic resection • argon plasma coagulation (APC) • photodynamic therapy (PDT) • laser ablation • multipolar electrocoagulation (MPEC) • radiofrequency ablation (RFA) 	
Comparator(s)	<ul style="list-style-type: none"> • oesophageal surgery • surveillance and proton-pump inhibitors • other ablative therapies (comparing one against the other) 	
Outcome(s)	<ul style="list-style-type: none"> • risk of progression to oesophageal adenocarcinoma in those who have had ablative therapy for Barrett's oesophagus • risk of recurrence of Barrett's oesophagus, including the development 	

	<p>of high grade dysplasia, after ablative therapy</p> <ul style="list-style-type: none"> • reported adverse effects of ablative therapy, immediate and long term • health related quality of life • resource use and costs. 	
How to be searched	<p>As per the Guidelines Manual. No additional databases are required.</p> <p>Date restriction: no date restriction</p> <p>Language restriction: English language</p> <p>Study design: no design restriction</p>	
Review strategy	<p>To present as a 'map of evidence'</p> <p>Using GRADE for effectiveness and adverse effects data</p>	

Patient information

	Details	Notes and status
Review question	What information and support do patients (or carers or families of patients) undergoing or considering undergoing ablative therapy need?	
Objective(s)	To determine the information and support needs	
Criteria for considering studies	Primary studies	No restriction set at searching stage.
Population	<ul style="list-style-type: none"> Adults with a diagnosis of Barrett's oesophagus with high-grade dysplasia, intra-mucosal cancer, or early oesophageal cancer Families and carers 	
Intervention(s)	<ul style="list-style-type: none"> Information Support Education 	
Comparator(s)	No information, or usual support	
Outcome(s)	<ul style="list-style-type: none"> Satisfaction Improved knowledge 	
How to be searched	As per the Guidelines Manual. No additional databases are required. Date restriction: no date restriction Language restriction: English language Study design: no design restriction	
Review strategy	Narrative summary and or meta-synthesis if possible	