**Core outcome set developers’ response to COVID-19 (29 March 2020)**

**Many clinical trials and systematic reviews are already underway, or will begin shortly, to strengthen the evidence base for the COVID-19 response. Core outcome sets (COS), showing the outcomes that should be measured and reported in these studies, will ensure that this evidence base will contain, as a minimum, the key information needed by decision makers about the effects of interventions. This briefing paper has been prepared by COMET to summarise work to date on COS for COVID-19 and the COMET team will try to respond to any queries you have about it. COMET will also facilitate contact with COS developers to help determine which COS may be most relevant to your particular research study.**

**Background:** In February 2020, three COVID-19 COS projects were registered in the COMET database [1-3]. A fourth was registered in March [4], with the aim of engaging patients in the COS development process, and is therefore complementary to the existing initiatives. Earlier work by ISARIC sought to standardize outcome data collected by research networks conducting clinical and epidemiological research in preparation for and during epidemics and pandemics [5]. In addition, existing COS projects for specific interventions used in and after critical care may be relevant [6-9]. A summary of all this work is available in the COMET database - <http://www.comet-initiative.org/Studies/Details/1538> and **will be updated as further evidence becomes available.**

Teleconferences have been convened with representatives of the four COVID-19 COS (Junhua Zhang, John Marshall, Ruijin Qiu, Allison Tong) and the COMET Initiative (Paula Williamson, Liz Gargon, Mike Clarke). These discussions will maintain awareness of work on this topic, determine what information to disseminate more widely, and promote the uptake of COS in relevant research. Each COS is slightly different in its scope or methods, including the range of stakeholders involved, and they are complementary to one another.

There will be a unique opportunity to identify a ‘core’ COVID-19 COS across the four individual COVID-19 COS. This will be discussed in the next teleconference between these groups, on Tuesday 31st March 2020.

**COS for COVID-19 studies**  
   
[1] <http://www.comet-initiative.org/Studies/Details/1528>

Lead: John Marshall, University of Toronto, Canada on behalf of the WHO Working Group on the Clinical Characteristics of COVID-19 infection

Summary: WHO has published a master protocol for COVID-19 studies, which recommends the outcomes to be measured in each of these. The WHO Working Group undertook a consensus exercise to agree a COS and the report will be published on the WHO website. In the meantime, please contact Liz Gargon, [gargon01@liv.ac.uk](mailto:gargon01@liv.ac.uk) , to obtain a copy.

[2] <http://www.comet-initiative.org/Studies/Details/1523>

Lead: Junhua Zhang, Evidence-Based Medicine Center, Tianjin University of Traditional Chinese Medicine, Tianjin, China

Summary: This COS is published - <https://www.sciencedirect.com/science/article/pii/S2095809920300424?via%3Dihub>

A Case Report Form for this COS has been drafted. Please contact Janneke van’t Hooft, [janneke@stanford.edu](mailto:janneke@stanford.edu) , to obtain a copy.

[3] <http://www.comet-initiative.org/Studies/Details/1507>

Lead: Ruijin Qiu, Dongzhimen Hospital, Beijing University of Chinese Medicine, China

Summary: The COS is published on a preprint server and will be edited for English language soon –

<https://medrxiv.org/cgi/content/short/2020.03.23.20041533v1>

[4] <http://www.comet-initiative.org/Studies/Details/1548>

Lead: Allison Tong, University of Sydney, Australia

Summary: The protocol for this study has been written. It will have a particular focus on patients, family and community members. The results are expected by 16th April 2020.

[5] <http://www.comet-initiative.org/Studies/Details/617>

Lead: Calum Semple, University of Liverpool, UK on behalf of ISARIC

Summary: This work was done in 2014 with the aim to change how research is carried out during and between epidemics. Results of the work completed are available via the link. It informed the development of the WHO-ISARIC COVID-19 Clinical Platform (CCP) study case report form, which is available from Calum Semple, [M.G.Semple@liverpool.ac.uk](mailto:M.G.Semple@liverpool.ac.uk) , prior to its publication on the WHO website.

**Intervention-specific COS that may be relevant for COVID-19 patient care**

[6] <http://www.comet-initiative.org/Studies/Details/292>

Lead: Bronagh Blackwood, Queen's University Belfast, UK

Summary: This is a COS for trials of interventions intended to modify the duration of ventilation for patients being treated in an Intensive Care Unit.

[7] <http://www.comet-initiative.org/Studies/Details/786>

Lead: M Major, European School of Physiotherapy, Amsterdam University of Applied Sciences, Amsterdam, The Netherlands

Summary: This is a COS for trials of physical therapy in the post-hospital rehabilitation of people who have survived critical illness.

[8] <http://www.comet-initiative.org/Studies/Details/1151>

Lead: Alda Marques, University of Aveiro, Portugal

Summary: This is an ongoing COS for trials of pulmonary rehabilitation programs in people with COPD.

[9] <http://www.comet-initiative.org/Studies/Details/288>

Lead: Bronwen Connolly, Queen's University Belfast, UK

Summary: This is an ongoing COS for trials of physical rehabilitation in critically ill patients, within intensive care units (ICU) and following their discharge from ICU and hospital.