Results: Our search returned 169 papers, of which 35 were eligible for inclusion in the present study. The USA published the majority of papers (20/35). The papers mostly related to neurosurgery (30/35), with the most common neurosurgical sub-specialty being traumatic brain injury (14/35) and subarachnoid haemorrhage (10/35). There is an increasing publication trend over time, with 12 papers published in 2019. COS and CDE development is an international collaborative process, with authors from a number of different countries. Five papers were systematic reviews conducting with the intention of COS/CDE development. 27 papers reported CDE development and 2 papers reported COS development (aphasia and non-specific low back pain). The COS development papers utilised international consensus meetings and adhered to international development statements.

Conclusions: COS and CDEs are an essential research tool to reduce research wastage and ultimately improve patient outcomes through homogenous outcome reporting, aligned with patient-derived outcomes. COS and CDEs are increasingly being developed within clinical neurosciences.

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The development of Core Outcome Sets and Common Data Elements in clinical neurosciences: a scoping review

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Background: Core Outcome Sets (COS) are a consensus-based agreed minimum set of outcomes that should be measured and reported in all studies within a research field. Common Data Elements (CDEs) are the minimum data points that should be collected regarding the characteristics of population, condition and intervention. The use of COS and CDEs minimises research wastage by increasing the cross-comparison and meta-analysis of study findings.

Objective: The primary objective was to collate and describe the current process of developing core outcome sets and common data elements in published research pertaining to clinical neurosciences. The secondary objective was to identify the clinical neuroscience subspecialties that have developed COS and CDEs, the countries of origin of authors, and the process through which COS and CDEs were developed.

Design: A search between 2000-2020 of the top 40 Impact Factor neurosurgical and neurological journals was conducted. A scoping review was performed in accordance with the PRISMA-ScR Checklist.