**Individual Participant Data (IPD) Meta-analyses of Randomised Controlled Trials: Guidance on Their Use**

After reading the paper,

1. **Identify two issues in the paper that were either new, surprising, puzzling or you disagree with**.
2. Post both issues on the Discussion board with a short explanation why you selected each issue.
3. Enter each of these two issues separately (two posts), so that other participants can reflect on it in a structured way.
4. Also react to (at least) two issues raised by other participants about this paper.

Issue 1

“However, the process of collecting, checking, and analysing IPD is more complex than for aggregate data, and recent evidence suggests that not all IPD meta-analyses are done or reported to the same standard”

“These issues can make it difficult for researchers, clinicians, patients, policy makers, funders, and publishers to judge the quality of IPD meta-analyses.”

* As it is researches have to handle bias which is only getting worse in IPD as it’s a summarization of not just data but also difficulties with data
* Mistakes that were made might be ignored or not communicated openly
* A point made to find out whether a study should be part of a systematic review:
  + assessment of the quality or risk of bias of included trials
* at the same time – not including studies that were only partly published, not peer reviewed or where the process wasn’t documented to a valid standard could lead to bias
  + same as only including very large studies with the example of cardiovascular research that left out small studies that would have included a big time effort for little information gain
  + missingness of small studies therefore might be just as much of an issue as including them



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