TOP 10 REASONS FOR GRANT FAILURE

NOT FEASIBLE

WRONG TEAM

Section 3

- Establishes credibility and COMPETENCY of the project PI and team
- Indicates the likely validity of the idea
- Give reassurance about FEASIBILITY of proposal
- Indicates empirical basis for design choices

TOO BURDENSOME (TIME,

COST, PATIENT BURDEN)

Section 4: Methods

- Study Overview
- Matrix of events. (What/when?)
- Timelines, deliverables (GANT Chart)
- Recruitment
- Enrollment targets, retention estimates
- Selection of sample (why?)
- Selection of treatments (why A vs. B?)
- Selection of measures (why each? Why this many?)
- Quality control of interventions.
- Quality control of measurements.
- Data acquisition, management, compilation.
- Data analysis (one for each hypothesis)

Section 4: General Principles

- Take the reader through <u>how you decided</u> almost everything
- <u>Detail key elements</u> (e.g. sample definitions; assessments; findings; quality control of treatments, medication dosing, rescue medications)
- Anticipate obstacles and specify plans (e.g. missed appointments, missing data, protocol non-adherence, management of adverse effects, rescue medications)
- Discuss <u>other designs/methods</u> excluded (end of section 3)

TOO COMPLICATED

POORLY WRITTEN;

CANNOT FOLLOW

Everything should be made as simple as possible, but not more so.

Albert Eistein



Don't Bury the Lead Begin with Your Conclusion:

Summary Lead
Elaboration of lead
details become
less and less
important
as the
story
ends

1. CRUCIAL information

2. SUPPORTIVE information

3. RERETITIVE information



The Inverted Pyramid

Eliminate words: Like an Abstract Writer

Consumers can easily lower their winter heating bills By caulking and sealing, wearing warmer clothes, and letting the sun in whenever possible.

Caulking and Sealing

Cold air can enter your house through tiny gaps around windows, doors, exhaust fan outlets, or any other place where the exterior surface of your home is penetrated. In some older homes...

Language + Format - 1

- 1) AVOID compound sentences
- 2) Do not use different words to specify the same thing (e.g., subjects, participants, patients)
- 3) Use **bold** to highlight title of sections
- 4) Use introductory sentences (e.g., This section "will establish why studying X is important;" "how limited our knowledge is about;" why we believe that treatment B is very promising and now deserves a pivotal trial"

Language + Format - 2

- 5) Section titles can be statements or questions (e.g. "Depression is a devastating illness" vs "Why study depression?")
- 6) Summarize what you have said (e.g. In Section 2 at the end, "We have argued that X Y and Z are true, which establishes the need to study ____." Should this project be successful, it will ____ (change, revise concepts, provide new methods to ____, etc.)
- 7) Use present tense (vs. future)?

NO PILOT DATA

NO PRIMARY

HYPOTHESIS/OUTCOMES

Section 1: Aims and Hypotheses

- Introduction of Problem (what, why, how)
- Overall Aim Ties everything together, unifies
- Specific Aims (each aim leads to a hypothesis)
- Primary Hypothesis (one)
 - Primary Endpoint Clear?
 - Sets Power/Sample Size
- Secondary Hypotheses (limit 3)
- Exploratory Analysis (limit 2)

The Ideal Primary Hypothesis

 Has the Who, How, When, Where, and the <u>Key Metric</u>

Logically leads to design

DISCONNECT BETWEEN

SPECIFIC AIMS, HYPOTHESES

AND ANALYSES

Exemplar Hypothesis

We hypothesize that in the treatment of outpatients, _ to ___ years old in GP practice with unstable Type II diabetes as defined by _____ Hg/Ac levels, treatment A (dose, frequency, duration, by whom) will be more effective than treatment B (dose, frequency, duration, by whom) as measured by the % of Ss who achieve Hb/Ac <7 for 3 consecutive months

Exemplar Hypothesis

We hypothesize for a representative group of conservative psychiatric clinic outpatients attending practices, depression rating scale A will be of greater clinical utility by providing at least 10% greater sensitivity than scale B without losing more than 2% specificity in identifying patients with major depression vs patients without MDD as established by the Structured Clinical Interviews for DSM-IV

ARGUMENT FOR STUDY

SIGNIFICANCE FAILS



Section 2: Organization



- Present a step by step case <u>logically</u> (as a lawyer before a jury)
- Build the argument one step at a time
- Each sub-section should make a single point
- Each subsection title should state the point (or raise the question)
- The points taken together lead to the research question(s) which specific aim(s) → Hypotheses

Section 2: Significance

- Does the Question matter?
- Is the case persuasive?
- Why is this new knowledge important? (To whom?)
- Will results change practice? Change behavior?
- Will results change understanding? (Change minds?)
- Will results provide new methods?
- Is the investigator creative?

QUESTIONS ARE

NOT IMPACTFUL

Creating Ideas



Finding Ideas that Challenge Conventional Wisdom

- Literature review
- Observations (Routine, Accidental)
- Syntheses across fields
- Discussions with colleagues/patients
- Refine the question(s) by specifying knowledge and practice contexts, subjects; methods, primary outcomes (dependent; variables), study period (duration); cost
- Are the best targets of treatment established (i.e. which disorders, what biomarkers?)

The Quick Review

- (1) Will the Q be Answered Clearly?
- (2) Is the Q Significant?
- (3) Is the Protocol Feasible/Credible?
 - (Scope vs budgets)
 - (Investigator; Capacity + Credibility)
 - Preliminary findings?
- (4) Are Methods Adequate?(planful, detailed, feasible)
- (5) Is Protocol Safe/Ethical?

Top 10 Reasons For Grant Failure

- 1. Questions are not impactful
- 2. Argument for study fails
- 3. Disconnect between specific aims, hypotheses and analyses
- 4. No primary hypothesis/outcomes
- 5. No pilot data
- 6. Poorly written; cannot follow
- 7. Too complicated
- 8. Too burdensome (time, cost, patient burden)
- 9. Wrong team
- 10. Not feasible

Do not go where the path may lead. Go instead where there is no path and leave a trail.

Ralph Waldo Emerson