The Risk Of Bias In Non-randomized Studies – of Interventions (ROBINS-I) assessment tool

(version for cohort-type studies)

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ROBINS-I tool (Stage I): At protocol stage

Specify the review question

Participants	Workers exposed to asbestos
Experimental intervention	PPE
Comparator	No PPE
Outcomes	Asbestos fibre concentration in the breathing zone inside PPE

List the confounding domains relevant to all or most studies

risk perception, working experience, training

List co-interventions that could be different between intervention groups and that could impact on outcomes

environmental exposure reduction measure

ROBINS-I tool (Stage II): For each study

Specify a target randomized trial specific to the study

Design	Individually randomized / Cluster randomized / Matched (e.g. cross-over)
Participants	Workers exposed to asbestos
Experimental intervention	PPE
Comparator	No PPE
s your aim for this study?	
\Box X to assess the effect of a	assignment to intervention
\Box to assess the effect of s	tarting and adhering to intervention
Specify the outcome	
Specify which outcome is being a perion or harm of intervention.	assessed for risk of bias (typically from among those earmarked for the Summary of Findings table). Specify whether this is a proposed benefit
Benefit: a lower level of asbest	os exposure in the inhaled air
Specify the numerical result b	eing assessed
n case of multiple alternative an that uniquely defines the result	halyses being presented, specify the numeric result (e.g. RR = 1.52 (95% CI 0.83 to 2.77) and/or a reference (e.g. to a table, figure or paragraph) being assessed.

Preliminary consideration of confounders

Complete a row for each important confounding domain (i) listed in the review protocol; and (ii) relevant to the setting of this particular study, or which the study authors identified as potentially important.

"Important" confounding domains are those for which, in the context of this study, adjustment is expected to lead to a clinically important change in the estimated effect of the intervention. "Validity" refers to whether the confounding variable or variables fully measure the domain, while "reliability" refers to the precision of the measurement (more measurement error means less reliability).

(i) Confounding domains list	ed in the review protocol			
Confounding domain	Measured variable(s)	Is there evidence that controlling for this variable was unnecessary?*	Is the confounding domain measured validly and reliably by this variable (or these variables)?	OPTIONAL: Is failure to adjust fo this variable (alone) expected to favour the experimental intervention or the comparator?
Risk Perception			No information	Favour experimental / Favour comparator / No information
Working experience			No information	
Training			No information	
Age			No information	

(ii) Additional confounding domains relevant to the setting of this particular study, or which the study authors identified as important				
Confounding domain	Measured variable(s)	Is there evidence that controlling for this variable was unnecessary?*	Is the confounding domain measured validly and reliably by this variable (or these variables)?	OPTIONAL: Is failure to adjust for this variable (alone) expected to favour the experimental intervention or the comparator?
			Yes / No / No information	Favour experimental / Favour comparator / No information

^{*} In the context of a particular study, variables can be demonstrated not to be confounders and so not included in the analysis: (a) if they are not predictive of the outcome; (b) if they are not predictive of intervention; or (c) because adjustment makes no or minimal difference to the estimated effect of the primary parameter. Note that "no statistically significant association" is not the same as "not predictive".

Preliminary consideration of co-interventions

Complete a row for each important co-intervention (i) listed in the review protocol; and (ii) relevant to the setting of this particular study, or which the study authors identified as important.

"Important" co-interventions are those for which, in the context of this study, adjustment is expected to lead to a clinically important change in the estimated effect of the intervention.

(i) Co-interventions listed in the review protocol			
Co-intervention	Is there evidence that controlling for this co-intervention was unnecessary (e.g. because it was not administered)?	Is presence of this co-intervention likely to favour outcomes in the experimental intervention or the comparator	
Environmental measures to reduce asbestos	No information	Favour experimental / Favour comparator / No information	
		Favour experimental / Favour comparator / No information	
		Favour experimental / Favour comparator / No information	
		Favour experimental / Favour comparator / No information	

(ii) Additional co-interventions relevant to the setting of this particular study, or which the study authors identified as important		
Co-intervention	Is there evidence that controlling for this co-intervention was unnecessary (e.g. because it was not administered)?	Is presence of this co-intervention likely to favour outcomes in the experimental intervention or the comparator
		Favour experimental / Favour comparator / No information
		Favour experimental / Favour comparator / No information
		Favour experimental / Favour comparator / No information
		Favour experimental / Favour comparator / No information

Risk of bias assessment

Responses <u>underlined in green</u> are potential markers for low risk of bias, and responses in <u>red</u> are potential markers for a risk of bias. Where questions relate only to sign posts to other questions, no formatting is used.

Signalling questions	Description	Response options
ias due to confounding		
1.1 Is there potential for confounding of the effect of intervention in this study?	Not reported on confounding domains	Y
If N/PN to 1.1: the study can be considered to be at low risk of bias due to confounding and no further signalling questions need be considered		
If Y/PY to 1.1: determine whether there is a need to assess time-varying confounding:		
1.2. Was the analysis based on splitting participants' follow up time according to intervention received?		N
If N/PN, answer questions relating to baseline confounding (1.4 to 1.6)		
If Y/PY, go to question 1.3.		
1.3. Were intervention discontinuations or switches likely to be related to factors that are prognostic for the outcome?		N
If N/PN, answer questions relating to baseline confounding (1.4 to 1.6)		
If Y/PY, answer questions relating to both baseline and time-varying confounding (1.7 and 1.8)		

Questions relating to baseline confounding only	
1.4. Did the authors use an appropriate analysis method that controlled for all the important confounding domains?	NA /
1.5. If <u>Y/PY</u> to 1.4: Were confounding domains that were controlled for measured validly and reliably by the variables available in this study?	NA / Y / PY / PN / N / NI
1.6. Did the authors control for any post- intervention variables that could have been affected by the intervention?	NA / Y / PY / PN / NI
Questions relating to baseline and time-varying confounding	
1.7. Did the authors use an appropriate analysis method that controlled for all the important confounding domains and for time-varying confounding?	NA
1.8. If Y/PY to 1.7: Were confounding domains that were controlled for measured validly and reliably by the variables available in this study?	NA / Y / PY / PN / N / NI
Risk of bias judgement	Moderate
Optional: What is the predicted direction of bias due to	Favours experimental / Favour
confounding?	comparator / Unpredictable

Bias in selection of participants into the study		
2.1. Was selection of participants into the study (or into the analysis) based on participant characteristics observed after the start of intervention?	All asbestos workers but no information about selection process.	РҮ
If N/PN to 2.1: go to 2.4		
2.2. If Y/PY to 2.1: Were the post-intervention variables that influenced selection likely to be associated with intervention?		NA / Y / PY / PN / N / NI
2.3 If Y/PY to 2.2: Were the post-intervention variables that influenced selection likely to be influenced by the outcome or a cause of the outcome?		NA / Y / PY / <u>PN / N</u> / NI
2.4. Do start of follow-up and start of intervention coincide for most participants?		<u>Y/</u>
2.5. If Y/PY to 2.2 and 2.3, or N/PN to 2.4: Were adjustment techniques used that are likely to correct for the presence of selection biases?		NA / <u>Y / PY</u> / PN / N / NI
Risk of bias judgement		Serious
Optional: What is the predicted direction of bias due to selection of participants into the study?		Favours experimental / Favours comparator / Towards null /Away from null / Unpredictable

Bias in classification of interventions		
3.1 Were intervention groups clearly defined?	clear classification of the interventions – all wearing defined type of PPE	<u>Y /</u>
3.2 Was the information used to define intervention groups recorded at the start of the intervention?		<u>Y/</u>
3.3 Could classification of intervention status have been affected by knowledge of the outcome or risk of the outcome?		<u>/ N</u> /
Risk of bias judgement		Low /
Optional: What is the predicted direction of bias due to classification of interventions?		Favours experimental / Favours comparator / Towards null /Away from null / Unpredictable

Bias due to deviations from intended interventions			
If your aim for this study is to assess the effect of ass	ignment to intervention, answer questions 4.1 and 4.2		
4.1. Were there deviations from the intended intervention beyond what would be expected in usual practice?	no known deviations	<u>N</u>	
4.2. If Y/PY to 4.1: Were these deviations from intended intervention unbalanced between groups and likely to have affected the outcome?		NA / <mark>Y / PY</mark> / <u>PN / N</u> / NI	
If your aim for this study is to assess the effect of star	rting and adhering to intervention, answer questions 4.3 to 4.6		
4.3. Were important co-interventions balanced across intervention groups?		NI	
4.4. Was the intervention implemented successfully for most participants?		<u>Y /</u>	
4.5. Did study participants adhere to the assigned intervention regimen?		<u>Y /</u>	
4.6. If N/PN to 4.3, 4.4 or 4.5: Was an appropriate analysis used to estimate the effect of starting and adhering to the intervention?		NA / <u>Y / PY</u> / PN / N / NI	
Risk of bias judgement		Low /	
Optional: What is the predicted direction of bias due to deviations from the intended interventions?		Favours experimental / Favours comparator / Towards null /Away from null / Unpredictable	

as due to missing data		
5.1 Were outcome data available for all, or nearly all, participants?	Report all results	<u>Y/</u>
5.2 Were participants excluded due to missing data on intervention status?		<u>/ N</u> /
5.3 Were participants excluded due to missing data on other variables needed for the analysis?		<u>N</u> /
5.4 If PN/N to 5.1, or Y/PY to 5.2 or 5.3: Are the proportion of participants and reasons for missing data similar across interventions?		NA / <u>Y / PY</u> / <mark>PN / N</mark> / NI
5.5 If PN/N to 5.1, or Y/PY to 5.2 or 5.3: Is there evidence that results were robust to the presence of missing data?		NA / <u>Y / PY</u> / PN / N / NI
Risk of bias judgement		Low /
Optional: What is the predicted direction of bias due to missing data?		Favours experimental / Favours comparator / Towards null /Away from null / Unpredictable

Bias in measurement of outcomes				
6.1 Could the outcome measure have been influenced by knowledge of the intervention received?	Not measured blinded for the intervention, worker behaviour might differ if part of study	PY		
6.2 Were outcome assessors aware of the intervention received by study participants?		Y		
6.3 Were the methods of outcome assessment comparable across intervention groups?		<u>Y /</u>		
6.4 Were any systematic errors in measurement of the outcome related to intervention received?		<u>N</u> /		
Risk of bias judgement		Moderate		
Optional: What is the predicted direction of bias due to measurement of outcomes?		Favours experimental / Favours comparator / Towards null /Away from null / Unpredictable		

Bias in selection of the reported result		
Is the reported effect estimate likely to be selected, on the basis of the results, from	All results reported	
7.1 multiple outcome <i>measurements</i> within the outcome domain?		<u>N</u> /
7.2 multiple <i>analyses</i> of the intervention-outcome relationship?		<u>N</u> / NI
7.3 different subgroups?		PY
Risk of bias judgement		Low
Optional: What is the predicted direction of bias due		Favours experimental /
to selection of the reported result?		Favours comparator /
		Towards null /Away from
		null / Unpredictable

Overall bias			
Risk of bias judgement		Moderate	
Optional: What is the overall predicted direction of		Favours experimental /	
bias for this outcome?		Favours comparator /	
		Towards null /Away from	
		null / Unpredictable	



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