The failure to rigorously translate research knowledge into clinical practice constitutes a major challenge for evidence-based healthcare. Some examples of the high relevance of standardising outcome measurement in clinical trials are: A systematic overview of all 64 Cochrane Skin Group (CSG) reviews (comprising 1566 trials), published until January 2015 showed, that from 402 predefined outcomes in the 64 CSG reviews 131 (33%) outcomes were not reported in a single trial included in these reviews. Furthermore very few of the current set of systematic reviews prepared by the CSG are able to include a meta-analysis, and when it is possible, it is usually only for a few trials and for a comparison of limited usefulness.

The Cochrane Skin Group - Core Outcomes Set Initiative (CSG-COUSIN) aims to develop and implement core outcomes sets in dermatology in order to improve and standardize outcome measurement for skin diseases in clinical trials and to make trial evidence more useful.

CSG-COUSIN was initiated by Jochen Schmitt and Hywel Williams in 2014 with the full support of the CSG editors. The inaugural meeting of CSG-COUSIN became the theme of the annual CSG meeting in Dresden in March 2015. CSG-COUSIN is an international interdisciplinary open group co-ordinated by the Center for Evidence-Based Healthcare, University of Dresden, Germany. We were very pleased with the energy and enthusiasm expressed at the inaugural meeting in Dresden, attended by 29 individuals representing a broad mix of different stakeholder groups, professions, skills, and perspectives attended. The main aim of the CSG-COUSIN inaugural meeting was to introduce this initiative and to evaluate if there was sufficient interest and commitment from the international community to collaboratively work on the development, quality assurance, implementation, and dissemination of core outcome sets in dermatology. And we can say an unequivocal “Yes”: all attendees see a great need for action and are willing to take action. We already achieved a great deal and are proud to present our first newsletter with our first reports and results. Please contact us at COUSIN@uniklinikum-dresden.de if you would like to get involved!

Prof. Hywel Williams  Coordinating Editor of the CSG  www.uniklinikum-dresden.de/COUSIN
Prof. Jochen Schmitt  Chair of CSG-COUSIN  October 2015
CORE OUTCOME SET

Why do we need core outcome sets?

The Cochrane Collaboration plays a critical role in summarising and translating research knowledge into clinical practice. The choice of adequate outcome measures in clinical trials is essential to make trials meaningful and valid. The failure to assess the outcome domains most important to patients and the continued use of outcome measurement instruments with unclear validity and reliability are frequent and important barriers towards evidence-based medicine.

The second barrier in evidence-based clinical decision making in dermatology is the use of many different outcome measures in clinical trials on a specific skin condition, which makes it almost impossible to compare the studies or include them in a meta-analysis.

What is core outcome set?

A core outcome set (COS) is a standardized consented minimum set of outcome measurement instruments to be used in every trial in medical field. A core outcome set does not mean that only the COS should be measured, but simply that the COS should be measured in all trials of that particular skin disease so that results can be compared properly. Outcomes that are additional to the COS can be measured as required by the specific study.

THE INAUGURAL MEETING OF CSG-COUSIN

The inaugural meeting of CSG-COUSIN as the exclusive theme of the Annual Cochrane Skin Group Meeting was a great success. Besides interesting presentations there has been enough space for discussion and exchange regarding conceptional work.

All presentations and the final minutes from the Annual Cochrane Skin Group Meeting 2015 can be downloaded here.

The informative meeting report is submitted to the British Journal of Dermatology and currently under review. Please be patient!

Please check our new homepage
► www.uniklinikum-dresden.de/COUSIN

IF YOU ARE INTERESTED IN THE DEVELOPMENT OF CORE OUTCOME SETS OR IN SYSTEMATIC REVIEWS IN THE FIELD OF DERMATOLOGY, OR IN THE WORK OF CSG-COUSIN GENERALLY, JUST GET IN CONTACT:
COUSIN@uniklinikum-dresden.de
AIMS OF CSG-COUSIN

CSG-COUSIN is a multidisciplinary, international initiative that aims

- to support the development and to strengthen the quality of core outcome sets (COS) in dermatology
- to standardize the selection of outcomes and outcome measurements in dermatology clinical trials to make trial evidence more useful and comparable
- to strengthen the quality and interpretability of systematic reviews in dermatology through the implementation of COS in trials and reviews
- to strengthen the quality of evidence–based decision making in clinical practice and in this way the quality of care for dermatology patients.

The following organisational structure of CSG-COUSIN has been developed:

CSG-COUSIN TEAMS

The management team coordinates CSG-COUSIN and provides technical and organizational support for the methods group and project groups. Tasks of the management team include information management (e.g. setup of databases of COS development processes and key articles on COS and outcome measurement instruments in dermatology), support of COS project groups with the provision of a glossary of terms and definitions and with the systematic literature searches, and the development and provision of software to support and standardize systematic reviews for COS development following the HOME roadmap.

The methods group will provide methodological support and internal peer review for CSG-COUSIN project groups, aims to conduct methodological studies on outcomes research and COS development (e.g. on the best way to involve patients, or optimal Delphi approaches), further validate and possibly further develop methodological standards based on the HOME roadmap, and set up quality standards for COS development and implementation processes. This is important as an invalid or not widely implemented COS would not help to overcome the current problems, or may even exacerbate the current situation we are facing due to unstandardized and frequently invalid outcome assessments in clinical trials.

First project of the methods group: Meta-Epidemiology Study

▶ Protocol here
CSG-COUSIN project groups will work on the development and implementation of specific COS in dermatology. Project groups consist of a lead, patient representative, member of the methods group, and other group members representing different stakeholder groups and geographical regions.

<table>
<thead>
<tr>
<th>Current COS-project groups within CSG-COUSIN</th>
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<tbody>
<tr>
<td>Acne vulgaris (ACORN)</td>
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<tr>
<td>Atopic Eczema (HOME)</td>
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<tr>
<td>Appearance of Facial Aging (IMPROVED)</td>
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<tr>
<td>Hand Eczema</td>
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<td>Hidradenitis suppurativa</td>
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<td>Incontinence-Associated Dermatitis</td>
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<td>Melanoma</td>
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<td>Nail psoriasis</td>
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<td>Urticaria</td>
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<tr>
<td>Vascular malformations (OVAMA)</td>
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<tr>
<td>Vitiligo</td>
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<tr>
<td>Wound healing</td>
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</tbody>
</table>

If you are interested in developing a COS for one of these or any other skin disease please get in contact: COUSIN@uniklinikum-dresden.de

Presentation of the project group: Development of a COS in Hidradenitis suppurativa

One of the key rate limiting steps in the design and funding of robust clinical trials to improve the care of people with hidradenitis suppurativa (HS) is heterogeneity of outcome measures used to determine treatment success or failure. This issue has been highlighted in the Cochrane review of “Interventions for HS” due to be published shortly.

CSG-COUSIN has nominated the first author of the HS Cochrane review, Dr John Ingram, to coordinate the development of a core outcome set in HS, in a way that follows the roadmap set out by the HOME initiative in eczema. Dr Ingram, a senior lecturer and consultant dermatologist in Cardiff, UK, commenced a five year NISCHR fellowship to investigate HS epidemiology and outcome measures in October 2014. His interest in HS outcome measures began several years previously when early work on the Cochrane review demonstrated substantial outcome measure heterogeneity in HS.¹

In following the HOME roadmap, Dr Ingram has nearly completed a systematic review of HS outcome measures, to determine the current position. The next phase of the HS core outcome set development process will involve consensus studies and structured consensus voting and welcomes collaboration with others interested in this distressing disease.