

AGREE Appendix for Guidelines

What is the overall objective of the guideline?

To provide guidance on the use of disease modifying treatments for patients with multiple sclerosis within the British Isles.

What are the specific questions covered by the guidelines?

When should disease-modifying treatments be used in patients with multiple sclerosis and how do neurologists and patients choose which drug to use.

What is the population to whom the guideline is meant to apply?

Patients with multiple sclerosis.

What groups are represented in the guideline development group? Are all relevant groups represented?

The guideline development group was made up of neurologists with expertise in multiple sclerosis, with advice from patient organisations.

Have the views of the target population (patients or patient groups) been sought?

The MS Society and the MS Trust, both organisations for patients with MS, contributed to the guideline development.

Who are the target users of the guidelines?

Neurologists who prescribe disease-modifying treatments for patients with multiple sclerosis – ‘multiple sclerosis specialist neurologists’.

Were methods to search for evidence systematic?

Specific search strategies are not described in the document but all phase III disease modifying treatment trials were reviewed.

What were the criteria for selecting evidence?

Phase III randomised trials.

Were strengths and limitations of evidence described?

The strengths and weaknesses are discussed including the difficulties in conducting trials in patients with multiple sclerosis, the variable end points and range of surrogate markers as well as the paucity of trials that compare therapies.

What methods were used to formulate recommendations?

This document was prepared by the ABN MS Advisory Section using a modified Delphi process (not anonymised; and with the emergence of a stable consensus as the endpoint). NJS prepared the first draft, starting from the 2009 ABN Guidelines document as an initial template. This was circulated to all thirteen other members of the ABN MS Section. Multiple iterations and revisions followed over a four-month period with over twenty versions successively circulated during the development period. On a number of residual points where varied opinion remained, a more formal poll of all members was taken, and for each point over 80% assent was confirmed.

Were health benefits, side effects and risks considered in formulating recommendations?

Yes.

Is there an explicit link between recommendations and supporting evidence?

Where available, yes.

Has the guideline been reviewed by experts prior to publication?

The guideline was reviewed by the Executive Committee of the Association of British Neurologists and two independent referees.

Is there a plan for updating the guideline?

Suggestion of revision in 12 months, by which time it is anticipated a further two disease-modifying agents will have been licensed.

Are recommendations specific and unambiguous?

The recommendations provide a framework to allow multiple sclerosis specialists to discuss the treatment options with their patients.

Are management options clearly presented?

The document is short and clear.

Are key recommendations easily identifiable?

Yes.

Were facilitators or barriers to the application considered?

Not exhaustively, though many were (including differences in funding arrangements within areas of the British Isles).

Do you describe how the guidelines should be put into practice?

The way these guidelines would be used in the UK is described.

Have the resource implications of the recommendations been considered?

No.

Do the guidelines present audit or monitoring criteria?

No.

Have the views of the funding organisation influenced the content of the guideline?

This guideline was developed by the members of the Association of British Neurologists Multiple Sclerosis Section who undertook the work voluntarily and without payment.

Are the competing interests of the guideline development group been recorded?

The competing interests of all participants and the sponsoring organisation have been recorded.