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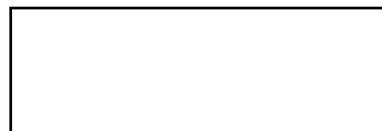
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International prospective register of systematic reviews

What are the unmet supportive care needs of men and their partner/caregivers living with and beyond penile cancer? A systematic review

Catherine Paterson, Charlotte Primeau, Mallory Bowkerm, Bente Jensen, Steven MacLennan, James N'Dow

Citation

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Review question

1. What are the different domains of unmet supportive care needs of men and their partner/caregivers affected by penile cancer?
2. What are the most frequently reported individual domains of unmet need in the current available literature?

Searches

The CINAHL, MEDLINE, BNI, PsycINFO, Embase, The Cochrane Central Register of Controlled Trials (CENTRAL) and ClinicalTrial.gov will be searched for all relevant publications (see search history below; data cut off 1990 – present, English language studies only, exclusion of case reports, reviews, commentaries, editorials, studies with no clear data on unmet supportive care needs). Relevant systematic reviews will be scrutinised for potentially relevant studies for screening.

Search strategy

https://www.crd.york.ac.uk/PROSPEROFILES/102376_STRATEGY_20180625.pdf

Types of study to be included

Inclusion

- Studies investigating unmet supportive care needs of patients and their partner/caregivers affected by penile cancer.
- Qualitative and quantitative methods irrespective of research design.
- Relevant systematic reviews will be scrutinised for potentially relevant studies for screening.
- Studies conducted with adults (? 18 years old)

Exclusion

- Studies conducted with patients with mixed cancer groups, except when a separate sub-group analyses of only penile cancer patients were reported. Case reports, commentaries, editorials, and studies where unmet supportive care needs were not explicitly reported.

Condition or domain being studied

Individual supportive care needs are classified into eleven primary domains of need [9]. Specifically, the domains include physical, psychosocial/emotional, family-related, social, interpersonal/intimacy, practical, daily living, spiritual/existential, health system/information, patient-clinician communication, and cognitive needs. The classification of supportive care needs domains are informed by the Supportive Care Needs Framework.

Participants/population

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- Adult men (?18 years of age) with a confirmed histological diagnosis of penile cancer irrespective of stage of disease or treatment.

Intervention(s), exposure(s)

Studies investigating unmet supportive care needs of patients and their partner/caregivers affected by penile cancer.

Comparator(s)/control

Not applicable.

Context

Primary outcome(s)

Non-oncological outcomes related to:

- Unmet supportive care needs (e.g. the Supportive Care Needs Survey, qualitative experiences).

Secondary outcome(s)

None.

Data extraction (selection and coding)

Following de-duplication, two review authors will independently screen the titles and abstracts of identified records for eligibility. The full-text of all potentially eligible records will be retrieved and screened independently by two review authors using a standardised form, linking together multiple records of the same study in the process. Any disagreements will be resolved by discussion or by consulting a third review author. The study selection process will be described using a PRISMA flow diagram.

A minimum of two review authors (CP, CP, MB, BJ) will independently extract outcome data. Two people will independently perform data extraction and then compare for accuracy. Any disagreements will be resolved by discussion or by consulting a third review author. A standardised data extraction form will be developed and piloted before its use. In case of any incompletely reported data, study authors will be contacted.

Data to be extracted and included in the 'characteristics of included studies' table are: study design; countries and institutions where the data were collected; dates defining start and end of patient recruitment and follow-up; whether there was an a priori protocol or analysis plan; participant demographic and clinical characteristics, unmet supportive care needs; the numbers of participants who were included in the study; losses and exclusions of participants, with reasons; description of interventions; study funding sources; ethical approval; power calculation.

Risk of bias (quality) assessment

Methodological quality evaluation will be conducted using the two quality appraisal tools, one quantitative appraisal tool and one qualitative appraisal tool which enabled a plethora of methodologies to be evaluated. The quality appraisal tools have been used in a previous integrative review. The quantitative appraisal tool will assess a range of designs including: RCT's, non-RCT, cohort, case-control, other observational studies (for example, multiple time series, case studies, cross-sectional designs) and were classified as "good", "fair" and "poor" according to the criteria specific to each study design. The quantitative appraisal tool consists of 17 items and three levels of quality assessment: good (2), fair (1), and poor (0). Some items in the quantitative assessment tool are only relevant to RCT's; therefore a "non-applicable" item option was available for other research designs. Scores across the items will be summed to create a quality score and

represented as a percentage to account for any non-applicable items. The qualitative appraisal tool has 15 items and three levels of quality assessment ranging from (2 to 0) and represented as a percentage score.

Strategy for data synthesis

The review will use a narrative synthesis and tabulation of primary research studies to generate broad findings and conclusions. More specifically, the narrative synthesis will undertake the following steps data reduction (sub-group classification based on levels of evidence and the review questions), narrative data comparison (iterative process of making comparisons and identifying relationships) and finally, drawing conclusions. The levels of evidence will be categorised by typologies of supporting evidence identified by the Department of Health in the National Service Framework.

Analysis of subgroups or subsets

None.

Contact details for further information

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Organisational affiliation of the review

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<https://www3.rgu.ac.uk/about/schools-and-departments/school-of-nursing-and-midwifery/school-of-nursing-and-midwifery>

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09 July 2018

Anticipated completion date

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None.

Conflicts of interest

Language

English

Country

Denmark, Scotland, United States of America

Published protocol

https://www.crd.york.ac.uk/PROSPEROFILES/102376_PROTOCOL_20180625.pdf

Stage of review

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Review_Ongoing

Subject index terms status

Subject indexing assigned by CRD

Subject index terms

Caregivers; Humans; Life; Male; Penile Neoplasms; Sexual Partners; Social Support

Date of registration in PROSPERO

03 July 2018

Date of publication of this version

03 July 2018

Details of any existing review of the same topic by the same authors

Stage of review at time of this submission

Stage	Started	Completed
Preliminary searches	Yes	Yes
Piloting of the study selection process	No	No
Formal screening of search results against eligibility criteria	No	No
Data extraction	No	No
Risk of bias (quality) assessment	No	No
Data analysis	No	No

Versions

03 July 2018

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