Minimally important differences in patient or proxy-reported outcome studies relevant to children: A systematic review



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Copyright © 2017 by the American Academyof Pediatrics. All rights reserved. CONTEXT: No study has characterized and appraised all anchor-based minimally important differences (MIDs) associated with patient-reported outcome (PRO) instruments in pediatric studies. OBJECTIVE: To complete a comprehensive systematic survey and appraisal of published anchorbased MIDs associated with PRO instruments used in children. DATA SOURCES: Medline, Embase, and PsycINFO (1989 to February 11, 2015). STUDY SELECTION: Studies reporting empirical ascertainment of anchor-based MIDs among PROs used in pediatric care. DATA EXTRACTION: All pertinent data items related to the characteristics of PRO instruments, anchors, and MIDs. RESULTS: Of 4179 unique citations, 30 studies (including 32 cohorts) proved eligible and reported on 28 unique PROs (8 generic, 13 disease-specific, 5 symptoms-specific, 2 functionspecific), with 9 (32%) classified as patient-reported, 11 (39%) proxy-reported, and 8 (29%) both patient-