

## NEWCASTLE - OTTAWA QUALITY ASSESSMENT SCALE CASE CONTROL STUDIES

Note: A study can be awarded a maximum of one star for each numbered item within the Selection and Exposure categories. A maximum of two stars can be given for Comparability.

### Selection

- 1) Is the case definition adequate?
  - a) yes, with independent validation \*
  - b) yes, eg record linkage or based on self reports
  - c) no description
- 2) Representativeness of the cases
  - a) consecutive or obviously representative series of cases \*
  - b) potential for selection biases or not stated
- 3) Selection of Controls
  - a) community controls \*
  - b) hospital controls
  - c) no description
- 4) Definition of Controls
  - a) no history of disease (endpoint) \*
  - b) no description of source

### Comparability

- 1) Comparability of cases and controls on the basis of the design or analysis
  - a) study controls for \_\_\_\_\_ (Select the most important factor.) \*
  - b) study controls for any additional factor \* (This criteria could be modified to indicate specific control for a second important factor.)

### Exposure

- 1) Ascertainment of exposure
  - a) secure record (eg surgical records) \*
  - b) structured interview where blind to case/control status \*
  - c) interview not blinded to case/control status
  - d) written self report or medical record only
  - e) no description
- 2) Same method of ascertainment for cases and controls
  - a) yes \*
  - b) no
- 3) Non-Response rate
  - a) same rate for both groups \*
  - b) non respondents described
  - c) rate different and no designation

## NEWCASTLE - OTTAWA QUALITY ASSESSMENT SCALE COHORT STUDIES

Note: A study can be awarded a maximum of one star for each numbered item within the Selection and Outcome categories. A maximum of two stars can be given for Comparability

### Selection

- 1) Representativeness of the exposed cohort
  - a) truly representative of the average \_\_\_\_\_ (describe) in the community ★
  - b) somewhat representative of the average \_\_\_\_\_ in the community ★
  - c) selected group of users eg nurses, volunteers
  - d) no description of the derivation of the cohort
- 2) Selection of the non exposed cohort
  - a) drawn from the same community as the exposed cohort ★
  - b) drawn from a different source
  - c) no description of the derivation of the non exposed cohort
- 3) Ascertainment of exposure
  - a) secure record (eg surgical records) ★
  - b) structured interview ★
  - c) written self report
  - d) no description
- 4) Demonstration that outcome of interest was not present at start of study
  - a) yes ★
  - b) no

### Comparability

- 1) Comparability of cohorts on the basis of the design or analysis
  - a) study controls for \_\_\_\_\_ (select the most important factor) ★
  - b) study controls for any additional factor ★ (This criteria could be modified to indicate specific control for a second important factor.)

### Outcome

- 1) Assessment of outcome
  - a) independent blind assessment ★
  - b) record linkage ★
  - c) self report
  - d) no description
- 2) Was follow-up long enough for outcomes to occur
  - a) yes (select an adequate follow up period for outcome of interest) ★
  - b) no
- 3) Adequacy of follow up of cohorts
  - a) complete follow up - all subjects accounted for ★
  - b) subjects lost to follow up unlikely to introduce bias - small number lost - > \_\_\_\_ % (select an adequate %) follow up, or description provided of those lost) ★
  - c) follow up rate < \_\_\_\_ % (select an adequate %) and no description of those lost
  - d) no statement

Note: 1 ★ means 1 point, and studies with scores of 0–4 points were identified as low quality and 5–9 points as high quality and only high-quality literature will be in our analysis.