

Data sharing for clinical research:  
Experiences, techniques, methodologies

John Ioannidis

# Several Libraries of Alexandria disappear every day



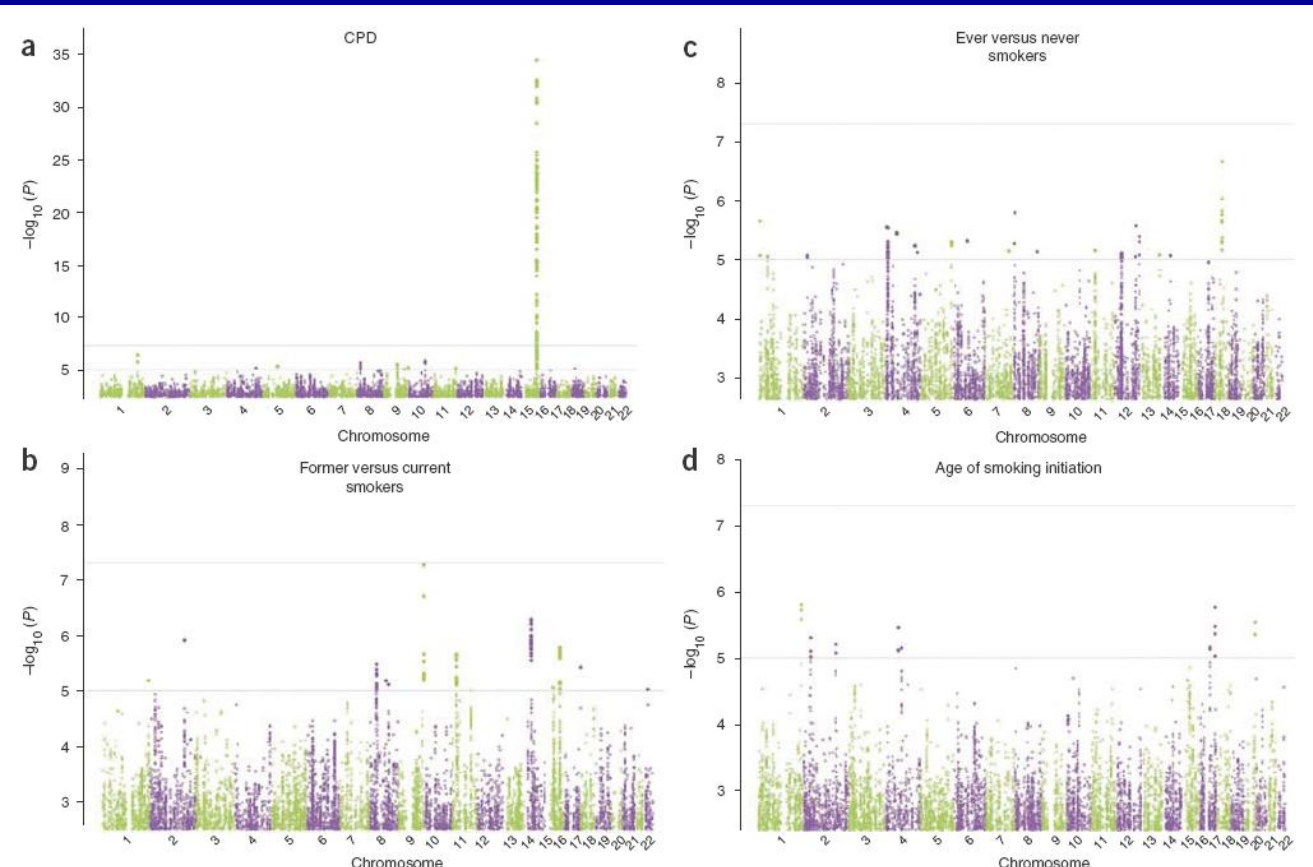
# Some experiences in clinical research data sharing

- Meta-analyses of individual participant data from randomized trials for primary or secondary outcomes (efficacy or harms)
- Exploratory (discovery) analyses based on existing data, e.g. biomarkers
- Development and validation of predictive models
- Methodological work, e.g. risk modeling
- Repeatability and reproducibility checks
- Prospective meta-analyses and networks

# Some basic principles

- It is more difficult (or impossible) to unearth data after the fact
- It is better to arrange upfront for the full individual-level data to be available
- Coding, cleaning, logical queries take some time, but their difficulty is probably over-rated
- Difficulty of standardization in post-hoc efforts limits the utility of the information

# Prospective large-scale collaboration



nature  
genetics

Genome-wide meta-analyses identify multiple loci associated with smoking behavior

Nature Genetics, 2010



# Repeatability

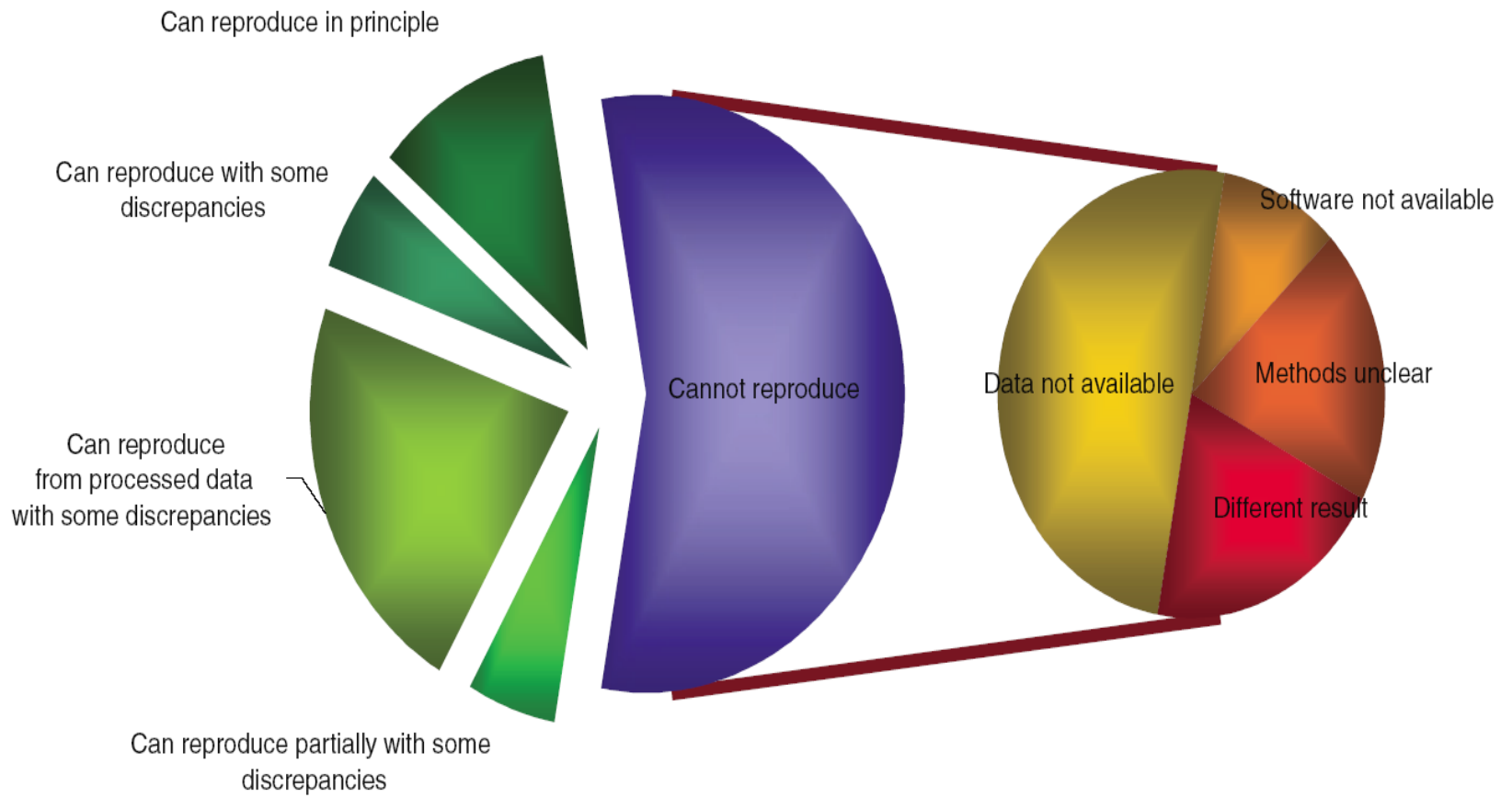
ANALYSIS

nature  
genetics

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## Repeatability of published microarray gene expression analyses

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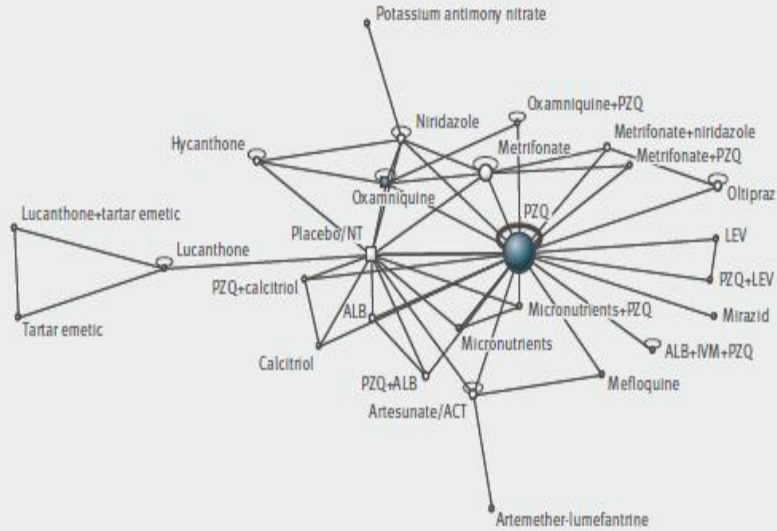
**Figure 1** Summary of the efforts to replicate the published analyses.



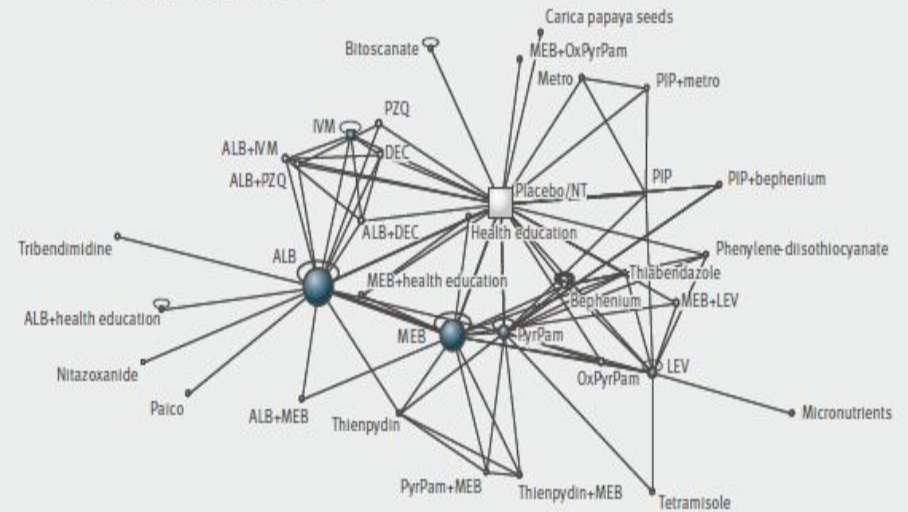
# Some additional problems encountered

- Politics
- Clash of evidence-based medicine with expert-based medicine (Goetzsche & Ioannidis, BMJ in press 2012)
- Not all datasets may be available at the individual participant level = new possibilities for selective reporting biases
- All of these problems are almost eliminated if sharing of individual level information is agreed before the data is generated

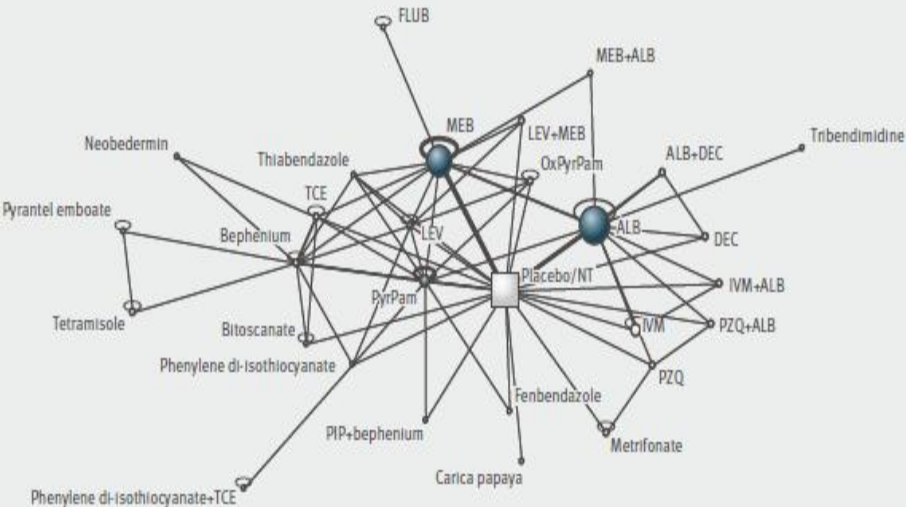
### Schistosomiasis (113 trials)



### Ascariasis (78 trials)



### Hookworm (77 trials)



### Trichuriasis (66 trials)

