

NASEM Webinar - Updating Standards for Systematic Reviews: Overview of the NIH Pathways to Prevention Program

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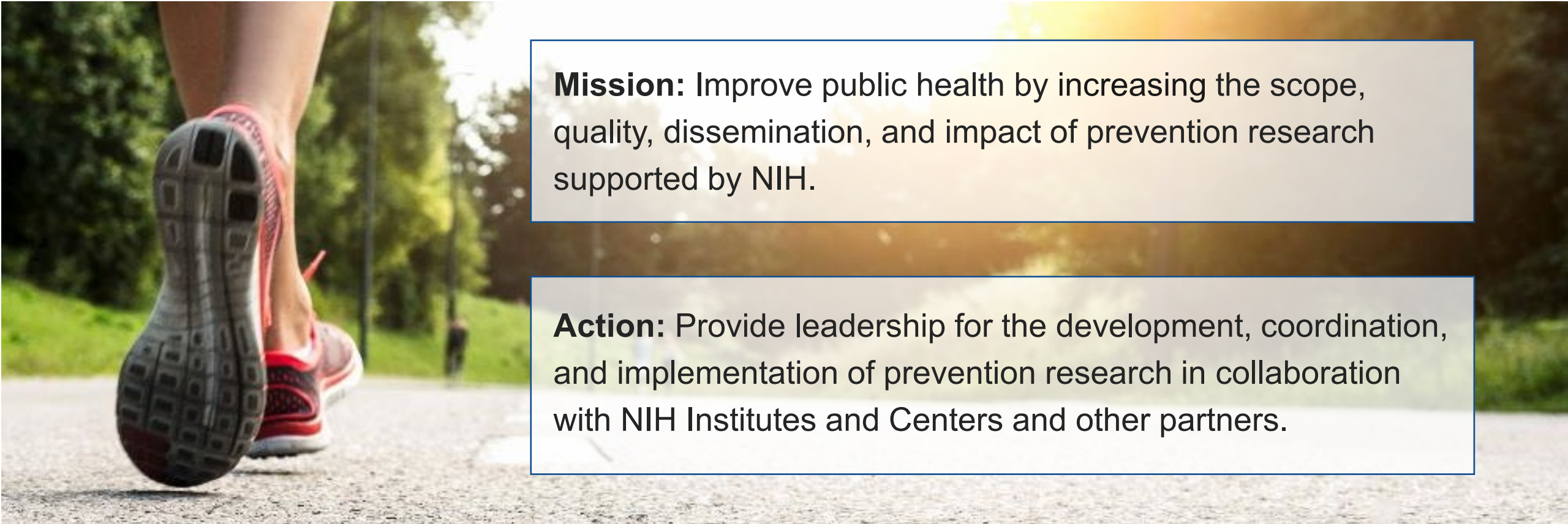
Goal for today: Discuss the U.S. funder perspective and consider the following discussion questions

- When do you choose to fund a systematic review vs. new research?
- How does your organization work to support the ongoing financial and other resource needs of review teams? Do you anticipate changes in the future?
- What is your organization willing to trade, or potentially sacrifice, for a faster systematic review?
- What are the biggest barriers to funding systematic reviews?
- Your topics typically have a broad focus. Do you anticipate supporting a variety of quicker, cheaper reviews with more narrow scopes and/or specific key questions?
- In your current reviews, what specific standards do you think are crucial to maintain, revise, or add?

Disclosures

- No financial conflicts of interest

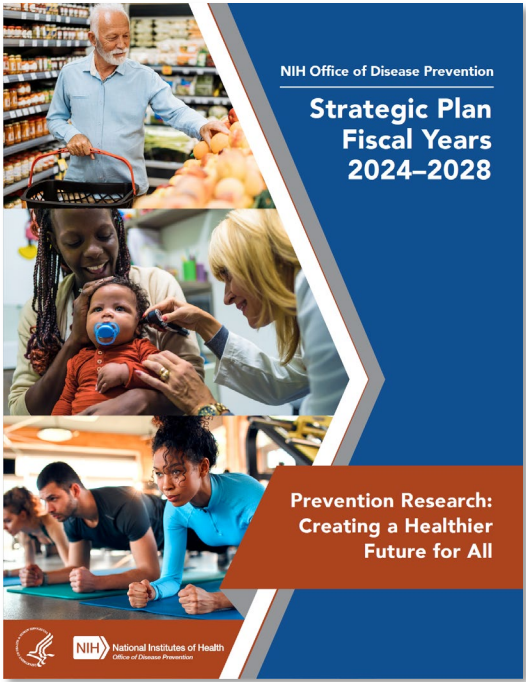
About the NIH Office of Disease Prevention



Mission: Improve public health by increasing the scope, quality, dissemination, and impact of prevention research supported by NIH.

Action: Provide leadership for the development, coordination, and implementation of prevention research in collaboration with NIH Institutes and Centers and other partners.

ODP Strategic Priorities and Cross-Cutting Themes



7 strategic priorities
5 cross-cutting themes



Strategic Priority: Identify Research Gaps

Identify prevention research areas for investment or expanded effort by NIH.

Objectives

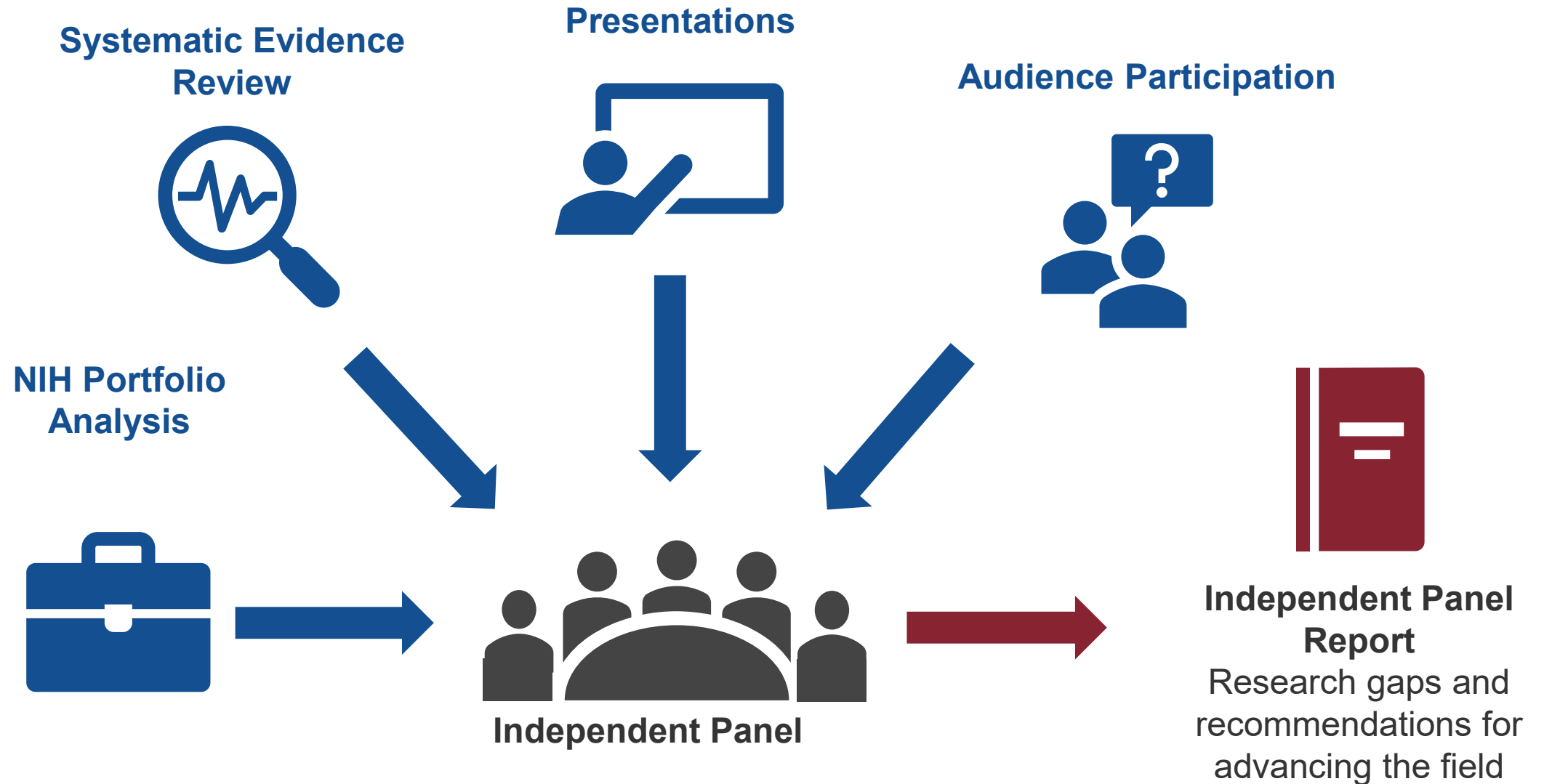
- Work with a variety of partners to identify needs in prevention research.
- Compare identified needs in prevention research with the current NIH portfolio to identify prevention research gaps (i.e., those areas that are not being addressed or have insufficient funding).
- Work across ODP and with NIH Institutes and Centers and partners to identify the most promising and feasible prevention research gaps that warrant greater investment or expanded effort.

NIH Pathways to Prevention (P2P) Program

- Centers around workshops on primary or secondary prevention topics with public health importance and limited or underdeveloped research.
- Goals:
 - Better understand the current state of the science
 - Identify methodological and scientific weaknesses
 - Develop an action plan to move the field forward
- Workshops lead to:
 - Funding opportunities to address important questions
 - Improvements in data resources and methodologies
 - Collaborative prevention research projects across the NIH and with other public and private entities

prevention.nih.gov/P2P

Main Components of a P2P Workshop



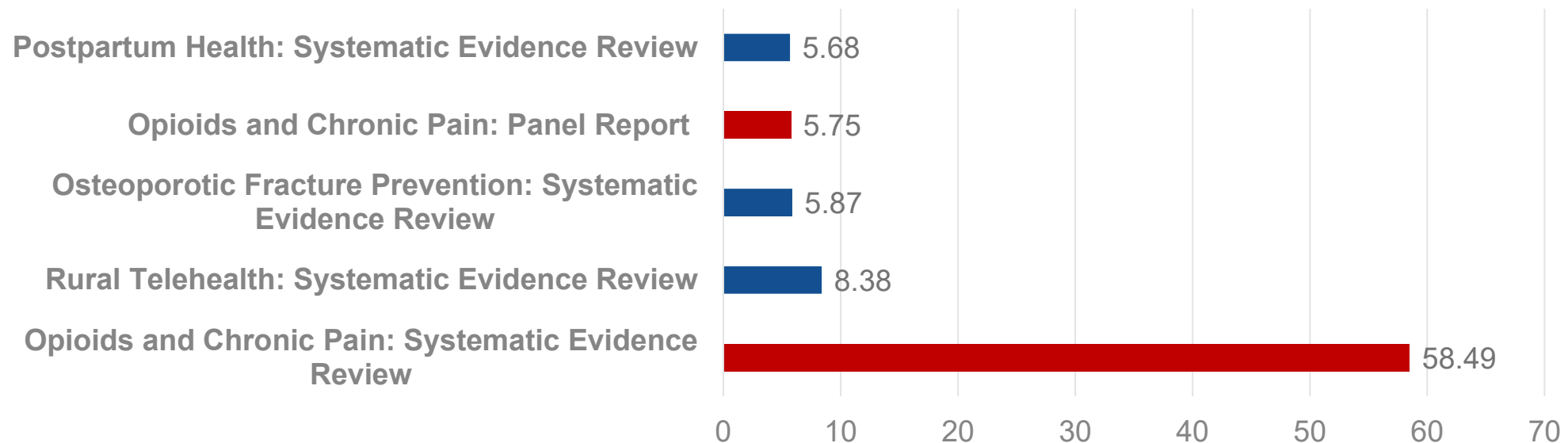
P2P Workshops (2014 - 2026)

Workshop Title	Year	Gap Area Addressed	Co-sponsors
Advancing Research to Improve Health During the Menopausal Transition	2026	Management of perimenopausal symptoms and mitigating chronic disease risk (RTI)	ORWH, NIA, NIMH, NICHD, NHLBI, NCI
Identifying Risks and Interventions to Optimize Postpartum Health	2022	Predicting and preventing poor postpartum health outcomes (Minnesota)	ORWH, NHLBI, NICHD, NIMHD
Nutrition as Prevention for Improved Cancer Health Outcomes	2022	Effectiveness of nutritional interventions for preventing negative treatment outcomes in adults diagnosed with cancer (Minnesota)	NCI, NIA, ONR, NICHD, ODS
Improving Rural Health Through Telehealth-Guided Provider-to-Provider Communication	2021	Effectiveness of telehealth-guided provider-to-provider communication to improve health outcomes in rural settings (Pacific Northwest)	NCATS, NHLBI, HRSA, CDC
Can Physical Activity Improve the Health of Wheelchair Users?	2020	Effectiveness of physical activity for improving health outcomes in wheelchair users; inform guidelines (Pacific Northwest)	NICHD NINDS
Achieving Health Equity in Preventive Services	2019	Improving uptake of clinical preventive services for minority populations (Pacific Northwest)	NIMHD, NCI, NHLBI, NIDDK
Appropriate Use of Drug Therapies for Osteoporotic Fracture Prevention	2018	Effectiveness of long-term use of drug therapies to prevent fractures in people with or at risk for osteoporosis (Minnesota)	NIAMS NIA
Methods for Evaluating Natural Experiments in Obesity	2017	Methodological approaches for strengthening natural experiment studies in obesity prevention (Johns Hopkins)	NCI, NHLBI, NIDDK
Advancing Research to Prevent Youth Suicide	2016	Strengthening data resources and data systems for identifying and studying suicide risk (Johns Hopkins)	NIMH, NIDA, NCCIH
Total Worker Health	2015	Effectiveness of integrated approaches and programs for addressing worker safety, health, and well-being (UNC & RTI)	NHLBI CDC (NIOSH)
Advancing the Research on Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS)	2014	Synthesizing the evidence base on the diagnosis, pathophysiology, treatment, cure, and prevention of ME/CFS (Pacific Northwest)	NINDS ORWH
The Role of Opioids in the Treatment of Chronic Pain	2014	Clarifying the long-term effectiveness and potential risks of using opioids to treat chronic pain (Pacific Northwest)	NIDA OBSSR

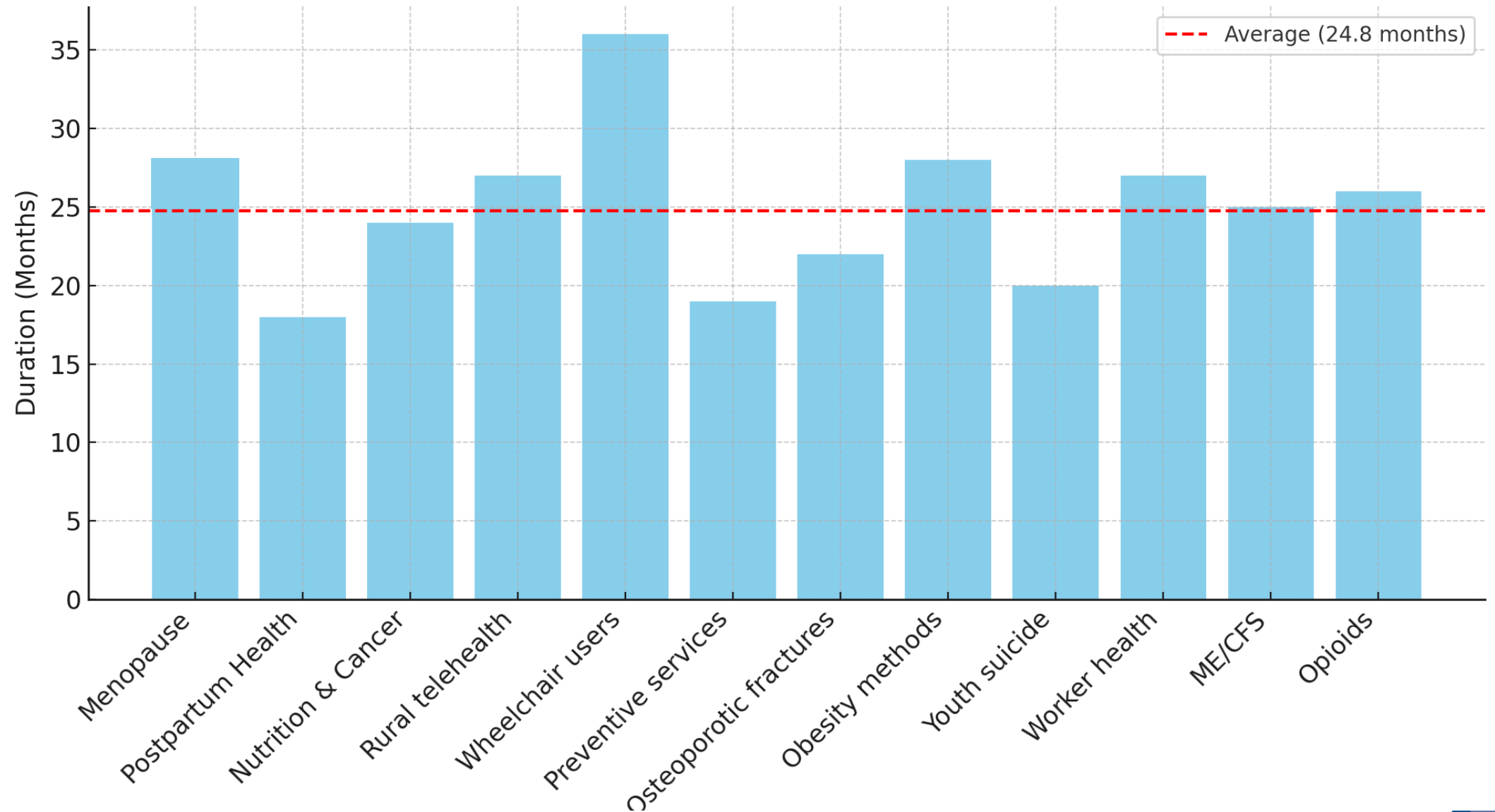
Assessing the Impact of the P2P Program

- Attendees represent a variety of perspectives including clinical practice, public policy, academic research, and community advocacy
- New partnerships, engagement, and external collaborations bring attention to high-priority fields of research
- Presentations delivered at professional meetings (e.g., NCCOR, SPR, ASN, APHA)
- Independent panel recommendations have been cited in influential reports, Congressional testimony, PCORI funding opportunities and clinical guidelines.

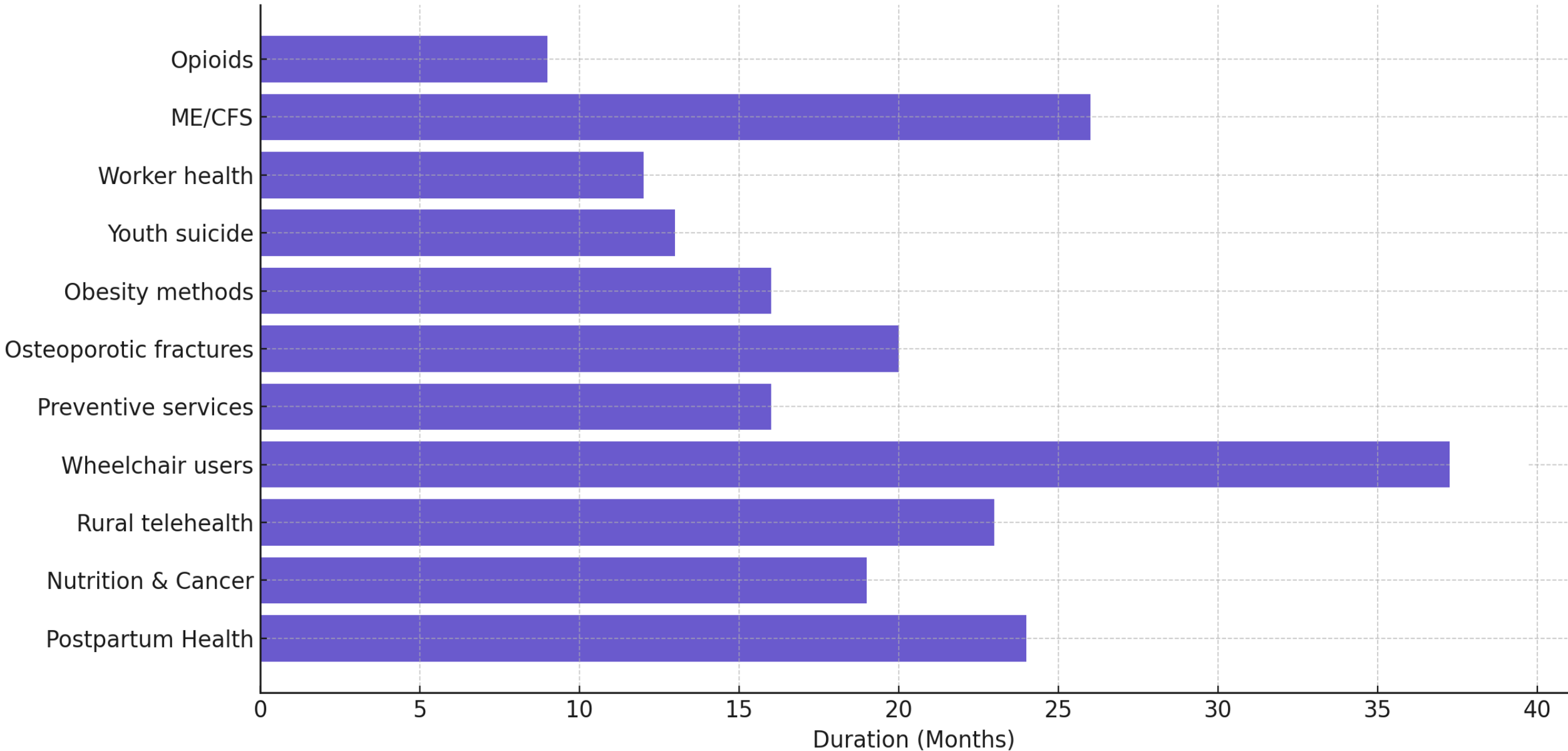
Relative Citation Ratio of P2P Workshop Publications



Months from Proposal Approval to Workshop



Systematic Evidence Review Durations by Topic



Duration is calculated using Project Timeline from "Topic Initiated" to "Systematic Review" as reported on EHC website.

Conclusions

- Use of SERs across NIH is variable as is knowledge about the science of evidence synthesis.
- The evidence synthesis is a foundational component of the Pathways to Prevention program.
- In this program, the SER is designed to identify evidence gaps (not guideline development) which can guide future NIH and other federally funded research.
- The Key Questions which guide the evidence review are also used to guide the workshop agenda, portfolio review and panel report – getting them right is critical! (Need for gaps not maps...)
- The P2P program typically takes 2-3 years to complete. The SER is a potential rate limiting step.
- ODP is currently considering ways to expedite the program, but trade-offs will be required.



Time for Q&A!

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