**Supply of systematic evidence syntheses to inform the WHO Guidelines on management of chronic primary low back pain in adults**

**Request for Proposals (RFP)**

Bid Reference

2021/UHL/AAH/0001.

Country/Unit Name

**Switzerland/Ageing and Health Unit**

**Closing Date:**

8 November 2021

**Request for Proposals:** 2021/UHL/AAH/0001.

**Annex 7: Questions from Bidders** (Ref. Paragraph 4.6)

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| **No.** | **RFP Section reference** | **Question** | **WHO response** |
| 1 | 3.3 | The RFP refers to Cochrane reviews and we wish to know if it is the aim of the proposal to limit the reviews to only Cochrane reviews.  There is important literature which outside is not reflected in the Cochrane body of work | WHO acknowledges that some high-quality systematic reviews of randomized controlled trials (RCTs) of the listed interventions for chronic low back pain have been published previously, or are in preparation. In this context, existing high-quality systematic reviews may be updated with contemporary RCT evidence to derive the evidence syntheses for the interventions. WHO has identified and recommended which existing reviews should be used for this purpose, including Cochrane reviews and a non-Cochrane review for the intervention #5 ‘education/advice’. This information is outlined in Section 3.3 under ‘Interventions’. Specifically, bidders should navigate to the hyperlinks provided in Section 3.3, p.9 to identify the existing systematic reviews that are recommended by WHO.  Where no existing high-quality systematic review is available, a new evidence synthesis may be required.  Bidders may choose in their Proposal to deviate from WHO’s recommendations, however, this should be supported by a compelling reason for doing so. |
| 2 | 3.2 | Can we invite professionals from outside our institution to join the project team? | Yes. The project team may be assembled as deemed appropriate to ensure the composite mix of knowledge and skills aligns with the knowledge and skills requirements outlined in Section 3.2.3. Ultimate coordination and responsibility for the project team rests with the lead institution. Please refer to Section 4.5 for further details on consortia arrangements.  The lead institution should ensure its capacity to align with requirements outlined in sections 3.2.1-3.2.4. |
| 3 | 4.6 | Once the Nov 2 date has passed for questions, is there any way to communicate with your team?  When the project is under way, how will the successful candidate communicate with the WHO team: i.e. is there a specific “point person”? | Bidders are invited to communicate with WHO up to 2 November using the Annex 7 form.  Once Proposals have been evaluated and a supplier selected, a focal point in WHO will be established to ensure communication between WHO and the supplier. Specifically, please refer to Section 3.3.4, which outlines the requirements for formal monthly meetings between the supplier and WHO. |
| 4 | 3.3 | Is it correct that only one systematic review per area (e.g., exercise and low back pain) will be awarded or more systematic reviews can be funded, at the discretion of the WHO? | Yes this is correct. WHO will only seek one evidence synthesis for each of the interventions outlined in Section 3.3. Suppliers may choose to bid to undertake an evidence synthesis for one, several, or all nine intervention areas. |
| 5 | 3.3 | The systematic review proposal needs to update the most recently published Cochrane systematic reviews of the topic. For Exercise and low back pain there is one systematic review published in 2021 (Hayden et al. 2021, Cochrane) and an update is currently ongoing, as I can read from their paper | WHO has recommended which contemporary, high-quality systematic reviews should be used as evidence sources for the required evidence syntheses. Proposals should therefore outline how these existing reviews will be updated to deliver up-to-date evidence syntheses to inform the WHO Guideline.  For exercise, WHO has recommended an update to the current review by Hayden et al 2021 with results disaggregated by exercise modality (i.e. split not lumped). That review includes data for trials identified in searches up to 27 April 2018. Therefore, there is a need to update this synthesis to include trials in searches up to present day. |
| 6 | 3.3 | Is it possible to bid for an exercise systematic review with a different aim and methodology (e.g., individual patient meta-analysis) for exercise and low back pain? | WHO does not recommend this approach. However, a bidder may choose to propose a different method should the outcomes meet the requirements of WHO, as outlined in the RFP. A compelling argument for the alternative approach would be expected. |
| 7 | 3.3 | Is it possible to bid for a systematic review including only some of the Otcomes listed in section 3.3? | No. WHO considers outcomes listed in 3.3 as critical outcomes and asks the GRADE assessment for each critical outcome. Therefore, bidders should provide complete detail about the data for each outcome, including references.  Bidders should also report outcomes for which no evidence was found. |
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