

Identifications of similarity metrics for cancer patients: Protocol for a Scoping Review

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Table of Contents

Original Manuscript..... 5

Supplementary Files..... 17

 Figures 18

 Figure 1..... 19

 Multimedia Appendixes 20

 Multimedia Appendix 1..... 21

Identifications of similarity metrics for cancer patients: Protocol for a Scoping Review

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Abstract

Background: Understanding the similarities of cancer patients is essential to advancing personalized medicine, improving patient outcomes, and developing more effective and individualized treatments. It enables researchers to discover important patterns, biomarkers, and treatment strategies that can have a significant impact on cancer research and oncology. In addition, the identification of previously successfully treated patients supports oncologists in making treatment decisions for a new patient who is clinically or molecularly similar to the previous patient.

Objective: The planned review aims to systematically summarize, map, and describe existing evidence to understand how patient similarity is defined and used in cancer research and clinical care.

Methods: To systematically identify relevant studies and to ensure reproducibility and transparency of the review process, a comprehensive literature search will be conducted in several bibliographic databases, including Web of Science, PubMed, LIVIVO, and MEDLINE, covering the period from 1998 to February 2024. After the initial duplicate deletion phase, a study selection phase will be applied using Rayyan, which consists of three distinct steps: Title and Abstract Screening, Disagreement Resolution, and Full-Text Screening. To ensure the integrity and quality of the selection process, each of these steps is preceded

by a pilot testing phase. This methodological process will culminate in the presentation of the final research results in a structured form according to the PRISMA-ScR flowchart. The protocol has been registered in the Journal of Medical Internet Research (JMIR).

Results: This protocol outlines the methodologies employed in conducting the scoping review. A search of the specified electronic databases and after removing duplicates resulted in 1,183 unique records. As of March 2024, the review process has moved to the full-text evaluation phase. At this stage, data extraction will be conducted using a pre-tested chart template.

Conclusions: The scoping review protocol, centered on these main concepts, aims to systematically map the available evidence on patient similarity among cancer patients. By defining the types of data sources, approaches, and methods used in the field, and aligning these with the research questions, the review will provide a foundation for future research and clinical application in personalized cancer care. This protocol will guide the literature search, data extraction, and synthesis of findings to achieve the review's objectives.

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Original Manuscript

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Keywords: Patient similarity; cancer research; patient similarity applications; precision medicine; cancer similarity metrics; scoping review protocol.

Introduction

Rapid advances in precision medicine have revolutionized cancer research, opening new opportunities to develop an unprecedented new, personalized view of each patient. The concept of precision medicine is seemingly simple: similar patients with similar characteristics share similar outcomes. By identifying important patient characteristics and traits, the search for similar patients contributes to the pursuit of precision medicine that may determine clinical outcomes through more precise targeting of treatment by genetic, biomarker, phenotypic, or psychosocial characteristics that differentiate a given patient from others with similar clinical presentations [1]. The ever-increasing volume and availability of health-related data is currently challenging the broad definitions of patient groups set out in the clinical practice guidelines. Defining a similarity measure that can handle the high-dimensional space of patient data is an essential step to enable

stratification of patients into clinically meaningful subgroups [2]. The complex interaction between personalized patient treatment and the application of aggregate data underlines the fundamental understanding of modern oncology, which is based on the main principle that each patient has a deeply individual nature of their illness, and each case is special [3, 4]. However, there is a parallel paradigm that demonstrates the essential role of applying existing data in improving the understanding of the individuality of cancer and optimizing the approach to personalized treatments. It suggests that a deep understanding of each patient's unique characteristics and subsequent selection of therapeutic strategies can be greatly improved by identifying similarities between cancer patients. This approach indicates that the most effective individualized treatment strategies do not develop independently but instead result from comprehensive comparison and analysis of aggregate patient data [5, 6].

Patient similarity is a topic of significant interest and research in various areas of precision medicine, including cancer research. Some studies have explored the concept of patient similarity across different dimensions, such as genomics, clinical characteristics, treatment responses, and outcomes [1, 2, 7, 8].

Despite the extensive interest in this area, there is currently no systematic approach to clarify precisely what is understood by the concept of "patient similarity" in cancer research. While individual studies may use various methodologies and metrics to assess patient similarity, there is a lack of consensus on combined approaches and definitions. This creates an opportunity for further research to explore and define patient similarity more comprehensively.

Additionally, the definition and evaluation of common similarity metrics in cancer research that involves careful evaluation of both quantitative and qualitative factors need to be systemized. These metrics can serve as a powerful method for furthering the understanding of cancer and improving personalized patient care. Faced with all these research gaps, we want to conduct a scoping review.

Aim and research questions

The goal of our planned research is to collect and describe the existing knowledge that could help in defining and exploring how patient similarity is determined in cancer research and care. The scoping review addresses the main research question:

- What is understood by the concept of "patient similarity" in cancer research?

Several secondary questions have been developed to support and coordinate the analysis:

- What types of data sources are used to identify similarities between cancer patients
 - Molecular genetic data
 - Clinical data
 - Therapies or treatment
 - Histological data
- What different approaches and methods are used to identify and analyze similarities between cancer patients and which clinical relevance they have?
- Which types of cancer have been the most frequently researched when it comes to finding similarities between patients?
- What challenges and limitations have been observed in the existing literature when identifying similarities between cancer patients?

To the best of our knowledge, no scoping review has addressed the research questions proposed by this review.

Methods

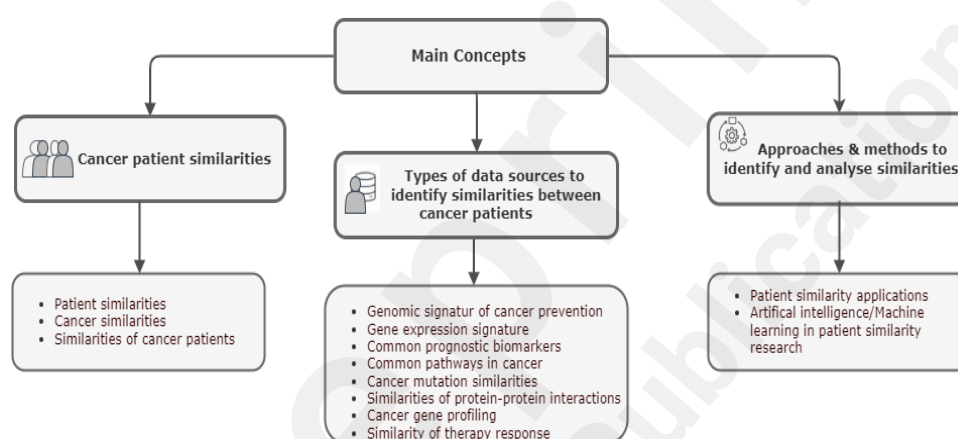
To ensure a transparent review process, our methodology will follow the "Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR)

Checklist” and the Joanna Briggs Institute (JBI) Reviewer’s Manual on scoping reviews [9, 10]. The methodological process of conducting a scoping review will be iterative. Given this, it is expected that there may be some deviations from the originally developed a priori protocol, as a natural part of the iterative process, to refine and improve the review as it progresses. To ensure transparency in the conduct of the review, any deviations from the original protocol will be explicitly documented and reflected in the final manuscript of the review.

Main Concepts and Keywords

To guide the literature search, ensure the relevance of included studies, and improve the efficiency of the planned review process, three basic concepts and corresponding keywords were defined, which are graphically represented in Figure 1. This determination was made because of extensive discussions within our research team, taking into account main goals and research questions of our review.

Figure 1. Main concepts of planned Scoping Review and corresponding Keywords.



Eligibility criteria: Inclusion and Exclusion Main Concepts and Keywords

To guide the literature search, ensure the relevance of included studies, and improve Even though our primary goal is to cover a wide range of studies to ensure broad coverage of studies on similarities to patients with cancer, we adhere to minimum exclusion criteria to maintain the quality and relevance of included studies. For selecting pertinent studies for planned scoping review, we have established the following inclusion and exclusion criteria, outlined in Table 1.

Table 1. Eligibility Criteria

Item	Inclusion criteria Item	Exclusion criteria
Type of studies	All types of studies unless they provide substantial evidence or data relevant to cancer patient similarities.	Publications not addressing the aspects of similarity of cancer patients as defined in objectives.
Population	Studies focusing on cancer patients of all ages, genders and ethnicities with different diagnoses.	Studies focusing on non-cancer conditions or animal studies.

Publications	Studies published within the last 25 years	Studies published more than 25 years ago.
Language	Studies published in English or German	Studies published in other languages

Types of evidence

To identify potentially relevant studies, and to ensure reproducibility and transparency of the planned review process, the following bibliographic databases were searched for literature coverage from 1998 through February 2023: Web of Science, PubMed, LIVIVO, MEDLINE. These databases were chosen for their comprehensive coverage of the biomedical and healthcare literature, ensuring a thorough review of studies regarding cancer patient similarities over 25 years. This approach ensures reproducibility and transparency of the review, facilitating detailed analysis of existing evidence and identification of research gaps in the field [9, 11].

Search strategy

As a result of the numerous discussions, the team developed a search strategy with three important steps: keyword search, snowball system and manual search. In the planned systematic review, keyword searching will serve as the primary method for identifying relevant studies. This approach involves the use of carefully selected keywords and keyword combinations defined using a nesting approach involving Boolean operators and field tags to provide precision. Initially, the search will be conducted in the Web of Science database and after it, the search queries will be refined and adapted for subsequent use in other chosen databases to identify relevant information on the research topic effectively. To reduce irrelevant findings in our research and to make it more exact [12, 13], we integrated the MeSH option (MeSH=neoplasms) with keyword searches. This was directly applied in Ovid MEDLINE and PubMed. However, we did not apply it in the Web of Science, which employs its unique indexing system [14]. To uncover literature that may have been missed after the initial keyword search, a "snowballing" method was applied [15, 16]. This involved reviewing the references of the searched articles to identify additional studies not covered in the initial database search. In addition to the keywords and snowballing searches, a manual search will be conducted. This will involve manually scanning relevant journals, conference proceedings, and other literature sources to identify studies that are not indexed in mainstream databases or published in less accessible formats. Applying this triangular search strategy to the main concepts identified in Figure 1 will provide a robust review of the existing literature and will allow the fullest possible range of studies to be integrated to identify potential similarities between cancer patients. The search options used in the individual databases are optimized to the strengths and specific functions of each platform to maximize the effectiveness and comprehensiveness of the literature selection.

Data extraction

Following the search, all identified references will be collected and uploaded to the reference management software package, EndNote 20.2.1, where duplicates will be removed. Subsequently, we will employ a selection process by our multidisciplinary team as proposed by Levac et al. [17, 18] using Rayyan, a web-based software designed to facilitate the process of conducting various types of reviews [19]. The study selection process will consist of three stages: Title-Abstract Screening, Disagreement Resolution, and finally, Full-Text Screening, outlined in Textbox 1. To ensure the quality of the overall study selection process, Pilot Testing will precede each step, and the following calibrated forms will be applied. The final results will be represented using the PRISMA-

ScR flowchart [9].

Textbox 1. Stages of the study selection process.

Stage 1: Title-Abstract Screening
<ul style="list-style-type: none">• In this first step, we will screen titles and abstracts to quickly filter out publications that are not relevant to our research questions. This step will significantly reduce the volume of work required in the subsequent full-text review phase.• To ensure objectivity, each article will be screened by at least two reviewers in Blind Mode.
Stage 2: Disagreement Resolution
<ul style="list-style-type: none">• In the case of disagreement regarding the inclusion of an article, a third reviewer will be involved to make the final decision [10].
Stage 3: Full-Text Screening
<ul style="list-style-type: none">• After the primary selection, we will conduct a full-text review of the remaining articles to further refine our selection based on specific inclusion and exclusion criteria directly related to our research questions.

Management of data charting Summarizing and presentation of results

From all publications that will be included in the research after the Full-Text Screening stage, data will be extracted by independent reviewers using a data extraction tool developed by our team. A draft extraction form is provided in Table 2.

Table 2. Data extraction table for the Scoping Review.

Item	Description	Keypoints
Metadata		
Title ^a	<ul style="list-style-type: none">Title	
Details ^a	<ul style="list-style-type: none">Author(1st), Journal, DOI	
Year of Publication ^a	<ul style="list-style-type: none">YYYY	
Publication Type ^a	<ul style="list-style-type: none">Type of publication	
Institute ^a	<ul style="list-style-type: none">Corresponding institute	
Objective ^a	<ul style="list-style-type: none">Main objective of the publication	
Methods ^a	<ul style="list-style-type: none">Summary of the proposed methodological approach	
Results ^a	<ul style="list-style-type: none">Short description of the results	
Conclusion ^a	<ul style="list-style-type: none">Summarizing the main points and findings	
Keywords ^a	<ul style="list-style-type: none">Main Keywords of the publication	
Research Findings		
Main Research Question What is understood by the concept of "patient similarity" in cancer research?	<ul style="list-style-type: none">Key definition of "patient similarity" in the context of the publication.	<ul style="list-style-type: none">Explanation of how the study defines patient similarity in the context of cancer research. This can include genetic, clinical, histological treatment-related similarities or view from methodological approaches.Determining the aspects of patient similarity that this publication focused on.
Secondary Questions 1. What types of patient data are used to identify similarities?	<ul style="list-style-type: none">Short description of the data (molecular genetic, clinical, histologic and treatment-related) used to define patient similarity.	<ul style="list-style-type: none">Categorization of the types of patient data used to identify similarities.
2. What different approaches and methods are used to identify and to analyse similarities between cancer patients and which clinical relevances they have?	<ul style="list-style-type: none">The approaches and methods employed to analyze and identify similarities (e.g. software, tools, algorithms).Information how this findings contribute to personalized medicine	<ul style="list-style-type: none">Typification of the tools used to identify similarities.Clinical relevance of the methods and suitability for practical application.

3. Which types of cancer have been the most frequently researched when it comes to finding similarities between patients?	<ul style="list-style-type: none">• A list of cancer types that can be related as a basis for identifying similar cancer metrics	<ul style="list-style-type: none">• Identification of cancer types associated with the patient similarities in this study.
4. What challenges and limitations have been observed in the existing literature when identifying similarities between cancer patients?	<ul style="list-style-type: none">• List of potential limitations and challenges	<ul style="list-style-type: none">• Determination of the limits, future challenges, and unexplored areas in this field of research.

^a Mandatory field.

This template is designed with several sections to capture essential information from the studies: 'Metadata' includes general information about the publication, and 'Research Findings' summarizes the main findings from each paper, specific to the research questions and objectives of the planned scoping review. The process of data charting, as in the case of the selection of sources of evidence, will start with a calibration step, which will help us prevent errors and ensure high inter-rater agreement [9].

Summarizing and presenting results

To comprehensively answer the main research question and related secondary questions, our findings will be summarized and presented using a structured approach to ensure clarity, consistency, and alignment with overarching objectives. Detailed narrative synthesis and descriptive analysis will provide the basis for summarizing and presenting the findings of the studies [9, 19, 20] included in the review, focusing on how "patient similarity" is conceptualized and operationalized within cancer research. This process will summarize key findings, and thematic categories and establish links between approaches to 'cancer patient similarity' across studies. Additional graphical and tabular forms will be used to visualize and systematically present the collected data. For this purpose, we are planning to include flowcharts representing the study selection process, diagrams, and bar charts illustrating the intersection of different types of data sources or showing the frequency of studies of different cancer types.

Results

The review protocol, which outlines the methodology for the review, began with a database search, identifying 1183 unique papers after the removal of duplicates. As the review advanced to full-text screening by March 2024, the selection process led to 734 papers being excluded and 151 papers being earmarked for conflict resolution. Consequently, 235 papers were initially considered for inclusion, with the number rising to 258 after resolving conflicts. This indicates that approximately 25% of the selected papers significantly contribute to the analysis of the review and align with the research questions and objectives. Currently, a full-text analysis is underway using a pre-tested chart template to ensure that each selected study contributes to the comprehensive understanding the review aims to establish.

Discussion

Our planned systematic review of similarity measures for cancer patients may face limitations, including the possibility of missing specific study details due to its broad coverage, variability in study design, diversity of data sources, and possible publication bias. In addition, rapid advances in the field and subjectivity in study selection may affect the comprehensiveness and accuracy of the review. Despite these limitations, it is important to note that the advantages and benefits of conducting such studies far outweigh the possible disadvantages, offering valuable insights into personalized cancer treatment strategies. Firstly, it facilitates a more nuanced understanding of cancer's biological diversity, recognizing that while each case is unique, there are often underlying similarities that can guide treatment [2]. Additionally, the benefits of studying patient similarities include also the potential for more effective and targeted therapies, improving prognostic models, and discovering new approaches. Finally, identifying indicators of

similarity supports ongoing treatment by allowing one to act more efficiently and effectively, armed with knowledge drawn from a broader data set [6, 21]. Our review will examine the scope, range, and nature of cancer patient similarity studies, highlight significant findings, point out research gaps, and suggest future directions for research.

Acknowledgments

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Ethical Considerations

There was no requirement for ethical approval because only literature was being evaluated.

Conflicts of Interest

None declared.

Abbreviations

JMIR: Journal of Medical Internet Research

PRISMA-ScR: Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews

JB: Joanna Briggs Institute

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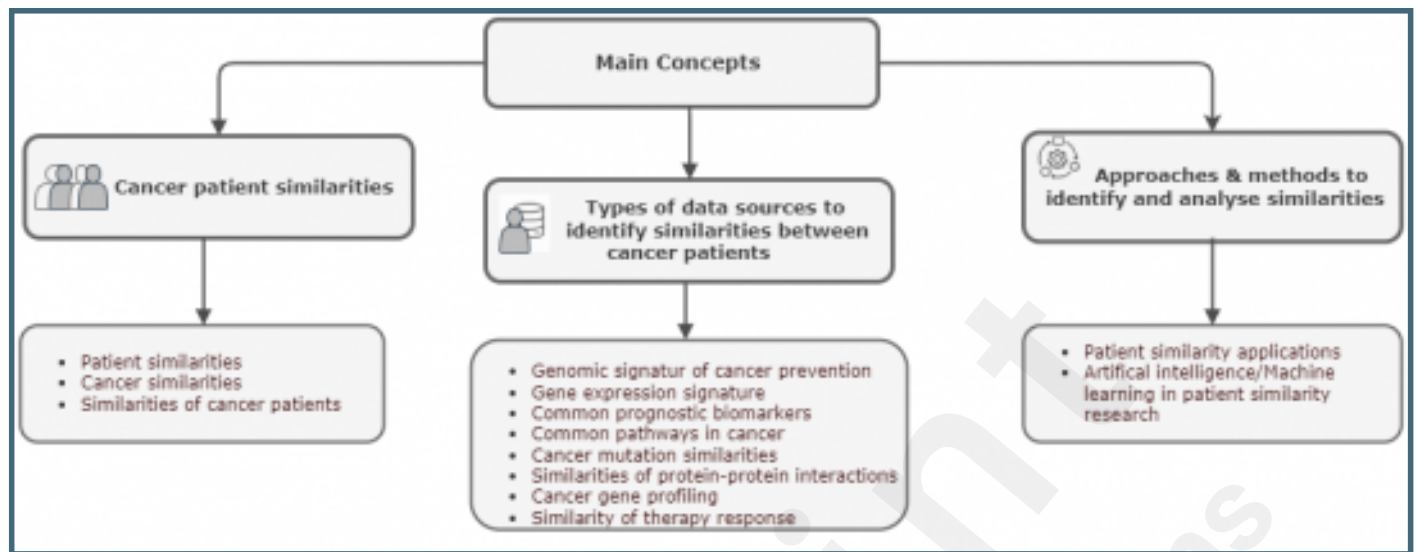
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Supplementary Files

Figures

Main concepts of planned scoping review and corresponding keywords.



Multimedia Appendixes

Identifications of similarity metrics for cancer patients: search strategy.

URL: <http://asset.jmir.pub/assets/cedc9a0f382fb3a2f27e77b8ca626f35.docx>

