Neurology Journals

Standards of Reporting of Neurological Disorders (STROND): A Guideline for the reporting of incidence and prevalence studies in Neuroepidemiology **Access article**

Checklist

MS # _____

Section/Topic	Number	Recommendation	Manuscript page Number
TITLE & ABSTRACT			
Title and abstract	1	(a) Give the type of study design employed using a widely recognized term in the title or abstract. (b) The abstract should give an accurate summary of how the study was conducted and the main findings.	
INTRODUCTION			
Background	2	Details of the scientific rationale for the study should be reported	
Aims and objectives	3	State the specific aims and objectives of the study.	
METHODS			
Study design	4	Give a full description of the study design	
	4a	*Give details of any study protocol (published or unpublished that gives additional useful information on the study design).*	
	4b	*If a pilot study has been conducted to inform the main study design then the findings should be referenced.*	
Setting	5	Clearly defined (usually, but not always, on a geographic basis), and stable, with reliable information on in- and out-migration.	
Source population	6	Description of how all eligible members of the population were identified and through what data sources (e.g. hospitals, outpatient clinics, death certificates).	
	6a	Source of data used for the study (e.g. administrative database, medical records). *If administrative database used algorithms for data extraction should be described.*	
	6b	*Description of the rate of hospital admission, (if applicable), for the neurological condition in the population.*	
	6c	*Details of health care system in the country (study region) where the study was conducted (e.g. public versus private health care system).*	
	6d	*Description of how a person with the neurological condition is referred (with the filters) in the country (study region) where the study was conducted.*	
	6e	Description and characteristics of response rate/drop outs and exclusion rate if applicable.	
Participants	7	Definition of cases is clearly identified and presented in sufficient detail.	
	7a	Details of the sampling method are described (are participants representative of the source population).	
	7b	Fully validated source of diagnosis or “reference-standard” criteria applied.	

	7c	Definition and justification of the disease severity (preferably using a standardized severity scale) or staging of the disease.	
	7d	Description of how types/subtypes of the neurological disorder of interest are distinguished (if relevant).	
	7e	Description of how completeness of case-ascertainment was assessed.	
	7f	*Description of whether completeness of case ascertainment was adequate.*	
Ethical approval	8	*Details of ethics approval / informed consent / data governance should be reported.*	
Measurement	9a	Incidence studies 1. Give details of how incidence was determined (based on timing of data collection either prospectively or retrospectively). 2. Definition and justification of timing of measurements. 3. The data presented to some specified time period (usually whole years or person-time). 4. Raw numbers are reported in sufficient detail to calculate the appropriate rates (e.g. by age or gender).	
	9b	Prevalence studies 1. Give details of specific time points over which estimates are derived (usually defined as the number of cases existing in a specific time point). 2. The data presented to some specified time period (usually whole years). 3. Raw numbers are reported in sufficient detail to calculate the appropriate rates (e.g. by age or gender).	
	9c	*If disease burden is to be assessed the study should report details of burden due to a variety of sources (e.g. disability, DALYs, symptoms, financial, caregiver etc…).*	
	9d	*Report any arrangements for quality checks / data verification / triangulation.*	
	9e	*Report details of the training of the person administering the instruments*	

Statistical methods	10	If rates have been standardised (e.g. by age or gender), then the details of the standard population used should be given.	
	10a	*If possible two standard populations should be used one with local relevance and the other to facilitate international comparisons.*	
	10b	Description of any assumptions made in the calculations should be reported.	
	10c	An explanation of how missing data was addressed in the analyses.	
	10d	*Provide a priori estimates of: sample size/power assessment/precision of estimates assessment.*	
	10e	Description of any sensitivity analyses.	
RESULTS			
Main findings	11	Consider a flow diagram that describes how participants were included in the study [useful in order to assess how a person with the neurological condition of interest is referred (with the filters)]	
	11a	Give appropriate rates with their associated 95% confidence intervals.	
	11b	Report results of any sensitivity analyses.	
DISCUSSION			
Key findings	12	Summarise the key findings in relation to the study aims and objectives.	
Limitations	13	Discuss potential limitations of the study.	
	13a	*Include details of risk of bias (e.g. selection bias), completeness of case ascertainment, and data quality (assessment of its probability, size and potential importance).*	
Interpretation	14	Interpret the results in the context of the evidence from other well performed studies with similar designs and objectives.	
	14a	Reliability of the estimates (i.e. based on the reporting of the statistical methodology, and study design, measurement of key information).	
Generalizability	15	Discuss the external validity of the study findings	
	15a	Are the results consistent with meta-analyses of descriptive epidemiological studies on the same topic that cover different settings (if applicable)?	