

## Governing Board Elected Member Candidate Statement

Family name (surname):	<b>SIDHU</b>
First name(s):	<b>SANDEEP</b>
Today's date:	<b>25 July, 2020</b>
Are you a current member of the Governing Board standing for re-election?	<b>[No]</b>
Are you a citizen or resident of a Lower- and-Middle-Income Country or Territory	<b>[Yes] INDIA</b>

### Questions 1-5: Experience and Motivation:

**1.** How and when did you first become involved in Cochrane and what has been your subsequent contribution to Cochrane's work (maximum 200 words)?

I was invited in March 2017 to submit my clinical trial on The "Efficacy of L Ornithine L Aspartate (LOLA) in patients of cirrhosis and Overt Hepatic encephalopathy" by Professor Marsha Morgan. This invitation was part of the effort to publish a Cochrane systematic review and meta-analysis of LOLA as a treatment for hepatic encephalopathy. In due course, as this trial was the largest investigator initiated study, I requested to become a member of the Cochrane Society - The Cochrane Hepato-Biliary Group (The CHBG).

Our study group evaluated the efficacy of intravenous LOLA in the reversal of bouts of OHE in patients with cirrhosis. In this prospective, double-blind, randomized, placebo-controlled trial conducted at two tertiary care institutes in India, 193 (52.16%) patients were randomized to receive either intravenous infusions of LOLA (n - 98), 30 g daily, or placebo (n - 95) for 5 days. Our study had a low bias with clearly defined outcomes. It showed conclusively that intravenous infusion of LOLA decreases the fasting venous ammonia level and improves the grade of OHE over days 1-4 but not at day 5. This improvement was evident in higher grades of HE as well. LOLA was well tolerated

**2.** What experience do you have serving as a member of a governing board, board of directors, management group or similar? This might be within a non-for-profit or charitable organization, or a hospital or University. Please include the name(s) of the organization(s), the roles you played and other relevant information (maximum 200 words).

No experience

**3.** Acting as a Board member requires a collaborative approach to decision-making, setting aside personal opinions and group affiliations and acting in the best interests of the charity. Please describe how you would fulfil this obligation, using examples from previous committee or other

work (maximum 200 words).

I clearly understand that as a board member, my personal opinions are secondary to the interests of the Board. I will respect the opinions of other members of the board and work in cohesion with them in decision making.

I am an active member of AASLD's Alcohol-associated Liver Disease Special Interest Group (SIG), since 23 February 2018. The group's discussion was initiated with the question of retreatment of a patient of Alcoholic Hepatitis with corticosteroids or not.

Subsequently, I participated in a working group from the American Association Study of Liver Diseases (AASLD) Alcohol Liver Disease (ALD) Special Interest Group (SIG) to develop a survey stemming from an online discussion on the AASLD Engage Community platform.

#### *Conclusions of the Survey*

Few providers are comfortable prescribing AUD pharmacotherapy and, as a consequence, even fewer are prescribing these medications. These findings highlight the need for focused interventions for providers to improve comfort and competency in treating patients with AUD and ALD.

Lastly, as a member of AASLD's Alcohol-associated Liver Disease SIG, I had the opportunity to help to vote for a new steering committee position **(to serve for three-year term, 2021-2023)**.

#### **4. What do you think would make you an effective member of the Board (maximum 200 words)?**

I have graduated from variety of educational programs, both in my native India and abroad. These include the prestigious program of Gastroenterology from the All India Institute of Medical Sciences (New Delhi, India), a Fellowship program with the German Academic Exchange Program at the University Hospital Eppendorf (Hamburg, Germany) and a medical clerkship in Clinical Hepatology and Liver Transplantation at Addenbrook Hospital (Cambridge, UK),

I have also published several recent reviews / editorials on health care in Hepatology and Gastroenterology :

1. Sidhu SS. L-Ornithine L-Aspartate is effective in the Treatment of both Minimal and Overt Hepatic Encephalopathy and Hyperammonemia in Cirrhosis [Editorial]. J Clin Exp Hepatol 2018 Sep;8(3):219-221.

2. Goh ET, Stokes CS, **Sidhu SS**, Vilstrup H, Gluud LL, Morgan M . L- Ornithine L – Aspartate for prevention and treatment of hepatic encephalopathy in people with cirrhosis (Review). **Cochrane Database of Systematic Reviews 2018**, Issue 5.Art. No.:CD012410

3. Sidhu, S.S., Goyal, O., Kishore, H. et al. New paradigms in management of alcoholic hepatitis: a review. Hepatol Int 2017 May;11(3):255-267.

#### **Management experience**

**Directed** the Endoscopy Unit (10 endoscopy technicians, 1 assistant professors and two Associate Professors) of the Department of Gastroenterology, Dayanand Medical College & Hospital, and Ludhiana for 15 years.

**5. What do you believe are the most important strategic challenges for Cochrane from 2020 onwards (maximum 200 words)?**

The single most important strategic challenge of Cochrane in 2020 and beyond is to be the repository of most updated evidence based medicine available to health care providers, paramedical staff, patients and their family care givers. This in turn will require to provide easy access of all relevant published positive and negative research work to the Cochrane members to synthesize very high quality systematic reviews. This will also require to widen the base of our contributors globally. Equally importantly, we need to make the Cochrane organisation's health care reviews and conclusions to everyone worldwide (updating and synthesizing the most current research as frequently as possible) Finally, we have to strive to be a transparent international organisation with honest accountability and optimal health care resource utilisation as our key guiding principles for now and future.

**Questions 6-12: Specific Skills**

To function optimally the Governing Board requires a range of experiences, knowledge and expertise amongst its membership. We cannot expect any single Governing Board member to have all the necessary skills and experience. We are looking for diversity.

**We do not expect you to answer “yes” to more than one or two of these questions.**

If you do answer “yes”, please provide at least one example which best demonstrates your experience or expertise. You may wish to include:

- A description of the situation and the context
- What you did
- What skills and knowledge you deployed
- The outcome and your personal contribution

**6. Do you have experience of Knowledge Translation or science communication; and/or in widening access, participation, reach and impact of research?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

I have conducted research in several areas of Hepatology and Endoscopy has been published in high impact journals:

1. **Sidhu SS**, Saggarr K, Goyal O, Varshney T, Kishore H, Bansal M, Sidhu SS. Muscle Strength and physical performance, rather than muscle mass, correlate with mortality in End-Stage Liver Disease. **European Journal of Gastroenterology & Hepatology**, May 15 **2020** doi: 10.1097/MEG.0000000000001761
2. **Sidhu SS**, Goyal O, Singh S, Kishore H, Chhina RS, Sidhu SS. Early feeding after esophageal variceal band ligation in cirrhotics is safe: Randomized controlled trial. **Dig Endoscop** **2019** ;31(6):646-652.
3. Louvet A, Thursz M, Kim DJ, Labreuche J, Atkinson S, Sidhu S, Grady JO, Carithers R, Ramond MJ, Mendenhall C, Maddrey WC, Morgan T, Duhamel A, Mathurin P. Corticosteroids reduce risk of death within 28 days for patients with severe alcoholic hepatitis, compared to Pentoxiphylline and Placebo. **Gastroenterology** 2018 Aug;155(2):458-468.
4. Sidhu SS, Goyal O, Sharma BC, Kishore H .Efficacy of intravenous ‘l-ornithine l aspartate’ in reversal of bouts of acute hepatic encephalopathy in patients with liver cirrhosis: a

prospective, randomized, double-blind placebo controlled trial". **HEPATOLOGY** 2018;67(2): 700-701 . DOI: 10.1002/ hep.29410

In order to widen access to the fellow researchers , most of my clinical published trials are available as full papers on Google Scholar

**7. Do you have experience in evidence-informed policy making?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

I participated in a working group from the American Association Study of Liver Diseases (AASLD) Alcohol Liver Disease (ALD) Special Interest Group (SIG) to develop a survey stemming from an online discussion on the AASLD Engage Community platform. The findings of this survey highlighted the need for focused interventions for health care providers to improve comfort and competency in treating patients with AUD and ALD.

**8. Do you have legal experience?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

No

**9. Do you have experience of advocating for evidence?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

No

**10. Do you have knowledge or experience of the issues around Open Access to research output?**

Yes or No? If Yes, please provide details and examples below (maximum 200 words).

No

**11. Is there anything else you would like to say in support of your nomination (maximum 200 words)?**

*I am active researcher and my current research focus has been as follows :*

- **Alcoholic Hepatitis:** A Multicentre Double Blind, Placebo Controlled Randomized Trial to Evaluate the Safety and Efficacy of Bovine Colostrum in the Treatment of Severe Alcoholic Hepatitis (SAH), (BASH trial) is ongoing. ClinicalTrials.gov Identifier: NCT02473341
- **Sarcopenia:** Nutritional Intervention improves Sarcopenia and the prognosis of patients with liver cirrhosis (ClinicalTrials.gov Identifier: NCT03633279)

*I have published 31 full research papers published in various international journals especially Hepatology Journal and Gastroenterology Journal.*

*I have presented 31 scientific papers in various international and national Gastroenterology and Hepatology conferences.*

**Recent Academic Awards and Distinctions**

1. My paper entitled “**Normative values of Sarcopenia in the Indian population**” awarded the first prize in the Plenary Session of the 59<sup>th</sup> Annual Conference, Indian Society of Gastroenterology, Nov 29, 2018, Kochi, India
2. My paper entitled “**L-ORNITHINE L-ASPARTATE IN BOUTS OF OVERT HEPATIC ENCEPHALOPATHY**” selected at Hongkong, 2017 for the Best of Asia Pacific Digestive Week – Plenary Abstracts Presentation, 2017.
3. My paper entitled “Rifaximin improves Psychometric test - - Minimal hepatic encephalopathy (RIME trial)” was selected for oral presentation in the Presidential Awards section at the DDW, June 2010, New Orleans

**Declarations:**

To be eligible to stand for election, candidates must confirm the following by putting a ‘tick’ (✓) or their initials in the boxes below:

**I hereby confirm that I:**

1. Have accepted the <a href="#">Terms and Conditions of Cochrane Membership</a> and have been a Cochrane Member for at least 30 days prior to the close of voting in this election	✓
2. Have read the following guidance produced by the <a href="#">National Council for Voluntary Organisations</a> in the UK: <ul style="list-style-type: none"> <li>• What is a charity</li> <li>• What is a charity trustee</li> <li>• What trustees must do</li> <li>• How trustees look after the charity</li> </ul>	✓
3. Accept the <a href="#">Governing Board Charter</a>	✓
4. Accept and will adhere to the <a href="#">Code of Conduct for Trustees</a>	✓
5. Have completed the Cochrane ‘Declaration of Interest’ Statement (Annex 1 of this document)	✓
6. Have completed the ‘Trustee Eligibility Declaration’ required by the <a href="#">UK Charity Commission for all Trustees</a> (Annex 2 of this document)	✓
<b>NAME: DR.SANDEEP SINGH SIDHU</b>	
<b>DATE: 26 July,2020</b>	

## Annex 1: Cochrane Declaration of Interest Statement

Candidates must make a declaration of conflict of interest, including financial or non-financial relationships with other organizations, professional relationships to other members of the Board, and other Boards she/he may sit on. In writing this statement, candidates should refer to Cochrane’s [conflict of interest policy](#) (for Cochrane Groups) and the [declarations of existing members of the Board](#).

Please answer the following questions:

<b>1. Financial interests</b>  <b>In the last three years, have you:</b>	<b>Yes/No (If yes, please provide details)</b>
a) Received funding: any grant, contract or gift, commissioned research, or fellowship from Cochrane or a related organization (i.e. any organization related to health care or medical research) to conduct research?	No
b) Had paid consultancies: any paid work, consulting fees (in cash or kind) from a related organization?	No
c) Received honoraria: one-time payments (in cash or kind) from a related organization?	No
d) Served as a director, officer, partner, trustee, employee or held a position of management with a related organization?	No
e) Possessed share-holdings, stock, stock options, equity with a related organization (excludes mutual funds or similar arrangements where the individual has no control over the selection of the shares)?	No
f) Received personal gifts from a related organization?	No
g) Had an outstanding loan with a related organization?	No
h) Received royalty payments from a related organization?	No
<b>2. Do you have any other competing interests that could pose a conflict of interest that would reasonably appear to be related to the primary interest?</b>	No

## Annex 2: Trustee Eligibility Declaration

As required by the [UK Charity Commission](#)

Please tick or initial in the boxes below to confirm the following:

**I declare that I:**

Am willing to act as a trustee of The Cochrane Collaboration	✓
Understand Cochrane’s purposes (objects) and rules set out in its <a href="#">Articles of Association</a>	✓
<p>Am not prevented from acting as a trustee because I:</p> <ul style="list-style-type: none"> <li>• Have an unspent conviction for one or more of the offences <a href="#">listed here</a></li> <li>• Have an Individual Voluntary Arrangement, debt relief order and/or a bankruptcy order</li> <li>• Have been removed as a trustee in England, Scotland or Wales (by the Charity Commission or Office of the Scottish Charity Regulator)</li> <li>• Have been removed from being in the management or control of any organization in Scotland (under relevant legislation)</li> <li>• Have been disqualified by the Charity Commission</li> <li>• Am a disqualified company director</li> <li>• Am a designated person for the purposes of anti-terrorism legislation</li> <li>• Am on the sex offenders register or equivalent in any country</li> <li>• Have been found in contempt of court for making (or causing to be made) a false statement</li> <li>• Have been found guilty of disobedience to an order or direction of the Charity Commission</li> </ul>	✓
Will provide true, complete and correct information to the Charity Commission if elected as a Board member	✓
Understand that it’s an offence under section 60(1)(b) of the Charities Act 2011 to knowingly or recklessly provide false or misleading information	✓
Comply with my responsibilities as a trustee that are set out in the <a href="#">Charity Commission guidance ‘The essential trustee (CC3)’</a>	✓