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# **Study Classification**

### I. By Purpose

• **Descriptive**: Describes characteristics or events.

Example: Prevalence of TBI in a population.

• **Analytical**: Tests hypotheses and looks for associations.

\_Example\_: Smoking and glioblastoma correlation.

• Exploratory: Investigates new or poorly understood areas.

Example: Unusual symptoms in post-COVID patients.

• Explanatory: Attempts to explain mechanisms or causation.

\_Example\_: Role of IDH mutation in glioma prognosis.

### II. By Design

#### A. Observational Studies

• Cross-sectional: One-time snapshot.

\_Pros\_: Fast, low-cost.

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_Cons_: No temporal or causal inference.

* **Case-control**: Retrospective, comparing affected vs. unaffected.

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_Pros_: Good for rare diseases.
_Cons_: Recall and selection bias.

* **Cohort**: Follows exposed vs. unexposed over time.

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_Pros_: Strong evidence for causality.
_Cons_: Expensive, long-term.

* **Ecological**: Based on group/population data.

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_Note_: Risk of ecological fallacy.
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#### **B.** Experimental Studies

- Randomized Controlled Trial (RCT): Gold standard for intervention studies.
- Non-randomized Trial: Allocation not random; higher risk of bias.
- **Crossover Trial**: Same subjects receive all interventions in sequence.

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## **III. By Timing**

- **Prospective**: Follows subjects into the future.
- **Retrospective**: Uses past data to analyze outcomes.
- Ambispective: Combines both.

## IV. By Data Type

- Quantitative: Numerical data (e.g., lab results, scores).
- Qualitative: Textual/descriptive (e.g., interviews, observations).
- Mixed Methods: Combination of both.

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