Presencia de Cochrane Argentina y principales ejes temáticos

Cochrane
Colloquium Edinburgh

16-18 September 2018 | Edinburgh, UK

AGUSTÍN CIAPPONI
Director de Cochrane Argentina

Cochrane
Argentina

Do Cochrane systematic reviews report results integrating certainty of evidence and effect size?

Ciapponi A, Glujovsky D, Comandé D, Bardach A. (Oral)

- Almost all Cochrane abstracts report the certainty of evidence of each outcome.
- 43% of comparisons are reported using the matrix wording for certainty of evidence, 70% for effect magnitude and only 38% for both.
- Alternative wordings are frequently ambiguous or even incorrect, reinforcing the necessity of a standardized wording integrating certainty of evidence and effect magnitude.

Discussion section at Cochrane reviews: is it supported by systematic reviews?

Glujovsky D, Bardach A, Comandé D, Ciapponi A.

- One third of the analyzed Cochrane reviews did not cite SRs at 'Agreement and Disagreement' section
- In most cases (81%), while doing the 'Title and Abstract' screening, authors could have retrieved SRs potentially useful
- More than 3/4 of the Cochrane reviews could have cited more SRs in that section
- More than half of the Cochrane reviews that have not cited any SR, missed to cite one that was available in PubMed

Background section at Cochrane reviews: is it supported by systematic reviews?

Glujovsky D, Bardach A, Comandé D, Ciapponi A. (Oral)

- 60% of the analised Cochrane reviews have not cited a SR at that section

- Only in PubMed, in more than half (54%) of the cases, while doing the 'Title and Abstract' screening, authors could have retrieved SRs that could be used for the 'Description of the condition' section

- 42% the Cochrane reviews that have not cited any systematic review, missed to cite one that was available in PubMed

Overlapping of trials and Systematic Reviews over time between Embase, PubMed, Cochrane Library and LILACS

Ciapponi A, Glujovsky D, Comandé D.

- More than 60% of the SRs that are published in only one database were found in Embase, and this figure rises to 75% when considering PubMed too.
- There is a 16% more that is published simultaneously in 1 of these 2 databases and in ≥ 1 others.
- Only 8% of the SRs are published in Cochrane (7%) or Lilacs (<1%).
- There is a higher overlap for trials (Embase-PubMed 69%) but still a very important absolute number of trials are retrieved exclusively by single databases.
- Although EMBASE provides the largest number of SRs and trials, it is not free.
- It would be important to know what are the topics with which each database contributes more.

Description of trials and Systematic Reviews exclusively retrieved by LILACS

Ciapponi A, Glujovsky D, Comandé D, Bardach A.

- RCTs: cardiology and cardiovascular medicine (23.1%), oral health (19.2%), infectious diseases (11.5%), and surgery (11.5%).
- SRs: orthopedics and sports medicine (17.7%), obstetrics and gynecology (9.7%), psychiatry and mental health (5.3%), and surgery (5.3%).
- Although there are not too many RCTs and SRs exclusively retrieved by LILACS, searching in this database could be important in some specific specialties.

Overcoming the difficulties of meta-analysis in psychotherapy

López P, Ciapponi A.

- Cochrane MAs in psychotherapy do not follow the general growing up trend.
- Heterogeneity of outcome measures is a common problem. It is necessary that psychologists promote a consensus about the assessment tools and treatment modalities to facilitate and increase MAs and to reduce the heterogeneity.
- Also, the standards and requirements from Cochrane editorial boards would need to be rethought to consider the complexity of psychotherapy research.

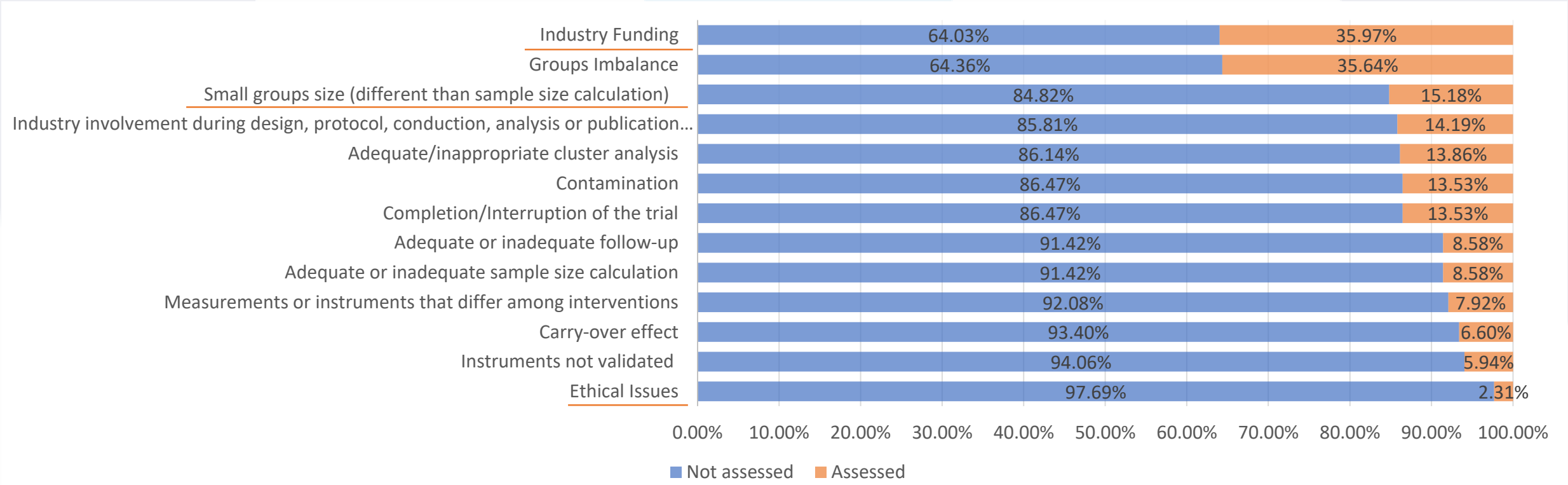
Search strategies to identify systematic reviews in MEDLINE and EMBASE: systematic review.

Garrote V, Escobar Liquitay C, Solà Arnau I, Franco J (Oral)

- We found 9 studies assessing SR filters with variable specificity and sensibility
- Most filters were developed with old datasets
- Different methods for validation
- Different interfaces

Topics and issues reported as 'other bias' in randomised clinical trials included in systematic reviews by Cochrane authors during 2017

Perez-Bracchiglione J, Madrid E, **Franco J**, Rada G, Bravo G, Meza-Concha N, Olguín P, Garnham R, Vergara L, Urrea G, Verdejo C, Loézar C, Papuzinski C, Vargas M, Arancibia M, Vargas I



Validation of the Spanish version of the Risk of Bias in Systematic Reviews (ROBIS) tool

Franco J, Simancas-Racines D, Nuñez S, Delgado-Ron A, Loézar Hernández C, Vargas Peirano M, Pérez Bracchiglione J, Papuzinski C, Madrid E, Bravo G, Whiting P, Savović J, Churchill R

- We have developed a Spanish version of the ROBIS tool that has received positive feedback during our initial pilot testing.
- We believe that this refined version will help the formal assessment of metabias in systematic reviews in Spanish and the development of overviews.

Highlights del Colloquium

- Pacientes en investigación y KT
- Nuevo Manual Cochrane
- Innovación tecnológica (RevMan web, Screen4me, etc.)

¡Chile acogerá el Colloquium Cochrane de 2019!

Santiago, 22-25 October 2019

Esperemos tener una producción y asistencia Argentina record en el próximio Colloquium!!!

¿Contamos con Ustedes?

Gracias