



Colloquium XI in Barcelona, 2003
Read all about it on Page 9

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Australia Launches National Licence to The Cochrane Library

By Meredith Cameron

The Australian Federal Minister for Health and Ageing, Senator Kay Patterson, officially launched the national licence to *The Cochrane Library* in Melbourne on October 18, 2002.

It had been just five months since the National Institute of Clinical Studies (NICS) - Australia's national agency for closing the gaps between evidence and practice in health care - approached Senator Patterson suggesting the national licence. NICS was then asked to negotiate the licence with Update Software on behalf of the Federal Government and a launch date was fixed.

Several months of planning and frenzied activity followed, and NICS commissioned Steve McDonald from the Australasian Cochrane Centre to develop a user guide, which Steve demonstrated at the launch. A public relations and marketing plan was also written and implemented by Meredith Cameron who was seconded to NICS for the project from the Monash Institute of Health Services Research, and a range of promotional materials was developed by the project team.

The launch was timed to coincide with the Australasian Cochrane Centre's Contributors' Meeting so that as many reviewers as possible could attend. A keynote speaker at the meeting was Iain Chalmers who presented 'the History of Research Synthesis' just prior to the launch.

He praised this initiative and noted that Australia is one of the first countries to take up a national licence, following on from the UK, Norway and Ireland.

Senator Patterson's enthusiasm for *The Cochrane Library* was evident as she discarded her ministerial speech notes and spoke openly about her experiences as a health professional. She voiced her admiration of Iain Chalmers and his fellow researchers and academics whose efforts allow us all to reap the rewards of accurate and up-to-date evidence. She was also very enthusiastic about the impact this open access would have on consumer health information.

"Safety and quality in health care depend on the relationship between the practitioner and the health consumer. Informed consumers can make considered decisions about their own health care", she said.

The Minister then announced the NICS Cochrane Users Award. This will be awarded annually to applicants based in Australia who have demonstrated best use of research evidence contained in *The Cochrane Library* to enhance patient care. In 2003, the total value of the Award will be AUD \$10,000, with one winning award of \$5,000 and five runner-up awards of \$1,000.

(Continued on page 4)

COCHRANE NEWS

From the Co-Chairs

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As the Cochrane Collaboration has grown, so has the workload of the Steering Group and of its Chair. So much so that at the Annual General Meeting of the Cochrane Collaboration in Stavanger, Peter Langhorne passed over this seat to the two of us. We are very grateful to Peter for the work he did during the last two years, in particular in bringing the strategic plan up-to-date.

The latest draft of this is open for consultation (<http://www.cochrane.de/cochrane/stratp02.htm>). It will be finalised at the next Steering Group meeting in Melbourne in April 2003. The new Strategic Plan will provide a vision for the development of the Cochrane Collaboration over the coming years, along with ideas on how this will be achieved.

Looking back over the last couple of years, the growth in the Cochrane Collaboration has been tremendous. The thousandth Cochrane review appeared in Issue 1, 2001 of *The Cochrane Library* and we passed 1500 with the last issue of this year. But, with an estimate of at least 10,000 reviews being needed to cover all the studies currently in the Cochrane Central Register of Controlled Trials, there is still a lot of work to be done.

There are, however, an increasing number of people willing to do this work. Approximately 8000 people in a total of 78 countries are currently participating in the Cochrane Collaboration. This is an increase of 2000 in the last couple of years. In particular, there has been a big increase in the number of people from low and middle-income countries: rising from just over 300 in 2000, to nearly 600 in 2002. More than 4000 of the participants in the Cochrane Collaboration are reviewers.

A major challenge for the coming years is to ensure that the work of all these people, and the many thousands more who will participate in the Cochrane Collaboration in the future, is sustainable. The Steering Group has this very much in mind. The proposed development of the Information Management System (drawing on the findings from the Needs Assessment Survey which were reported in the last Cochrane News), the increasing discussions with current and potential funders through the Funders' Forum, the new publishing arrangement for the output of the Cochrane Collaboration and the appointment of a Chief Executive Officer should all help to achieve our mission of helping people make well-informed decisions about health care.

Mike Clarke and Jim Neilson

Co-Chairs, Cochrane Collaboration Steering Group

Submission Deadline

The deadline for submission of articles for Issue 27 of *Cochrane News* is **March 14, 2003**. Please e-mail articles (600 words maximum) for consideration to:

cochrane@mcmaster.ca

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Letter from the Editor

This has been an exciting year for the Cochrane Collaboration. As exemplified by the quote from Governor Kitzhaber of Oregon in the "Quotable Quotes" section, more and more people are becoming aware of the Collaboration. With this awareness has come an increased recognition of the importance of the work that we do, and an increased emphasis on evidence-based health care decision-making at every level.

Prime examples of this increased recognition are the various national provision schemes that were announced in 2002. In February, the first of these schemes was announced for the people on the island of Ireland. Norway and Finland followed suit in March, and most recently, National Provisions have been announced in England, Wales and Australia.

In this issue, you will find more information on some of the most recent National Provisions, and follow-up to the National Provision in Ireland. Other highlights include a preliminary announcement for the 2003 Colloquium in Barcelona, Spain, information about the new Open Learning Material for training Cochrane reviewers, an introduction to a new online User Guide to *The Cochrane Library*, and reports and announcements from across the Cochrane Collaboration.

It has truly been a pleasure putting this issue together and I hope that you will enjoy reading it. As the holiday season approaches for many of us, I would also like to wish all our readers a safe and happy holiday, and all the best in 2003.

Daren Spithoff
 Editor, *Cochrane News*
spithd@mcmaster.ca

Quotable Quotes

"It is good to know that others have been leading the way in developing the research base required for us to better know what really works in our healthcare system and what does not. The Cochrane Collaboration is a great illustration of what is possible, and our efforts to bring logic to our drug purchases here in Oregon would have been much more difficult if they had not already begun the kind of research that gives us the best information for making these decisions.

From my short exposure to the Collaboration's work, it is clear to me that we need both more of the analysis it does, and here in the U.S. we need to do more to support the kind of infrastructure that makes their work possible."

John A. Kitzhaber
 Governor of Oregon

An excerpt from Governor Kitzhaber's speech "Creating a Functional Marketplace for Prescription Drugs" as delivered at the Governor's Conference on Prescription Drugs, October 10, 2002.

For the full text of Governor Kitzhaber's speech, as well as additional materials from the Governor's Conference, please visit <http://www.oregonrx.org/> and click on "Governor's Conference".

Do you have something for **Cochrane News**? We'd love to hear about it! Please send your articles, letters and comments to:

cochrane@mcmaster.ca

National Provision In Wales

Joining an ever-growing list, the people of Wales now have free access to *The Cochrane Library*. This access was negotiated in a recent agreement between the Welsh Assembly Government and Update Software. *The Cochrane Library* can be accessed by anyone in Wales through the NHS Wales' Internet Web site at:

<http://www.wales.nhs.uk/>

The official Web site for NHS Wales, Health of Wales Information Service (HOWIS), continues to develop to assist health professionals, patients and the public in making informed choices about health services and personal health care. The addition of *The Cochrane Library* to the Web site is in line with this policy.

The Chief Medical Officer, Dr Ruth Hall, said: "It is important that action to improve health and well-being is founded on soundly-based evidence and this resource provides access to NHS staff and the public to a wide range of information necessary to plan and deliver improvements in treatment and health services."

Paraphrased from the original press release from the Welsh Assembly Government on August 27, 2002.

Australia Launches National License to The Cochrane Library

(Continued from page 1)

In thanking the Minister for her foresight in providing The Library to all Australians, Dr Jill Sewell, Chair of the Board of NICS, also paid tribute to the man who brought *The Cochrane Library* and evidence-based practice to Australia, Foundation Director of the Australasian Cochrane Centre, Professor Chris Silagy.

Many within Cochrane knew and loved Chris and were deeply saddened by his tragic death last December, so it was most appropriate that he was acknowledged several times during the launch as the one who had really made all this possible. It was also noted that as well as his link with the inception and success of the Australasian Cochrane Centre, Chris was founding Chair of NICS and founding Director of the Monash Institute of Health Services Research. It's probably the best possible tribute to Chris that, less than a year after his death, these three organisations have joined forces to make national access to *The Cochrane Library* a reality.

Newly-appointed Director of the Australasian Cochrane Centre, Assoc. Professor Sally Green said, 'It's an enormously exciting time to be taking up this position. As well as seeing the introduction of this open access, the ACC will also be hosting the Cochrane Collaboration Steering Group and Cochrane Centre Directors' meetings next March, accompanied by an international symposium on 'Aspects of Evidence'.

For more information on the NICS User Guide, NICS Cochrane Users Award, and application details and entry forms, go to:

<http://www.nicsl.com.au/>

Meredith Cameron is the Public Relations Manager at the Monash Institute of Health Services Research

Announcing the Australian National Provision



Back Row (left to right): Meredith Cameron, Amanda Alexander, Steve McDonald, Heather Buchan, Sally Green.

Front Row (left to right): Jill Sewell, Senator Kay Patterson, Sir Iain Chalmers.

Photo submitted by Meredith Cameron

User Guide to *The Cochrane Library*

By Steve McDonald

Australia is the latest country to have negotiated a national provision to *The Cochrane Library*. As part of our efforts to promote the use of the Library, the Australasian Cochrane Centre and the National Institute of Clinical Studies have joined forces to develop a Web-based user guide. You can view the Guide at:

<http://www.nicsl.com.au/cochrane/index.asp>

Different pages of the Guide look at the purpose of *The Cochrane Library*, the information it contains and how to search it. The Guide includes screen shots, cartoons and some limited flash animation. We have tried to make the content accessible to a wider audience than just clinicians. This is the first version of the Guide and we welcome any suggestions for improvements or corrections. You'll find a feedback form as part of the Guide.

As with other resources, you are welcome to link to the Guide and use it for training purposes.

Steve McDonald is a Research Fellow with the Australasian Cochrane Centre

Five Cochrane Fellows on the Island of Ireland

By Mike Clarke

Earlier this year, as part of the island of Ireland initiatives in relation to the Cochrane Collaboration which include open access to *The Cochrane Library* to everyone on the island, the Health Research Board, Dublin, and the R&D Office for the Health and Personal Social Services, Belfast, made funds available for five Cochrane Fellowships. These Fellowships are intended to provide Fellows with protected time on an indicative part-time basis of two days per week for a year. Each Fellow is expected to complete a Cochrane review during this time, and has committed to keep it up-to-date. The five successful applicants, the topics for their reviews and the relevant Collaborative Review Groups are:

Paul Beirne, Cork: Frequency of examination and scaling and polishing for maintaining oral health in adults (Oral Health Group)

Judy Bradley, Belfast: Short term ambulatory oxygen for obstructive pulmonary disease (Airways Group)

Jim Jamison, Dublin: Antibiotic management of urinary tract problems in people with spinal injury (Incontinence Group)

Emma McCall, Belfast: Plastic barriers for the reduction of heat loss in preterm infants immediately after birth (Neonatal Group)

Alan Moss, Dublin: Palliative stents for pancreatic cancer (Upper Gastrointestinal and Pancreatic Disorders Group)

Mike Clarke is the Co-Chair of the Cochrane Collaboration Steering Group

"Hitting the Headlines" from the UK National electronic Library for Health (NeLH)

"Hitting the Headlines" articles are evidence-based analyses of recent health news stories which have appeared in major newspapers in the UK. Each "Hitting the Headlines" article is produced within 48 hours of the original newspaper article, and has been researched and written by health researchers at the UK National Health Service Centre for Reviews and Dissemination (CRD) at the University of York. To read the latest "Hitting the Headlines" article, please visit the NeLH Web site at:

<http://www.nelh.nhs.uk/>

The Jack Sinclair Research Chair

Jack Sinclair, Coordinating Editor of the Neonatal Collaborative Review Group and a pioneer in the care and treatment of critically ill newborns, was recently honoured with the creation of an endowed research chair in neonatology at McMaster University. Dr. Sinclair was instrumental in establishing neonatal intensive care in Hamilton, Canada, and is recognized internationally as an expert in evidence-based neonatology.



Jack Sinclair with a young patient

Photo by Arne Ohlsson

The Hamilton Health Sciences Foundation has contributed \$1 million to create the Hamilton Health Sciences Foundation - Jack Sinclair Chair in Neonatology. McMaster University will match the endowment.

Jack Sinclair graduated in 1959 from the University of Manitoba, trained in New York and came to Hamilton in 1970 to become the founding director of the McMaster neonatal program, which has graduated numerous leaders in neonatology who practise around the world.

Jack is a professor emeritus of paediatrics and an associate member of the Department of Clinical Epidemiology and Biostatistics. He co-edited a research text in 1992 on neonatology, *Effective Care of the Newborn Infant*, which is considered a seminal work in this field.

"Neonatal intensive care for babies with life-threatening illnesses or extreme prematurity has resulted in many wonderful successes, and there are more gains to be made," he says.

"However, the successes have often been accompanied by some of the most difficult medical and ethical dilemmas to be found in any field of health care. The future of neonatology will be marked by an ever-increasing range of questions which need answers - biological, clinical, moral, economic, social. It is extremely gratifying to know that through the creation of this research chair, a foundation has been laid for McMaster to continue its leading role in tackling these challenges."

The University and the hospital will conduct an international search to find the inaugural chairholder.

From the press release from McMaster University on October 7, 2002

National Provisions Web Page

By Niki Rainbow

Update Software has added a new improved page to their Web site giving details of all the national provision schemes which are currently in place allowing countrywide access to the online version of *The Cochrane Library*.

The page also includes a link to information about access for low income countries with information on the different access schemes that are in place and how to register for free access to *The Cochrane Library*.

To view the new page simply log on to:

<http://www.update-software.com/cochrane/provisions.htm>

These pages will be updated as and when new countries join the national provision scheme to ensure that they always provide up-to-date information about access to *The Cochrane Library*.

Niki Rainbow is the Marketing Co-ordinator with Update Software

Open Learning Material for Reviewers

By Phil Alderson

As I write, the final touches are being put to Version 1.1 of the Cochrane Collaboration Open Learning Material for Reviewers. We have orders for several thousand copies of the CD, which should be sent out by the end of November. To help explain just what this material is, here are the answers to a few questions.

What is the idea behind this material?

Most reviewers have little access to in-depth, face-to-face training. Even where there are workshops, these usually cover a fraction of the skills and knowledge needed during the review process. The *Cochrane Reviewers' Handbook* is an excellent source of advice, but it can be a bit daunting to use. The Open Learning Material does not replace the *Reviewers' Handbook*; instead it provides a framework to progressing through the *Handbook*, supplementing it with examples and activities along the way.

What does it consist of?

First a note on terminology. 'Open learning' is used to mean learning at a person's own pace, largely without support. It is different from 'distance learning' in that it is not part of a course with a set timetable, tutorial support or exams. As with many things, these terms might be used differently in different places but we had to choose one description.

Anyway, the material consists of modules, including two optional ones, which follow the steps in a review from explaining what a systematic review is through to maintaining your review. Each module describes the topic in a 'friendly' way, suggesting appropriate points to read sections of the *Handbook* and giving examples and activities.

Reviewers will be able to get a copy of the CD from their CRG – we are supplying these to each entity. The material can be printed out from pdf files, viewed onscreen as a series of Web pages on CD, or accessed on the World Wide Web at:

<http://www.cochrane-net.org/openlearning>

Open Learning Material—Version 1.1

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Cochrane Collaboration

open learning material for reviewers


Version 1.1, November 2002

Editors
 Phil Alderson, UKCC
 Sally Green, ACC

Using this material

There are two main ways to use this material

- **On screen**
- **On paper**



Printable full
version

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Next: Introduction

A modified screen-shot from the online version of the Open Learning Material Version 1.1

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Cochrane Collaboration Open Learning Material for Reviewers

(Continued from page 7)

It isn't very interactive. Why not?

Many similar training materials have video clips, audio clips, interactive quizzes, etc. We have deliberately kept this material fairly low tech so that those who do not have access to fast computers with fast, stable Internet connections are not disadvantaged. It may be that future versions do have more interactive elements. Let us know what you think.

Who has prepared the material?

This has been a collaborative project involving the UK, Australasian and Nordic Cochrane Centres, together with members of the Statistical Methods Group. It has been approved by the Handbook Advisory Group. We plan to update it every two years, with minor changes in between.

Are there any restrictions on its use?

OK, you may not be asking this, but I thought I'd include it anyway. The material is the copyright of the Cochrane Collaboration.

We have also set some principles for its use, which have been endorsed by the Collaboration Steering Group. Use of this material should adhere to the following set of principles:

- This material, developed by the Cochrane Collaboration for training reviewers, should be freely available to those reviewers with a registered Cochrane review title
- Profits generated from training non-Cochrane reviewers with this material should benefit the Cochrane Collaboration
- Organisations utilising this material within their courses should acknowledge its source
- Any suggestions for the improvement and updating of this material should be sent to the editors so that these suggestions can be considered in future revisions of the material

Many people have helped me in making this happen, and it would be difficult to list them. It has taken a long time, much longer than I planned, to do this and I'd like to thank everyone who has helped in any way. I hope it proves useful.

Phil Alderson is the Associate Director (Training) at the UK Cochrane Centre and Co-Convenor of the Quality Advisory Group.

The NEW Cochrane Collaboration Web site is coming soon!

The new beta version of the Cochrane Collaboration Web site will be released for in-house user testing in February 2003. Please submit any design suggestions or wish list items to David Booker (booker@cochrane.de) before December 10, 2002. Wishes received after this date will be considered for later improvements.

Part of the user feedback process early in the new year may be a graphic design competition. Do you think your entity has the best looking Web site? Do you want to see its graphic themes adopted in the main Collaboration Web site design? If so, please contact David Booker, and he'll work up samples for the competition (tentative deadline: April 15, 2003).

To view the latest prototypes, please visit:

<http://www.cochrane.de/beta/>

Upcoming Colloquia - Part I

XI Cochrane Colloquium - 2003 - Barcelona, Spain

“Evidence, Health Care and Culture”

By Jordi Pardo

Next year the XI Cochrane Colloquium will be held in Barcelona, Spain, from October 26 to 31, 2003.



Temple de la Sagrada Família
(*Temple of the Holy Family*)

The format of the Colloquium will be different from that of previous years: the Colloquium will be divided in two parts. The first part (26-29 October) will offer anyone who is currently actively involved in the Collaboration or anyone who wishes to understand more about systematic review methodology, a chance to meet and reflect on issues directly related to the internal work of the Cochrane Collaboration. During these three days, meetings of the different Cochrane entities and workshops on methodological training will be prioritised. We will also devote three plenary sessions and four parallel sessions to issues relevant to the Cochrane Collaboration.

The second part of the Colloquium (29-31 October) will focus on the discussion of the experiences and challenges of applying the scientific evidence in different health, cultural and economical backgrounds, evaluating the contribution of the Cochrane Collaboration to this process.



Casa Batlló
(*House of Batlló*)



Mirador de Colón
(*Columbus Monument*)

In previous Colloquia, sessions aimed to meet these different objectives took place during the same period of time, with opinion differing about their compatibility. For this reason, and with the agreement of the Cochrane Colloquium Policy Advisory Group, we have decided to implement this new format in Barcelona and to evaluate its success.

A large range of sensational social events will be scheduled alongside all these scientific events: you will enjoy Barcelona!

WE HOPE TO SEE YOU IN BARCELONA!

For more information about the XI Colloquium please visit the Iberoamerican Centre Web site at:

<http://www.cochrane.es/colloquium/>

Jordi Pardo is the Administrator of the Iberoamerican Cochrane Centre

More about upcoming Colloquia on Page 11

Improving Your Review

Claims of 'No Difference' or 'No Effect'

By Phil Alderson

Iain Chalmers and I have done a study looking at how often the abstracts of Cochrane reviews claimed that an intervention had 'no effect', or that there was 'no difference' between two or more interventions. We found that over 20% of abstracts available by mid 2001 had such claims. We looked again at new reviews available in the first half of 2002 and found that about 13% still made such claims. Feedback on this project has been sent to each CRG.

Why is this important?

It is never correct to claim that there is 'no effect' or 'no difference'. No matter how much data we have, there will always be some uncertainty around our estimates of effect, and this is reflected in the confidence interval.

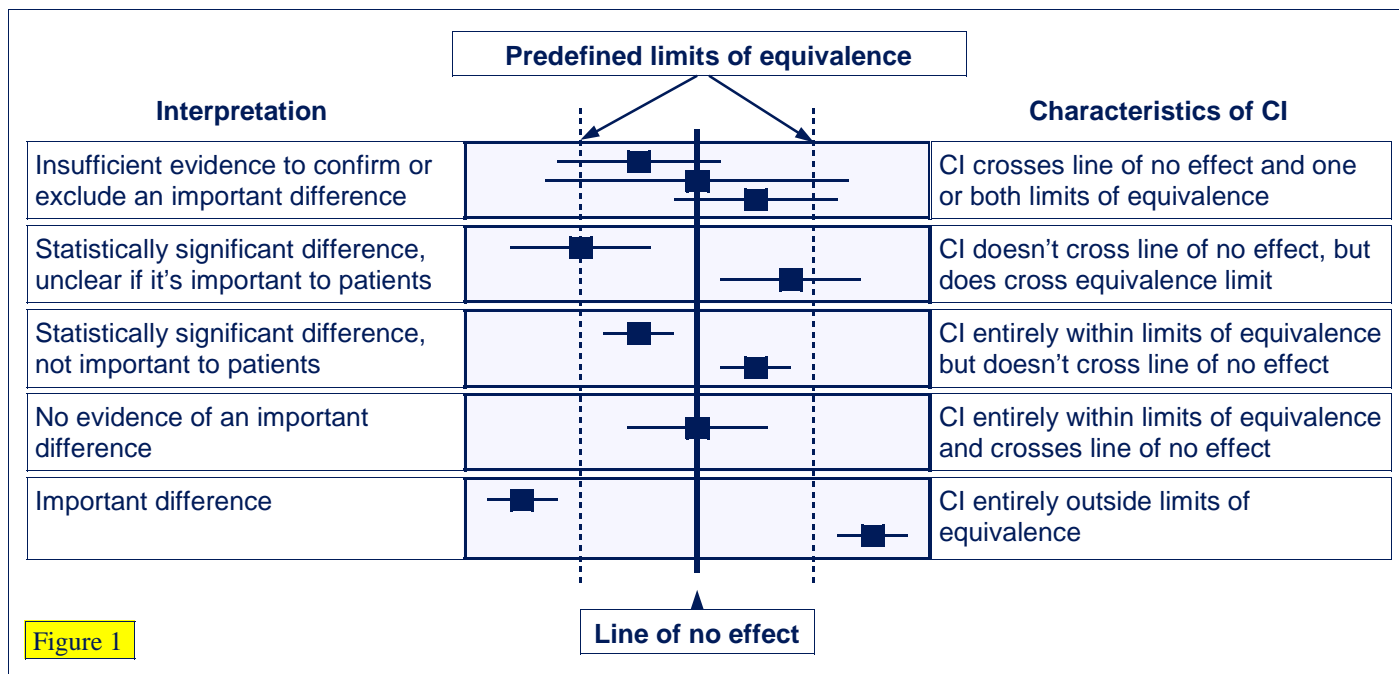
For example, in a review of steroids in head injury, there were 16 trials reporting on the risk of death, with a total of about 2,000 participants. The estimate of the effect of steroids was a risk ratio (RR) of 0.96 with a 95% confidence interval from 0.85 to 1.08. This means that we can conclude with some confidence that the true effect lies somewhere between a RR of 0.85 and 1.08. Both these extremes represent an effect within a range that is probably important to patients – a 15% decrease in the risk of death to an 8% increase. We would be wrong to report this as showing no effect of steroids, or that there is no difference between steroids and control.

Can we ever claim that interventions are 'similar' or 'equivalent'?

People conducting clinical trials have developed an approach called 'equivalence trials'. They come to a decision in advance about what size of effect is important to patients. When they have an estimate of effect and its confidence interval from the trial, they compare it with the predefined important difference.

So, for example, we might want to compare the effect of two different antibiotics on pain in middle ear infection in children. After consultation with parents, we could find that it would be important if the absolute risk of pain at 5 days were 10% more with one antibiotic than another. We are then saying that a result where the confidence interval lies completely between risk difference (RD) -0.1 and 0.1 has failed to find an important difference – the antibiotics have equivalent effect, in practical terms.

The diagram (figure 1) gives an idea of how we might apply this idea to the results of trials. It shows the possible relationships between the line of no effect, the equivalence limits and the confidence interval from a trial. The diagram shows that it's much more helpful to think in terms of the range of likely values, and that the point estimates are only of limited value.



(Continued on page 11)

Improving Your Review

(Continued from page 10)

It's also worth remembering that we choose the width of the confidence interval, usually as 95% confidence intervals, and sometimes the truth will lie outside this range. When interpreting the result we also need to remember to take all the other important factors into account, such as the possibility that the study is biased.

Should we apply the idea of equivalence to Cochrane systematic reviews?

In the same way that we could get an idea of equivalence limits for a trial, perhaps reviewers could give their readers an idea of what they consider to be an important effect size. The trials in a review may give a power calculation that specifies the size of effect the trialists considered to be important. Consumers involved in review groups could give a useful perspective on the size of effect they would hope to see with an intervention.

It would certainly add some useful information to a review as long as we follow our usual rule and are explicit about how we've come up with our ideas on an important effect size. Then readers can judge for themselves if they agree.

What should we write in Cochrane reviews where we get a result with a confidence interval spanning the line of no effect?

We should be very careful never to claim that there is 'no effect' or 'no difference', unless we qualify the statement. For example, we might write that there is no statistically significant difference, although this does not give any idea of how much uncertainty there is. It is probably better to make sure we report the actual results, and draw conclusions such as 'the average effect might lie anywhere between X and Y' where X and Y are the ends of the confidence interval. Again, we need to be careful not to forget about the factors that might make our confidence interval incorrect, such as bias.

To help you think through the wording for your review, the table below gives a few examples of the way we classified the text we found in abstracts.

Examples of statements classified as claiming 'no effect/difference'	<ul style="list-style-type: none"> • "had no effect" • "the effectiveness [of intervention A] did not differ from that [of intervention B]"
Examples of statements not classified as claiming 'no effect/difference', but which could be better worded	<ul style="list-style-type: none"> • "appeared to have equivalent efficacy" • "may be as effective" • "did not appear to be effective" • "was found to be no more effective" • "[Risk of the outcome] was similar [between two groups]"
Examples of appropriate wording	<ul style="list-style-type: none"> • "there was no statistically significant effect"

Phil Alderson is the Associate Director (Training) at the UK Cochrane Centre and Co-Convenor of the Quality Advisory Group

Upcoming Colloquia - Part II

XII Cochrane Colloquium - 2004 - Ottawa, Canada

The XII Cochrane Colloquium will be in Ottawa, Canada, from October 2 to October 6, 2004. The theme of this Colloquium is "Bridging the Gaps".

For more information please visit The Canadian Cochrane Network and Centre Web site at:

<http://cochrane.mcmaster.ca/colloquium/>

XIII Cochrane Colloquium - 2005 - Melbourne, Australia

The XIII Cochrane Colloquium will be in Melbourne, Australia, from October 22 to October 26, 2005.

Please check future issues of **Cochrane News** for more information.

Systematic Review Problem Busting Sessions

By Joy Oliver

As the South African Cochrane Centre (SACC) is situated at the most southern tip of Africa, we often have to generate our own “learning support groups”. We have been successfully running monthly informal “Systematic Review Problem Busting Sessions” since the beginning of 2001. The idea was born following a wonderful and very constructive visit to the SACC by Andy Oxman of the Oslo branch of the Nordic Cochrane Centre in 2000. Andy ran a “Systematic Review Development” course for the time that he was visiting the SACC. This course ran weekly for two hours at a time, from September until early December. For many of us who were busy developing protocols, or for the lucky ones who were already past that stage, this was our first introduction to the world of Systematic Reviews. At the end of Andy’s visit, we at the SACC resolved to try and carry on with informal meetings at which those attending would be given the chance to present their latest developments. Each presentation is followed by an informal discussion as we try to pool and draw from the expertise of those who attend.

These are a few remarks from regular “Problem-busting” attendees:

James Irlam: “The sessions are a valuable opportunity to present research protocols, discuss methodological issues, and share expertise and resources for the rigorous task of preparing a Cochrane review. Not to mention the morale boost from others who know what it’s all about! We have really benefited from them – thanks”.

Elizabeth Pienaar: “I find these sessions extremely valuable as they afford all participants the chance to learn. This is especially so when the Peer Reviewer comments of the different reviews are discussed”.

Martie Muller: “I find the Systematic Review Group (SRG) meetings very stimulating, encouraging and interactive. It is good to learn from other reviewers and share in one another’s experiences, struggles, solutions and success. A SRG meeting is a place where you can share your thoughts and get feedback from people who have experience and lots of common sense”.

Victoria Pillay: “The systematic review meetings provided me with the opportunity to share my experiences as a reviewer, the positive ones and the negative ones, with a group of people who were going through or had already experienced the same things. Each reviewer was a teacher - sharing their experiences and how they overcame [problems], and a scholar - learning from the experiences of others.”

Louise Spruyt: “It has been wonderful to be associated with, and to regularly meet with, a group of people who are grappling with the same problems. The discussions are particularly fruitful. We have also been able to draw on the expertise of ‘Cochranites’ who pass by from time to time, and were extremely fortunate to have Andy Oxman visit us again in 2001. We also value the visits from ‘out of town’ reviewers who visit Cape Town and are given the opportunity to attend and present from time to time.”

Joy Oliver is the Senior Officer at the South African Cochrane Centre



RevMan 4.2 is coming soon!

For more information, please visit:

<http://www.cochrane-net.org/revman/>

*Preparing, maintaining and promoting the accessibility of
systematic reviews of the effects of healthcare interventions*



Announcements and Agreements

New Statement to Strengthen Partnership Between Consumers and Researchers

The Statement on Consumer and Community Participation in Health and Medical Research has been developed jointly by the Consumers' Health Forum of Australia (CHF) and the National Health and Medical Research Council (NHMRC). It provides the key to developing stronger partnerships between consumers and researchers at all levels of health and medical research, according to CHF Executive Director, Helen Hopkins.

On behalf of Senator Kay Patterson, Minister for Health and Ageing, Ms Teresa Gambaro MP, Member for Petrie, launched the Statement in Brisbane on October 26, 2002. Chief Executive Officer of the NHMRC, Professor Alan Pettigrew, said that the primary purpose of the Statement is to encourage researchers to involve the community to a greater degree. An involved community, he said, is likely to be better informed, recognise the value of research and have a greater understanding of research strategies.

Ms Hopkins said research was a very powerful tool and those who controlled it had a great influence over the health care systems and a profound effect on the lives of all health consumers and their families. Health consumers believed that those most affected by these issues should be involved with its ongoing development. "This partnership will mean a community that is more aware of current health research activities," Ms Hopkins said. In 2000, the NHMRC agreed to fund the CHF's proposal to develop the Statement. The project was conducted as a partnership between consumers and researchers, who were represented on the Reference Group for the project, and who responded to the consultation paper and participated in roundtable discussions.

"Health consumers have a great deal to offer and many researchers agree that the methods and results that are open to informed public scrutiny and debate ensure integrity and accountability," added Professor Pettigrew. A copy of The Statement on Consumer and Community Participation in Health and Medical Research is available for download at:

<http://www.nhmrc.gov.au/publications/synopses/r22syn.htm>

For more information, please contact:

Helen Hopkins, Executive Director of Consumers' Health Forum of Australia on +61 04 1206 5957 or Anna Manzoney, NHMRC on +61 02 6289 9137 or +61 04 2200 8512.

From the National Health and Medical Research Council press release, October 25, 2002

Publishing Policy Revised in Response to Cochrane Efforts

The Journal of Neurology, Neurosurgery, and Psychiatry (JNNP) was approached by a team of neurological Cochrane collaborators in June with a proposal aimed at persuading the Journal to revise its publishing policy to allow for the acceptance of Cochrane reviews. In July, the Journal notified Dr. Carl Clarke, reader in clinical neurology and consultant neurologist for the University of Birmingham, that his efforts in spearheading the campaign, together with the Cochrane Neurological Network and other Cochrane collaborators, was successful. The Journal's editorial board agreed to revise its policy to allow Cochrane reviews to be considered for publication, provided they be edited for length and style.

Additionally, the Journal took interest in the concept of a "Cochrane Corner" proposed by Prof. Peter Sandercock, Coordinating Editor of the Cochrane Stroke Group. The Journal agreed to a revised "evidence-based corner" to be published in each month's issue, similar to the one recently introduced in the journal, Stroke. The evidence-based corner will provide a brief summary of an evidence-based review along with critical comments by a reviewer. It will appear in each month's issue and will span two pages.

From the Cochrane Neurological Network Newsletter, September 2002

Did You Know?

Moving on

After five enjoyable years serving alternately as the methodologist and coordinator of the New England Cochrane Center, Providence Office (NECC@P), I will be returning home to Baltimore, Maryland. Working at the NECC@P has been an extremely fulfilling job, and the decision to leave has been a difficult one. It was motivated both out of a desire to return home to Maryland and also to focus my work on complementary medicine research. In my new position I will continue to be involved with the Cochrane Collaboration, working as part of the Cochrane Complementary Medicine Field team at the University of Maryland.

The new group at the NECC@P is well positioned to bring the Center into its next phase of development. Laura Souders, who has been with the Center for over five months, has assumed all of the Center coordinator responsibilities (eg, CENTRAL development, MEDLINE retagging, Master List maintenance). Suzanne Brodney, who has been with us for over a year as the NECC@P Associate Director, and the Project Director for the US branch of the Cochrane Eyes and Vision Group, is also well acquainted with all core Center activities.

It's been a great pleasure to work with the many wonderful people in the Cochrane Collaboration, and I hope to continue to see and work with many of you in the future.

Best wishes,
Eric Manheimer
Methodologist/Coordinator, New England Cochrane Center, Providence Office

The French Cochrane Centre has closed

In September 2002, the French Cochrane Centre ceased to be a formal entity within the Cochrane Collaboration, due to lack of funding. While saying "goodbye" as a centre, most of the individuals associated with the French Cochrane Centre plan to remain involved with the Cochrane Collaboration, playing minor contributory roles as individuals. We have been very grateful to be part of this wonderful organisation and to promote its essential mission. May you enjoy continued success as you influence healthcare decision-making worldwide.

For those people from countries that were formally under the responsibility of the French Cochrane Centre (see list below) who wish to contact a Cochrane Centre, please contact the Italian Cochrane Centre (cochrane@marionegri.it) or German Cochrane Centre (mail@cochrane.de) until further notice.

Sincerely,
Jean-Pierre Boissel
Former Director, French Cochrane Centre

Countries for which the French Cochrane Centre was responsible

Europe:

France, Luxembourg, Monaco, Switzerland

Elsewhere: Algeria, Central African Republic, Chad, Comoros, Djibouti, Guinea, Guinea-Bissau, Ivory Coast, Madagascar, Morocco, Niger, Senegal, Tunisia

Cochrane News Advisory Committee Changes

Due to an increasing workload as Public Relations Manager of the Monash Institute of Health Services, Meredith Cameron has handed over her position as a Centre Representative for the Cochrane News Advisory Committee. On behalf of the Cochrane News Advisory Committee, I would like to thank Meredith for all her excellent help and advice, and to wish Meredith all the best in her future endeavours.

The Cochrane News Advisory Committee is pleased to welcome David Booker from the German Cochrane Centre as Meredith's replacement. David is the head Web designer working to redesign the Cochrane Collaboration Web site. We are excited to have David on board for this issue of Cochrane News, and we look forward to working with him in the future.

Daren Spithoff
Editor, Cochrane News

Moving? Leaving? Joining? Please send your *Did You Know?* items to the Editor at:

cochrane@mcmaster.ca

Workshop Information

For an up-to-date list of training workshops, please visit the Cochrane Collaboration Web site at:

<http://www.cochrane.org/cochrane/workshop.htm>

The following Cochrane Centres also maintain their own workshop pages:

Cochrane Centre	Web Site
Australasian	http://www.cochrane.org.au/
Brazilian	http://www.centrocohranedobrasil.org/
Canadian	http://cochrane.mcmaster.ca/workshops.asp
Dutch	http://www.cochrane.nl/
German	http://www.cochrane.de/deutsch/
Iberoamerican	http://www.cochrane.es/Agenda/
Nordic	http://www.cochrane.dk/ncc/courses.htm

Copenhagen Dream

By Fulvia Baldassarre

The Second Workshop on Cochrane Editing, organized by the Nordic Cochrane Centre on September 12 to 14, 2002, was for me a dream coming true. It all started back in March when I read the announcement in CCInfo for the first time. Having the opportunity to discuss issues, that I encounter almost everyday in my work, with the best brains in the world... being able to go to Denmark for the first time... going back to Europe after a long time... bringing back the fruits of those discussions and using them to improve my work... it seemed impossible, and yet, all this truly happened in three very intense days. We discussed issues ranging from peer review to methods, from statistical issues to reporting of the reviews. The best experiences were being able to work with such open-minded people as the organizers and all the participants, and being able to share what I learned with my colleagues once back home. Keep your eyes open for the next workshop in September 2003!

Fulvia Baldassarre is a Research Assistant/Coordinator with the Department of Clinical Epidemiology and Biostatistics at McMaster University in Hamilton, Ontario, Canada.

Submission Deadlines

<i>The Cochrane Library</i>	Module Deadlines (Update Software)	Specialized Register Deadlines (New England Cochrane Center, Providence Office)
Issue 2, 2003	February 26, 2003	December 6, 2002
Issue 3, 2003	May 28, 2003	March 21, 2003
Issue 4, 2003	August 27, 2003	June 27, 2003
Issue 1, 2004	November 19, 2003	To Be Announced

Note: These deadlines are for the Collaborative Review Groups and other Cochrane entities. Individual reviewers should contact their Collaborative Review Group for editorial deadlines.

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 Web: www.centrocochranedobrasil.org

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French Cochrane Centre (Centre Cochrane Français)

Closed on 6 September 2002.

German Cochrane Centre (Deutsches Cochrane Zentrum)

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