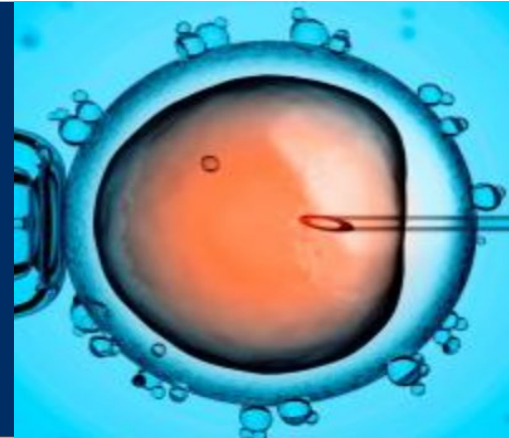


Collaborating to produce the 'PregCov-19' living systematic review



Pregnant women and their children are an at risk population group for COVID-19. Cochrane Gynaecology and Fertility collaborates with the World Health Organisation (WHO) Collaborating Centre for Global Women's Health at the University of Birmingham to conduct and continuously update a living systematic review on how COVID-19 affects pregnant women and their children.

What we did



Aim

COVID-19 is especially dangerous for at risk populations, such as pregnant women. It is critical to determine how COVID-19 affects pregnant women and their babies. A regular systematic review methodology is not sufficient to synthesise the overwhelming amount of evidence produced daily worldwide. We needed to carry out a living systematic review, meaning the review would be continually updated, incorporating new studies as they become available.



Activities

- The 'PregCov-19' living systematic review project commenced at the beginning of April 2020, just as Europe went into full lockdown. Our latest results from the living systematic review were published in September 2020.
- While maintaining the living systematic review, we also sought new members to add to the team and trained them. Training new members involves shadowing other team members for 1-2 weeks before independently carrying out tasks related to the living systematic review.
- We created a webpage on the University of Birmingham website (>14,000 views to date) to highlight the project and make it easily accessible to pregnant women, researchers, and clinicians worldwide. We are currently updating the results on the website every 2 months.

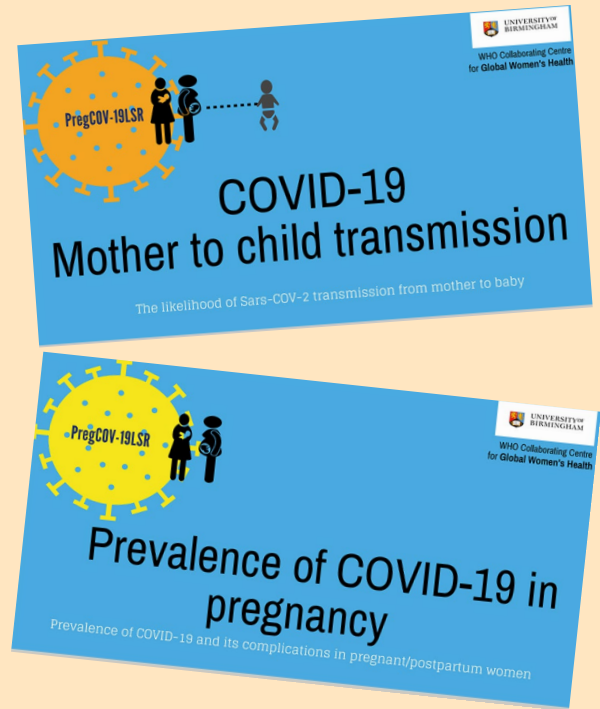


Collaboration

The PregCov-19 living systematic review working group is led by the University of Birmingham and includes the World Health Organization (WHO), Cochrane Gynaecology and Fertility (Netherlands), Cochrane Madrid, CIBER Epidemiology and Public Health, the US Centre for Disease Control, the European Centre for Disease Control, Elizabeth Glaser Pediatric AIDS Foundation, and the EPPI-Centre.

What we achieved

- Up to now, we have included 77 studies (13,118 pregnant women with COVID-19; 83,486 non-pregnant women with COVID-19) in the living systematic review.
- The first publication of the living systematic review (*Clinical manifestations, risk factors, and maternal and perinatal outcomes of coronavirus disease 2019 in pregnancy: living systematic review and meta-analysis*) was fast tracked by the British Medical Journal. The review took only 5 months from initiation to publication. It currently has an Altmetric score of 943.
- One of our significant findings from the published living systematic review is that pregnant and recently pregnant women may be at increased risk of admission to an intensive care unit. This finding was picked up by various news outlets worldwide such as CNN, the Guardian, and Bloomberg.



See more here:

<https://www.birmingham.ac.uk/research/who-collaborating-centre/pregcov/index.aspx>

<https://doi.org/10.1136/bmj.m3320>

<https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD202002/full>

What we learnt

1

Creating a solid framework for a large-scale living systematic review that can answer multiple research questions was crucial. A key lesson is it that we can use the framework and infrastructure for the current living systematic review to respond to other public health issues and future pandemics.

2

We learnt that the way we **organised our team**, i.e. allocating specific tasks to individual team members every week, enabled us to collectively work on the living systematic review without delays. We organised all documents according to the different stages of the review, and for each review question, in one place. The way we organised ourselves is useful for future projects that we work on.



Learn more

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