



CHBG NEWSLETTER

The Cochrane Hepato-Biliary Group (CHBG)

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THE CHBG IN ITS TENTH ANNIVERSARY YEAR

March 29 is a remarkable date in the life of The CHBG - it is the date when the Group was officially registered within the Cochrane Collaboration exactly ten years ago. The knowledge and experience accumulated during the ten years of existence has led to the registration of 228 titles for systematic reviews, of which 137 protocols and 55 reviews are published in the Cochrane Library. A number of reviews and protocols have been updated. Another eighty or more publications, related to the evidence-based medicine mainly within hepatology, have been published by staff at the Editorial base in Copenhagen. About 10000 randomised or controlled clinical trials have been filed in a ProCite database to serve authors of

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systematic hepato-biliary reviews. Another 8500 publications are filed in a miscellaneous database as background material for review authors. It includes meta-analyses, trials for which it is not clear whether they were randomised clinical trials or quasi-randomised clinical trials or none of these, reviews, observational studies, consensus statements, cases of rare diseases, letters, etc.

The Group have had nineteen meetings, two symposia, seven exhibitions, have presented posters, and members have won prizes at international and national events.

The members of the group, contributing to the work as authors, peer-reviewers, editors, hand searchers, translators, or consumers have now reached more than 1100 people. They come from different parts of the world and share their expertise working in international teams of review authors.

The Editorial Team in Copenhagen has hosted and educated researchers from different countries.

The main vision of the Group is to be at the core of production of evidence-based high-quality reviews of interventions for hepato-biliary diseases, effective introduction of treatments that work, and with the evidence ensuing from hepato-biliary reviews to enforce revision of inefficient treatments offered to patients. This will only be achieved with the continuous help of present and new members.

The numbering is a continuation from Vol.9, Issue 2, 2005

CHBG REVIEWS AND PROTOCOLS IN THE CLIB ISSUE 1 AND 2, 2006. NEW REGISTERED TITLES.

NEW REVIEWS

50. D-penicillamine for primary sclerosing cholangitis. Klingenberg SL, Chen W.
51. Hepatitis B immunisation for newborn infants of hepatitis B surface antigen-positive mothers. Lee C, Gong Y, Brok J, Boxall EH, Gluud C.
52. Percutaneous needle aspiration, injection, and reaspiration with or without benzimidazole coverage for uncomplicated hepatic hydatid cysts. Nasseri Moghaddam S, Abrishami A, Malekzadeh R.
53. Surgical versus endoscopic treatment of bile duct stones. Martin DJ, Vernon DR, Toouli J.

UPDATED REVIEWS

14. Propylthiouracil for alcoholic liver disease Rambaldi A, Gluud C.
15. Interventions for paracetamol (acetaminophen) overdose. Brok J, Buckley N, Gluud C.
16. S-adenosyl-L-methionine for alcoholic liver diseases. Rambaldi A, Gluud C.

NEW PROTOCOLS

113. Adefovir dipivoxil for chronic hepatitis B. Aggarwal R, Bhatia SJ, Ranjan P, Sachdev S.
114. Pegylated interferon alpha 2a versus pegylated interferon alpha 2b for acute and chronic hepatitis C. Simin M, Stimac D, Gluud C.
115. T-tube drain in laparoscopic common bile duct stone exploration. Gurusamy KS, Yu Z.
116. T-tube drain in open common bile duct exploration. Gurusamy KS, Yu Z.
117. Antifibrinolytic amino acids for acquired coagulation disorders in patients with liver disease. Marti-Carvajal AJ, Pérez-Requejo JL.
118. Azathioprine for primary biliary cirrhosis. Gong Y, Christensen E, Gluud C.
119. Endoscopic retrograde cholangiopancreatography with or without stenting in patients with pancreaticobiliary malignancy, prior to surgery. Mumtaz K, Hamid S, Jafri W.
120. Interferon-alpha for hepatitis D. Abbas Z, Salih M, Jafri W.
121. Lamivudine or adefovir dipivoxil for preventing hepatitis B recurrence after liver transplantation. Katz LH, Fraser A, Leibovici L, Tur-Kaspa R.
122. Prostaglandins for adult liver transplanted patients Vasconcelos CP, Ferraz LJR, Rother ET, Cavalcanti AB.
123. Routine abdominal drainage in uncomplicated laparoscopic cholecystectomy. Gurusamy KS, Yu Z.
124. Routine abdominal drainage in uncomplicated open cholecystectomy. Gurusamy KS, Yu Z.

UPDATED PROTOCOLS

None.

NEW REGISTERED TITLES

217. ERCP with or without stenting in patients with malignant stricture of the common bile duct awaiting surgery. Mumtaz K et al.
218. Imidazole derivatives for uncomplicated amoebic liver abscess. Mumtaz K et al.
219. Non-steroid anti-inflammatory drugs for biliary colics. Fraquelli M et al.
220. Bile acids for prevention of parenteral nutrition associated cholestasis. Thomas A et al.
221. Bile acids for parenteral nutrition associated cholestasis. Thomas A et al.
222. Prophylactic variceal band ligation for oesophageal varices in patients with cirrhosis who have never bled from varices. Sarin SK et al.
223. Plastic stents versus metal stents for endoscopic management of biliary strictures. Kassem AM et al.
224. Interventions for adult polycystic liver disease. Stoot J et al.



225. Routine abdominal drainage in uncomplicated liver resection. Gurusamy K et al.
226. Cholecystectomy versus no cholecystectomy in patients with silent gall stones. Gurusamy K et al.
227. Pegylated interferon and amantadine for chronic hepatitis C. Simin M et al.
228. Triple therapy of amantadine, interferon, and ribavirin for chronic hepatitis C. Falavigna M et al.

CHBG REVIEWS AND PROTOCOLS TO BE PUBLISHED OR EXPECTED TO BE PUBLISHED IN THE CLIB ISSUE 3 AND 4, 2006

REVIEWS IN EDITORIAL PROCESS

Presently fifteen reviews are undergoing editorial evaluation.

- Ø Antibiotics for cholangitis and/or cholecystitis. Kukuruzovic R et al.
- Ø Antioxidants supplements for non-alcoholic fatty liver disease and/or steatohepatitis. Lirussi F et al.
- Ø Bicyclol for chronic hepatitis C. Wu T et al.
- Ø Cyclosporin versus tacrolimus for liver transplanted patients. McAlister V et al.
- Ø Drugs improving insulin resistance for non-alcoholic fatty liver disease and/or non-alcoholic steatohepatitis. Angelico F et al.
- Ø Early versus delayed laparoscopic cholecystectomy in acute cholecystitis. Gurusamy K et al.
- Ø Elective surgery for benign liver tumours. Conte D et al.
- Ø Endoscopic balloon sphincter dilation (sphincteroplasty) versus sphincterotomy for common bile duct stones. Weinberg B et al.
- Ø Immunoglobulin for preventing hepatitis A. Liu J et al. Khan S et al.
- Ø Lamivudine for chronic hepatitis B. Mumtaz K et al.
- Ø Laparoscopic, small-incision, or open cholecystectomy for patients with symptomatic cholelithiasis. Keus E et al.
- Ø Metronidazole with or without image-guided percutaneous procedure for uncomplicated amoebic liver abscess. Labio E et al.
- Ø Pegylated interferon plus ribavirin versus non-pegylated interferon plus ribavirin for chronic hepatitis C. Simin M et al.
- Ø Portosystemic shunts versus endoscopic therapy for variceal rebleeding in patients with cirrhosis.
- Ø Terlipressin for hepatorenal syndrome. Gluud LL et al.
- Ø T-tube drain in open common bile duct exploration. Gurusamy K et al.

PROTOCOLS IN EDITORIAL PROCESS

Presently eleven protocols for reviews are undergoing editorial evaluation.

- Ø Non-steroid anti-inflammatory drugs for biliary colics. Colli A et al.
- Ø Lamivudine for chronic hepatitis B. Mumtaz K et al.
- Ø Percutaneous ethanol injection or percutaneous acetic acid injection for early hepatocellular carcinoma. Wagner A et al.
- Ø Prophylactic versus deferred cholecystectomy after endoscopic sphincterotomy to clear choledocholithiasis. McAlister V et al.
- Ø Routine abdominal drainage in uncomplicated liver resection. Gurusamy K et al.
- Ø Tiopronin for chronic hepatitis B. Xiaoyan C et al.
- Ø Pegylated interferon for chronic hepatitis B. Mumtaz K et al.
- Ø Cholecystectomy versus no cholecystectomy in patients with silent gall stones. Gurusamy K et al.
- Ø Antibiotics for hepatic encephalopathy. Falavigna M et al.
- Ø Pegylated interferon for acute hepatitis C. Simin M et al.
- Ø Cholecystectomy deferral in patients with endoscopic sphincterotomy. McAlister et al.

ABANDONED TITLES, PROTOCOLS AND REVIEWS

There are a number of registered titles that have never been developed into protocols. Following The CHBG policy, a protocol should be submitted within six months after the registration of the title for the systematic review, and a review within a year and a half after the protocol is published. Often we do not hear anything from authors when we send our inquiries about the status of the title, protocol, or review and neither do we get to know of their future plans in regard to the systematic review. In cases when people contact us with inquiry about a certain title, and our attempt to get in touch with the registered on the systematic review author fails, we feel free to de-register the title and give it to the person having expressed interest in it.

Having said the above, if you are registered on a title, we would appreciate letting us know if you are not willing to or cannot continue your work on it, no matter the stage and no matter the reason, so that we can offer abandoned titles to others.

RECENTLY ABANDONED PROTOCOL

'Vasopressin analogues for acquired coagulation



disorders in patients with liver disease.’

REVIEWS IN NEED TO BE UPDATED IN THE CLIB ISSUE 3 OR 4, 2006

The date in bracket refers to the search result sent to authors with a request to update the review.

- Ø Alpha-fetoprotein and/or liver ultrasonography for liver cancer screening in patients with chronic hepatitis B. Wun YT, Dickinson JA.
- Ø Anabolic-androgenic steroids for alcoholic liver disease. Rambaldi A, Iaquinto G, Gluud C. (June 2005)
- Ø Antibiotic prophylaxis for cirrhotic patients with gastrointestinal bleeding. Soares-Weiser K, Brezis M, Tur-Kaspa R, Leibovici L. (March 2005)
- Ø Antibiotics for leptospirosis. Guidugli F, Castro AA, Atallah AN. (September 2005)
- Ø Antibiotics for preventing leptospirosis. Guidugli F, Castro AA, Atallah AN. (September 2005)
- Ø Antibiotics for spontaneous bacterial peritonitis in cirrhotics. Soares-Weiser K, Brezis M, Leibovici L. (March 2005)
- Ø Artificial and bioartificial support systems for liver failure. Liu JP, Gluud LL, Als-Nielsen B, Gluud C.
- Ø Benzodiazepine receptor antagonists for hepatic encephalopathy. Als-Nielsen B, Gluud LL, Gluud C.
- Ø Bile acids for primary sclerosing cholangitis. Chen W, Gluud C.
- Ø Bile acids for viral hepatitis. Chen W, Liu J, Gluud C. (January 2006)
- Ø Branched-chain amino acids for hepatic encephalopathy. Als-Nielsen B, Koretz RL, Kjaergard LL, Gluud C.
- Ø Chinese medicinal herbs for asymptomatic carriers of hepatitis B virus infection. Liu JP, McIntosh H, Lin H. (December 2005)
- Ø Chinese medicinal herbs for chronic hepatitis B. Liu JP, McIntosh H, Lin H. (October 2005)
- Ø Emergency sclerotherapy versus medical interventions for bleeding oesophageal varices in cirrhotic patients. D'Amico G, Pagliaro LLP, Pietrosi GGPI, Tarantino IITA. (March 2006)
- Ø Interferon for acute hepatitis C. Myers RP, Regimbeau C, Thevenot T, Leroy V, Mathurin P, Opolon P, Zarski JP, Poynard T. (July 2005)
- Ø Interferon for interferon naive patients with chronic hepatitis C. Myers RP, Regimbeau C, Thevenot T, Leroy V, Mathurin P, Opolon P, Zarski JP, Poynard T.
- Ø Interferon for interferon nonresponding and relapsing patients with chronic hepatitis C. Myers RP, Poynard T.
- Ø Medicinal herbs for hepatitis C virus infection. Liu JP, Manheimer E, Tsutani K, Gluud C. (November 2005)
- Ø Neoadjuvant and adjuvant therapy for operable hepatocellular carcinoma. Chan ES-Y, Chow PK-H, Machin D, Soo K-C, Samuel M. (September 2005)
- Ø Nonabsorbable disaccharides for hepatic encephalopathy. Als-Nielsen B, Gluud LL, Gluud C.
- Ø Sphincterotomy for biliary sphincter of Oddi dysfunction. Craig AG, Toouli J. (October 2005)
- Ø Terlipressin for acute esophageal variceal hemorrhage. Ioannou G, Doust J, Rockey DC.
- Ø Ursodeoxycholic acid and/or antibiotics for prevention of biliary stent occlusion. Galandi D, Schwarzer G, Bassler D, Allgaier HP. (April 2006)
- Ø Ursodeoxycholic acid for primary biliary cirrhosis. Gluud C, Christensen E.

SYSTEMATIC REVIEWS: WHEN IS AN UPDATE AN UPDATE?

An article with the above title is published in *Lancet* 2006;367(9514):881-3, by Moher D and Tsertsvadze A, and we highly recommend authors of reviews to read it.

In summary, the understanding of a substantive update is ‘search for and aim to identify new evidence to incorporate into a previously completed systematic review.’

We would like to believe that most authors of published reviews do follow the literature on their topic and do run searches, but since they cannot identify new evidence that they can use for re-analyses, they find it unnecessary to let the editorial base staff know about their searches. This results in our resubmission of reviews for publication with no change of the dates in the ‘What’s new’ section in the review tree structure. Thus such reviews fall in the group of ‘outdated reviews’.

It could be that when an update is undertaken, it becomes necessary to extend the originally published protocol in regard to comparisons, outcomes, statistical analyses, etc in order - as the authors of the above article point out - to ‘accommodate newly identified evidence (eg, new treatment type, diagnostic method, outcome, different population)’.



If this is the case, then Authors must describe the exact changes undertaken in the 'What's new' section.

Re-analyses in combination with the new methods also define a review as a substantially updated review. Typographical errors, spelling mistakes, change of addresses, and similar are defined as minor update in RevMan, and in no way a review with such amendments is considered an update.

The respective 'Date new studies sought but not found; Date new studies found but not yet included/excluded; Date new studies found and included/excluded; authors' conclusions section amended', must be filled out each time a search is performed. With the exception of 'Date new studies found but not yet included/excluded', if one of the remaining three fields has changed since the last publication of the review, it makes the review brought up-to-date.

Ongoing studies should be considered as 'a new included or excluded study'. Complete the date 'New studies found and included/excluded' in RevMan!

If respective dates are not changed within two years of time, then authors stop receiving their complimentary copy of The Cochrane Library. For sure, what is worse is that the review loses some of its reliability!

PAST EVENTS

*CLINICAL TRIAL REGISTRY STANDARDS MEETING
April 25 to 27, 2005 Geneva, Switzerland.*

At the meeting organized by the WHO the clinical trial registry platform was established. Christian Gluud participated in the meeting.

*WORKSHOP ON RARE DISEASE CLINICAL TRIALS
November 21, 2005 Barcelona, Spain.*

Christian Gluud presented a lecture 'Expectations and fears of academic clinical research'.

The European Organisation for Rare Diseases (Eurordis) is launched in 2004. It is a European federation of 217 patient organisations present in 23 countries. It aims at a dialogue between patient organisations, pharmaceutical companies, academics, and national competent authorities, in which orphan drug development issues are presented and discussed.

7TH INTERNATIONAL SYMPOSIUM ON CYTOKINES & CHEMOKINES

September 8 to 9, 2005 Montréal, Canada.

Christian Gluud presented the 'Pegylated interferon plus ribavirin versus non-pegylated interferon plus ribavirin for chronic hepatitis C' review.

WORLD CONGRESS OF GASTROENTEROLOGY

September 12 to 14, 2005 Montréal, Canada.

At the Cochrane Collaboration session 'How Cochrane reviews can provide important evidence for practising gastroenterologists', Christian Gluud delivered a lecture entitled 'Ribavirin plus interferon versus interferon for chronic hepatitis C – making sense of 72 trials with 9991 patients'.

TRAIN THE TRAINERS SESSION

September 14, 2005 Montréal, Canada.

A satellite Train the Trainers (TTT) symposium was organised by Organisation Mondiale de Gastro-Entérologie (OMGE) and Organisation Mondiale D'Endoscopie Digestive (OMED) Education and Training Committee, under the guidance of James Toouli, Australia.

13TH UNITED EUROPEAN GASTROENTEROLOGY WEEK (UEGW)

October 15 to 19, 2005 Copenhagen, Denmark.

October 16, 2005 from 2:00 p.m. to 4:00 p.m. was run a collaborative meeting of the four Cochrane Gastrointestinal groups. Out of the six items on the programme, five were reviews from The Hepato-Biliary Group.

The CHBG together with The Cochrane Colorectal Cancer Group shared a stand, representing the Cochrane Gastrointestinal groups at the UEGW exhibition. The stand was sponsored by UEGW.

13TH COCHRANE COLLOQUIUM

October 22 to 26, 2005 Melbourne, Australia.

The Thomas C Chalmers MD Award is awarded each year to one poster only. We are happy to inform that Jesper Brok (author of several CHBG reviews) together with Kristian Thorlund, Jørn Wetterslev, and Christian Gluud (all members of The CHBG) were given the award. Their poster was entitled 'Trial sequential analyses of six Cochrane Neonatal Group meta-analyses considering adequate allocation concealment'. Congratulations!

20TH CHBG BI-ANNUAL MEETING DURING THE AASLD MEETING

November 11 to 15, 2005 San Francisco, USA.

The CHBG meeting was run in November 13. The attendance was poor. Christian Gluud, Yan Gong, and Marija Simin presented Cochrane reviews. Christian Gluud and Ronald Koretz chaired the meeting.



4TH CONGRESS OF THE CROATIAN SOCIETY OF GASTROENTEROLOGY

March 22 to 25, 2006 Zagreb, Croatia.

Davor Stimac and Christian Gluud chaired a session devoted to young investigators. Davor Stimac spoke on the scientific productivity of Croatian gastroenterologists. Christian Gluud gave an introductory lecture on evidence-based medicine in clinical practice. The Cochrane review 'Pegylated interferon plus ribavirin versus non-pegylated interferon plus ribavirin for chronic hepatitis C', presented by Marija Simin, won the first prize. It was selected among ten best orally presented posters. Congratulations!

FUTURE EVENTS

RARE DISEASES SEMINAR

April 6 to 7, London, UK

Christian Gluud will speak about the selection of control intervention as an issue in drug development for rare diseases.

The seminar is organised by Eudipharm-EMEA.

CLINICAL TRIAL REGISTRY STANDARD MEETING

April 26, Geneva, Switzerland

Christian Gluud will participate in the meeting.

THE 41ST ANNUAL EASL 2006 MEETING

April 27 to 30, Vienna, Austria.

The CHBG will not have a meeting during the EASL meeting this year. The CHBG will man a stand during the EASL exhibition. The stand is sponsored by EASL.

DIGESTIVE DISEASE WEEK (DDW) 2006

May 20 to 25, Los Angeles, USA

The CHBG will run a symposium May 23, 2006 from 8:30 a.m. to 10:00 a.m. at the Los Angeles Convention Center. This year it is the CHBG turn to represent the Cochrane gastrointestinal groups. (Programme is attached.)

The CHBG will have a stand during the DDW exhibition. The stand is sponsored by Wiley.

CONTINENTAL EUROPEAN COCHRANE ENTITIES MEETING

May 3 to 5, Copenhagen, Denmark

This training meeting is for European review group staff only. The meeting is organized, sponsored, and hosted by The Nordic Cochrane Centre.

INTERNATIONAL CLINICAL TRIALS' DAY

May 19, Brussel, Belgium

May 20th 2006 is the second International Clinical Trials' Day. The Day will be marked by a symposium and press conference on May 19, 2006. The celebration will take place from 10:30 a.m. to 1:30 p.m. at 21 Rue Champ de Mars, in the building of the EU Commission. Jacques Demotes and Christian Gluud will chair the symposium.

For information on what ECRIN is, their objectives, etc. visit <http://www.ecrin.org/>.

STAFF CHANGES

Abe Fingerhut, France, is a new editor of the CHBG. He joined the Group in January 2006. Abe Fingerhut holds several positions on editorial boards of major journals including *Gastroentérologie Clinique et Biologique*, *World Journal of Surgery* (co-editor), *American Journal of Surgery*, *European Journal of Surgery*, *Journal of Trauma*, *European Journal of Emergency Surgery and Intensive Care*, *British Journal of Surgery*, *Langensbecks Arkives für Chirurgie* (1998), *Journal of Hepatobiliary Surgery*, *Surgical Endoscopy*, and the *Asian Journal of Surgery*.

We welcome him most heartily again!

Abe will, among numerous other tasks, function as a 'liaison' and 'interpreter' of the Cochrane world and the Clinical world. This is a very important function, and we hope that it will increase the 'dialogue across invisible borders'!

VISITS

Andrea Rambaldi, Italy, visited twice the Editorial Team office for a week in November 2005 and February 2006. Andrea worked on an update of 'Propylthiouracil for alcoholic liver disease' and 'S-adenosyl-L-methionine for alcoholic liver diseases' reviews as well as on an abandoned review entitled 'Glucocorticosteroids for alcoholic hepatitis'.

David Martin, Australia, worked at the Editorial Team office from November 26 to December 3, 2005. He finished an abandoned review entitled 'Surgical versus endoscopic treatment of bile duct stones'.

Goran Bjelakovic, Serbia and Montenegro, worked at the Editorial Team office for over two months from September 18 to November 28, 2005. He worked on three projects with the common theme - antioxidant supplements, cancer, and mortality.

Khalid Mumtaz, Pakistan, worked at the Editorial Team office for over a month from October 20 to November 30, 2005. During this time he managed to



develop four protocols and collect studies for one of the reviews.

Abdel Meguid Kassem, Egypt, visited the Editorial Team office in October 12 to 14, 2005. He was introduced to systematic reviews, RevMan, as well as The CHBG Controlled Trials Register.

Marija Simin, Croatia, paid twice a two-days visit in November 2005 and January 2006. She worked on systematic reviews with peg interferon.

Abe Fingerhut, France, paid us a couple of hours visit in March 17, 2006. We discussed his involvement in the CHBG work.

HOW TO CITE REVMAN?

There is a new license agreement between The Nordic Cochrane Centre and The Cochrane Collaboration on software. Following it, we ask authors of protocols and reviews to cite RevMan in their reviews and articles in paper journals as: Review Manager (RevMan) [Computer program]. Version 4.2 for Windows. Copenhagen: The Nordic Cochrane Centre, The Cochrane Collaboration, 2003.

REVMAN 5 EXPECTED BY THE END OF 2006

The new Information Management System (IMS) consists of the IMS server – Archie – and RevMan 5. Archie is already being used by all entities to maintain contact details, and is currently being piloted by editorial bases. It is expected that RevMan 5 will be ready around the end of the year. RevMan 5 will also support the preparation of reviews on diagnostic test accuracy and reviews. When in 2007 the IMS and RevMan 5 are considered ready developed, reviews will be submitted to the review group coordinator and sent back to and exchanged among authors through the IMS.

Presently, it is very important that you let us know of your most recent address, so that we can update it in the system and hence in the published protocols and reviews.

IMPACT FACTOR FOR COCHRANE REVIEWS

The first Impact Factor will be released in 2008. New and substantively updated Cochrane reviews published from Issue 1, 2005, are now appearing on the ISI Web of Science website <http://portal.isiknowledge.com/>. Using two years of published reviews (2005 and 2006), ISI will measure citations of these reviews during 2007.

If ISI are able to identify papers published in print journals as versions of reviews published in the

Cochrane Database for Systematic Reviews (CDSR) in The Cochrane Library (CLib), the journal versions will be viewed as derivatives of the original review published in the Library, and the version in CDSR should receive the citation as part of the allocation for CDSR.

ISI advise that authors of papers cite correctly the articles. ISI do not 'move' articles from one source journal to another, even if the second is a variation of the first.

PUBLICATIONS OF COCHRANE REVIEWS IN PAPER JOURNALS

To find out whether a systematic review published in a paper journal is a version of a Cochrane review is not always easy. Please be reminded that section 2.2.4 of the Cochrane manual contains the Cochrane policy on it: <http://www.cochrane.org/admin/manual.htm>.

COCHRANE STYLE GUIDE

There is a new website for the Cochrane Style Resource, including a new edition of the Cochrane Style Guide: www.cochrane.org/style/csg.htm.

Authors of reviews are strongly advised to use the Style Guide when preparing their reviews.

PLAIN LANGUAGE SUMMARIES

(Earlier, called *SYNOPSIS*)

At cochrane.org/reviews, in addition to review abstracts, one will find plain language summaries. They are organized by topic. To search or browse these resources is free. The abstracts are also available in Spanish.

PROPOSED POLICY FOR LENGTH OF COCHRANE REVIEWS

It is recommended that the text of a review (ie, from Plain summary to Potential conflict of interest) should contain no more than 10000 words.

The following should be considered in order to reduce the number of words:

- Use the Tables of included or excluded studies to present relevant details of the studies.
- Use Additional tables or Appendices for detailed search strategies; detailed explanation of key concepts; presentation of quality assessment evaluation of randomisation components, blinding, and follow-up as well as recording of sample size and intention-to-treat analysis.

LITERATURE TO READ

We strongly suggest authors of reviews to read the



paper 'Estimating the mean and variance from the median, range, and the size of a sample', published in BMC Med Res Methodol. 2005;5(1):13, by SP Hozo, B Djulbegovic, and I Hozo.

Here we give the published abstract:

BACKGROUND: Usually the researchers performing meta-analysis of continuous outcomes from clinical trials need their mean value and the variance (or standard deviation) in order to pool data. However, sometimes the published reports of clinical trials only report the median, range and the size of the trial.

METHODS: In this article we use simple and elementary inequalities and approximations in order to estimate the mean and the variance for such trials. Our estimation is distribution-free, i.e., it makes no assumption on the distribution of the underlying data.

RESULTS: We found two simple formulas that estimate the mean using the values of the median (m), low and high end of the range (a and b , respectively), and n (the sample size). Using simulations, we show that median can be used to estimate mean when the sample size is larger than 25. For smaller samples our new formula, devised in this paper, should be used. We also estimated the variance of an unknown sample using the median, low and high end of the range, and the sample size. Our estimate is performing as the best estimate in our simulations for very small samples ($n < \text{or} = 15$). For moderately sized samples ($15 < n < \text{or} = 70$), our simulations show that the formula $\text{range}/4$

is the best estimator for the standard deviation (variance). For large samples ($n > 70$), the formula $\text{range}/6$ gives the best estimator for the standard deviation (variance). We also include an illustrative example of the potential value of our method using reports from the Cochrane review on the role of erythropoietin in anemia due to malignancy.

CONCLUSION: Using these formulas, we hope to help meta-analysts use clinical trials in their analysis even when not all of the information is available and/or reported.

CHBG WEBSITE - UPDATE

The CHBG has an updated web site. Suggestions for improvements and comments are most welcome.
<http://ctu.rh.dk/chbg>

COLLABORATION NEWS

Due to the limited space we cannot inform in details about new reports or policies of The Cochrane Collaboration or the working activities within entities. That is why we can only recommend that you visit regularly The Cochrane Collaboration web site to follow the news connected with policy decisions, updates of materials for authors, and software programmes. *See* <http://www.cochrane.org>

Information about workshops run in different countries you will find at
<http://www.cochrane.org/news/workshops.shtml>.

The bi-yearly Cochrane Hepato-Biliary Group (CHBG) Newsletter is written, edited, and published in electronic and paper format by staff at the CHBG Editorial Base in Copenhagen, Denmark. It is issued twice a year and distributed for free world-wide to all people on The CHBG members list who either have contributed, are contributing, or show interest in the work of The CHBG. The purpose is to inform the readers about activities within The CHBG.

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