

CHBG NEWSLETTER

The Cochrane Hepato-Biliary Group (CHBG)

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March 2008

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NEW PUBLICATIONS IN THE CLIB ISSUE 1 AND 2, 2008

NEW REVIEWS

82. Day-case versus overnight stay in laparoscopic cholecystectomy. Gurusamy KS, Junnarkar S, Farouk M, Davidson BR.
83. Ischaemic preconditioning for liver transplantation. Gurusamy KS, Kumar Y, Sharma D, Davidson BR.
84. Abdominal lift for laparoscopic cholecystectomy. Gurusamy KS, Samraj K, Davidson BR.
85. Antacids for preventing oesophagogastric variceal bleeding and rebleeding in cirrhotic patients. Yang J, Guo Z, Wu Z, Wang Y.
86. Antioxidant supplements for prevention of mortality in healthy participants and patients with various diseases. Bjelakovic G, Nikolova D, Glud LL, Simonetti RG, Glud C.

UPDATED REVIEWS

1. Antioxidant supplements for preventing gastrointestinal cancers. Bjelakovic G, Nikolova D, Simonetti RG, Glud C.
2. Somatostatin analogues for acute bleeding oesophageal varices. Gøtzsche PC, Hróbjartsson A.
3. Vitamin K for upper gastrointestinal bleeding in patients with liver diseases. Martí-Carvajal AJ, Cortés-Jofré M, Martí-Peña AJ.

NEW PROTOCOLS

151. Effect of different pressures of pneumoperitoneum in laparoscopic cholecystectomy. Gurusamy KS, Samraj K, Davidson BR.



152. Methods for decreasing infection after liver resections. Gurusamy KS, Pamecha V, Davidson BR.
153. Surgical resection for hepatocellular carcinoma. Abrishami A, Nasseri-Moghaddam S, Eghtesad B, Sherman M.
154. Techniques for liver parenchymal transection in liver resection. Gurusamy KS, Pamecha V, Sharma D, Davidson BR.
155. Three dimensional versus two dimensional imaging for laparoscopic cholecystectomy. Gurusamy KS, Samraj K, Davidson BR.
156. Cholecystectomy versus no cholecystectomy for gallbladder polyp. Gurusamy KS, Kumar Y, Farouk M, Davidson BR.
157. Cholecystectomy versus no cholecystectomy for suspected gallbladder dyskinesia. Gurusamy KS, Junnarkar S, Farouk M, Davidson BR.
158. Early versus delayed laparoscopic cholecystectomy for biliary colic. Gurusamy KS, Samraj K, Davidson BR.
159. Intra-peritoneal saline instillation versus no instillation for laparoscopic cholecystectomy. Gurusamy KS, Kumar Y, Davidson BR.
160. Liver resection versus other treatments for neuroendocrine tumours in patients with resectable liver metastases. Gurusamy KS, Kumar Y, Davidson BR.
161. Methods of gallbladder dissection for laparoscopic cholecystectomy. Gurusamy KS, Tapuria N, Davidson BR.
162. Methods for management of high-risk surgical patients with acute cholecystitis. Gurusamy KS, Kumar Y, Farouk M, Davidson BR.
163. Palliative cytoreductive surgery versus other palliative treatments in patients with unresectable liver metastases from gastro-entero-pancreatic neuroendocrine tumours. Gurusamy KS, Sharma D, Davidson BR.
164. Prevention of percutaneous injuries with risk of hepatitis B, hepatitis C, or other viral infections for health-care workers. Parantainen A, Anthoni M, Hellgren U-M, Lavoie M-C, Valdes A, Verbeek JH.
165. Techniques of biliary reconstruction for liver transplantation. Gurusamy KS, Mehta N, Davidson BR.
166. Two or three ports versus four ports for laparoscopic cholecystectomy. Gurusamy KS, Junnarkar S, Davidson BR.
167. Wound infiltration with local anaesthetic agents for laparoscopic cholecystectomy. Gurusamy KS, Kumar Y, Davidson BR.
- NEW REGISTERED TITLES**
304. Non-surgical methods to reduce ischaemia-reperfusion injury for liver resections performed under vascular control. Gurusamy G et al.
305. Methods to decrease blood loss for liver transplantation. Gurusamy G et al.
306. Magnetic resonance cholangiopancreatography for choledocholithiasis. Mesquita M et al.
307. Marginal donors for liver transplantation. Ciria R et al.
308. Glycyrrhizin for liver diseases. Zheng YL et al.
309. Antiviral treatments for lamivudine-resistant hepatitis B adult patients. Fisher A et al.
310. Interventions for adult polycystic liver disease. Stoot J et al.
311. Interventions for viral hepatitis B in liver transplanted patients. Grossman K et al.
312. Laparoscopic versus open liver resection for benign and malignant hepatic lesions. Ahmed I et al.
168. Pharmacological interventions to reduce reperfusion injury for liver transplantation. Gurusamy K et al.
169. The Sengstaken Blakemore tube for acute bleeding oesophageal varices. Patel K et al.
170. Topical haemostatic agents for liver resection. Gurusamy KS et al.
171. Ursodeoxycholic acid for biliary colics. Van Lieshout A et al.
313. Pharmacological interventions for decreasing pain in laparoscopic cholecystectomy. Gurusamy K et al.
314. University of Wisconsin solution versus Celsior solution in liver preservation for transplantation. Guo T et al.
315. Thromboprophylaxis for laparoscopic cholecystectomy. Giorgetti O et al.
316. Naloxone for hepatic encephalopathy. Sun SL et al.
317. Mechanical preventive measures for leptospirosis. Brett-Major D et al.
318. Bile acids for prevention of liver disease, related to bone marrow transplantation. Muzzillo D et al.
319. Bile acids for liver disease, related to bone marrow transplantation. Muzzillo D et al.

Please be reminded that authors are expected to submit draft protocols within six months from the



registration title date. If authors of reviews do not keep us at the Editorial office informed about the progress with their protocol or review, and in turn we cannot establish contact with the primary author because of, eg, invalid e-mail address, then we will feel free to consider the title abandoned, regardless of its development stage. In such cases we may offer it to another team of authors who have shown interest in it. For the Editorial process from Title to Protocol to Review development, please read The CHBG Module, published in The Cochrane Library and updated quarterly.

REVIEWS AND PROTOCOLS EXPECTED TO BE PUBLISHED IN THE CLIB ISSUE 3 OR 4, 2008

REVIEWS

1. Antibiotic prophylaxis for bacterial infections in cirrhotic patients with ascites. Cohen MJ, Sahar T, Benenson S, Elinav E, Brezis M, Soares-Weiser K.
2. Antibiotic prophylaxis for patients undergoing elective laparoscopic cholecystectomy. Sanabria A, Valdivieso E, Gomez G, Dominguez LC.
3. Antiviral prophylactic intervention for hepatitis C virus in patients undergoing liver transplantation Gurusamy KS, Samraj K, Davidson BR.
4. Banding ligation versus beta-blockers for primary prevention of bleeding oesophageal varices. Gluud LL, Klingenberg SL, Nikolova D, Gluud C.
5. Glucocorticosteroids for alcoholic hepatitis. Rambaldi A, Saconato HH, Christensen E, Thorlund K, Wetterslev J, Gluud C.
6. Immunoglobulins for preventing hepatitis A. Liu JP, Yang M, Du XM.
7. Hepatitis B immune globulin for prevention of posttransplantation hepatitis B. Hong Z, Gao RN, Zou S.
8. Immunosuppressive drugs for autoimmune hepatitis. Efsen E, Gluud LL, Schlichting P.
9. Ischaemic preconditioning versus no ischaemic preconditioning for liver transplantation. Gurusamy KS, Kumar Y, Sharma D, Davidson BR.
10. Robot assistant for laparoscopic cholecystectomy. Gurusamy KS, Samraj K, Davidson BR.
11. Virtual reality training for surgical trainees in laparoscopic surgery. Gurusamy KS, Aggarwal R, Palanivelu L, Davidson BR.
12. Preoperative biliary drainage for obstructive jaundice. Wang C, Gurusamy KS, Wang Q, He L, Xie X.

13. Transcatheter arterial embolisation and chemoembolisation for hepatocellular carcinoma. Oliveri RS, Gluud C.
14. Day-case versus overnight stay in laparoscopic cholecystectomy. Gurusamy KS, Junnarkar S, Farouk M, Davidson BR.
15. Metronidazole with or without image-guided percutaneous procedure for uncomplicated amoebic liver abscess. Chavez-Tapia NC, Labio E, Hernandez-Calleros J, Tellez-Avila FI, Torre-Delgadillo A, Uribe M.
16. Lamivudine for chronic hepatitis B in adults. Mumtaz K, Subhan A, Hamid S, Jafri W.
17. Pegylated interferon for chronic hepatitis B. Mumtaz K, Hamid S, Jafri W.
18. Pegylated interferon plus ribavirin versus non-pegylated interferon plus ribavirin for chronic hepatitis C. Review overtaken by Awad T et al (earlier authors Simin M, Brok J, Stimac D, Gluud C, Gluud LL.).
19. Peg interferon alpha 2a versus pegylated interferon alpha 2b for acute and chronic hepatitis C. Review overtaken by Awad T et al (earlier authors Simin M, Stimac D, Gluud C.).
20. Pegylated interferon for acute hepatitis C. Review overtaken by Awad T et al (earlier authors Simin M, Myers RP, Stimac D, Gluud C.).
21. Beta-blockers alone or with endoscopic therapy for prevention of variceal rebleeding in portal hypertension. Sharma BC, Gluud LL, Sarin SK.

PROTOCOLS

1. Antioxidant supplements for liver diseases. Bjelakovic G, Gluud LL, Nikolova D, Bjelakovic M, Gluud C.
2. Intra-peritoneal local anaesthetic instillation for laparoscopic cholecystectomy. Gurusamy KS, Kumar Y, Davidson BR.
3. Antibiotic prophylaxis for patients undergoing elective endoscopic retrograde pancreaticoduodenoscopy. Brand M, Bizon D, O' Farrell PJR.
4. Bariatric surgery for non-alcoholic steatohepatitis. Chavez-Tapia NC, Tellez-Avila FI, Barrientos-Gutierrez T, Mendez-Sanchez N, Lizardi-Cervera J, Uribe M.
5. Bile acids for treatment of parenteral nutrition-associated cholestasis. Pigott A, Akobeng AK, Challoner C, Fagbemi A, Thomas AG.
6. Gallbladder in-situ after endoscopic sphincterotomy versus cholecystectomy during or after treatment of common bile duct stones for



- patients with common bile duct stones. Gurusamy KS, Imber C, Farouk M, Davidson BR.
7. Glucocorticosteroids for liver transplanted patients. Langer G, Berg A, Fleischer S, Grossmann K, Grothues D, Melter M, Saal S, Weiß R, Wienke A.
 8. Imidazole derivatives for uncomplicated amoebic liver abscess. Mumtaz K, Hamid S, Jafri W.
 9. Immunosuppressive T cell antibody therapies for liver transplant recipients. Wilson CH, Asher JF, Manas DM.
 10. Non-invasive tests for the diagnosis of oesophageal varices in paediatric and adult patients. Gana JC, Turner D, Yap J, Zachos M and Ling SC.
 11. Non-surgical interventions to decrease blood loss and blood transfusion requirements for liver resection. Gurusamy KS, Kumar Y, Sharma D, Davidson BR.
 12. Nutritional interventions for liver-transplanted patients. Langer G, Saal S, Berg A, Fleischer S, Großmann K, Grothues D, Melter M, Weiß R, Wienke A.
 13. Pentoxifylline for alcoholic hepatitis. Whitfield K, Rambaldi A, Gluud C
 14. Pharmacological interventions to reduce ischaemia-reperfusion injury for liver resections performed under vascular control. Abu-Amara M, Gurusamy KS, Davidson BR.
 15. Plastic stents versus metal stents for endoscopic management of malignant biliary tract strictures. Kassem AM, Ibrahim M.
 16. Intra-peritoneal local anaesthetic instillation for laparoscopic cholecystectomy. Gurusamy KS, Kumar Y, Davidson BR.
 17. Vaccines for leptospirosis. Protocol overtaken by Abdo E and Philip J (Previous authors Guidugli F, Castro AA, Atallah AN.).
 18. Weight reduction for non-alcoholic fatty liver. Protocol overtaken by Wang J et al (Previous authors Wang RT, Koretz RL, Yee HF).
- gastrointestinal bleeding. Chavez-Tapia NC et al.
5. Antibiotics for spontaneous bacterial peritonitis in cirrhotics. Cohen M et al.
 6. Radiofrequency thermal ablation versus other interventions for hepatocellular carcinoma. Galandi D et al.
 7. Ursodeoxycholic acid and/or antibiotics for prevention of biliary stent occlusion. Galandi D et al.
 8. D-penicillamine for primary sclerosing cholangitis. Klingenberg SL et al.
 9. Interferon for interferon nonresponding and relapsing patients with chronic hepatitis C. Pleguezuelo M et al.
 10. Antibiotics for leptospirosis. Review overtaken by Brett-Major D et al.
 11. Antibiotics for preventing leptospirosis. Review overtaken by Brett-Major D et al.

REVIEWS TO BE UPDATED

If you are a lead author of any of the reviews listed further down the page and if you no longer wish or have the possibility to maintain the review, please inform us.

If you intend to maintain the review, then please inform us about your plan so that we know when to expect the review and how we can assist you. Deadlines for updates can be prolonged. In case the lead author of the review is prevented from performing the update, then any of the co-authors may take the lead. However, we shall be informed.

The CHBG Editorial Team office will feel free to offer outdated reviews (ie, not updated in the last two years since last publication date) to any other team of authors who have expressed an interest in it.

In the Cochrane Handbook for Systematic Reviews for Interventions, Chapter 3 tells about maintaining reviews: updates, amendments, and feedback, and in Box 3.2.c, you will find the criteria to be fulfilled for a new citation version of a Cochrane review.

Authors are strongly advised to contact Kate Whitfield (kate.whitfield@ctu.rh.dk) with requests for updated searches on the review, help with searches and search strategies, or translation requests.

1. Alpha-fetoprotein and/or liver ultrasonography for liver cancer screening in patients with chronic hepatitis B.

REVIEWS, WHICH UPDATES ARE EXPECTED TO BE PUBLISHED IN ISSUE 3 OR 4 OF THE CLIB

1. Ursodeoxycholic acid for primary biliary cirrhosis. Gong Y et al.
2. Milk thistle for alcoholic, hepatitis B, and hepatitis C liver diseases. Rambaldi et al.
3. Emergency sclerotherapy versus medical interventions for bleeding oesophageal varices in cirrhotic patients. D'Amico G et al.
4. Antibiotic prophylaxis for cirrhotic patients with



2. Artificial and bioartificial support systems for liver failure.
3. Benzodiazepine receptor antagonists for hepatic encephalopathy.
4. Bile acids for liver-transplanted patients.
5. Bile acids for primary sclerosing cholangitis.
6. Branched-chain amino acids for hepatic encephalopathy.
7. Chinese medicinal herbs for asymptomatic carriers of hepatitis B virus infection.
8. Chinese medicinal herbs for chronic hepatitis B.
9. Colchicine for alcoholic and non-alcoholic liver fibrosis and cirrhosis.
10. Colchicine for primary biliary cirrhosis.
11. Dopaminergic agonists for hepatic encephalopathy.
12. D-penicillamine for primary biliary cirrhosis.
13. Glucocorticosteroids for primary biliary cirrhosis.
14. Glucocorticosteroids for primary sclerosing cholangitis.
15. Glucocorticosteroids for viral hepatitis C.
16. Hepatitis B immunisation for newborn infants of hepatitis B surface antigen-positive mothers.
17. Hepatitis B vaccination for patients with chronic renal failure.
18. Interferon for acute hepatitis C.
19. Interferon for interferon naive patients with chronic hepatitis C.
20. Interventions for paracetamol (acetaminophen) overdose.
21. Medicinal herbs for hepatitis C virus infection.
22. Methotrexate for primary biliary cirrhosis.
23. Neoadjuvant and adjuvant therapy for operable hepatocellular carcinoma.
24. Nonabsorbable disaccharides for hepatic encephalopathy.
25. Percutaneous needle aspiration, injection, and reaspiration with or without benzimidazole coverage for uncomplicated hepatic hydatid cysts.
26. Propylthiouracil for alcoholic liver disease.
27. Ribavirin monotherapy for chronic hepatitis C.
28. Ribavirin plus interferon versus interferon for chronic hepatitis C.
29. S-adenosyl-L-methionine for alcoholic liver diseases.
30. Sequential combination of glucocorticosteroids and alfa interferon versus alfa interferon alone for HBeAg-positive chronic hepatitis B.
31. Sphincterotomy for biliary sphincter of Oddi dysfunction.
32. Surgical versus endoscopic treatment of bile duct stones.
33. Tamoxifen for hepatocellular carcinoma.
34. Terlipressin for acute esophageal variceal hemorrhage.
35. Vaccines for preventing hepatitis B in health-care workers.

PAST EVENTS

THE 15th COCHRANE COLLOQUIUM

The colloquium took place in Sao Paulo in October 2007 and was a huge success. Its themes were evidence-based care for all and patient-reported outcomes. Besides medical participants, the colloquium included judges, lawyers, and general attorneys. There were no for-profit companies represented and there was no industry funding at the colloquium. The plenary sessions, workshops, and the social events were a success.

THE CHBG EXHIBITION STAND DURING THE 58th ANNUAL AASLD MEETING, BOSTON, MA, USA

For the first time at an AASLD exhibition, The CHBG manned a stand in November 2 to 6, 2007. We had a pleasing attendance; many new people came to the stand and showed interest in The CHBG work. Some of them have registered titles for systematic reviews.

We wish to welcome all new CHBG members!

FUTURE EVENTS

THE 43rd ANNUAL EASL 2007 MEETING

April 23 to 27, Milan, Italy.

Poster presentation

Andrea Rambaldi, Italy, has a poster presentation on glucocorticosteroids for alcoholic hepatitis.

THE 22nd BI-ANNUAL CHBG MEETING

The CHBG will hold a bi-annual meeting on 23 of April 2008. The meeting will start at 9:00 am and finish at 11:45 am. The meeting programme has been sent out to all people with an e-mail address as well as it is given on the last page of the present CHBG Newsletter. If you are not among the people who have received the programme, it is either because the e-mail address we have is wrong or it does not exist in our system. We will be happy if you send us your e-mail address for future correspondence.

THE CHBG EXHIBITION STAND

CHBG staff will be in attendance at the stand at all times when the EASL exhibition is open. We hope to meet you at the stand and answer your questions.



The CHBG meeting and exhibition are partly sponsored by the EASL secretariat for which we are very grateful.

THE INTERNATIONAL CLINICAL TRIALS' DAY - ECRIN MEETING

May 20, 2008, Brussels, Belgium

In 2008 it is 261 years since James Lind launched his controlled clinical trial (www.jameslindlibrary.org), and this will be celebrated on the International clinical trial's day. The meeting will run from 3:00 pm to 5:30 pm at Résidence Palace, 155 Rue de la Loi (métro Schuman) (www.ecrin.org).

PRELIMINARY PROGRAMME

Chair: Christian Gluud

15.00-15.05 Christian Gluud, ECRIN Network Committee, DCRIN and the Copenhagen Trial Unit: Welcome - why are we here?

15.05-15.25 Nicola Bedlington, Director of European Patients' Forum: What does EU patients expect from the research community and from society?

15.25-16.10 Sir Richard Peto, Director of Clinical Trials Service Unit, Oxford: Large-scale randomised evidence, 1980-2020: how can we keep on getting clear answers to important questions?

16.10-16.35 Davina Ghersi, Coordinator WHO Trial Platform: WHO announces consultation on reporting the findings of clinical trials.

16.35-17.00 *Will be presented by a member of the EU Parliament*: How can EU politicians help setting the record straight?

17.00-17.30 Panel discussion.

You are most welcome to attend the meeting.

THE 16th COCHRANE COLLOQUIUM

October 3 to 7, 2008 Freiburg, Germany

The colloquium theme is 'Evidence in the era of globalisation'.

Some of the key dates are:

28 April - Consumer Stipends Deadline

28 April - Developing Country Stipends Deadline

26 May - Notification of Stipends Acceptance

30 June - Early Registration Deadline.

For more information, <http://www.colloquium.info>

THE 59th ANNUAL AASLD MEETING

October 31 to November 4, 2008

San Francisco, CA, USA

at Moscone West Convention Center

<https://www.aasld.org>

The CHBG has planned a bi-annual meeting during the AASLD meeting (November 2 to November 6, 2007). Details are not known yet.

The CHBG will also man a stand during the AASLD exhibition.

VISITS

Guisepina Aloj, Italy, visited the Editorial Team Office in November 25 to December 5, 2007. Guiseppina worked on interventions for thalassaemia.

Goran Bjelakovic, Serbia, paid us a three-months visit from September 23 to December 12, 2007. He worked on 'Antioxidant supplements for prevention of mortality in healthy participants and patients with various diseases' review, update of 'Antioxidants for preventing gastrointestinal cancers', and on 'Antioxidant supplements for liver diseases' review.

Andrea Rambaldi, Italy, visited the Editorial Team Office in January 7 to 15, 2008. Andrea worked on the update of the review 'Milk thistle for alcoholic and/or hepatitis B or C virus liver diseases'.

COLLABORATION NEWS

NEW AND REVISED VERSION OF THE COCHRANE HANDBOOK

A major revision of the Cochrane Handbook for Systematic Reviews of Interventions (Version 5.0.0) is now available. It is included in RevMan 5 (Read further in this Newsletter) and is scheduled for publication in book form by Wiley-Blackwell in time for the Freiburg colloquium.

Details are available at

<http://www.cochrane.org/resources/handbook>.

The browseable version of the Handbook can be accessed directly at <http://www.cochrane-handbook.org>.

The Handbook now consists of three parts with a total



of 22 chapters. The core material (Parts 1 and 2) has been extensively revised and updated, and includes information on: new definitions around updates; the new 'Risk of bias' tool; 'Summary of findings' tables; a new chapter on reporting biases; extensive resources to aid searching for studies. Part 3 consists of chapters on special topics: Including non-randomised studies; Adverse effects; Incorporating economics evidence; Special topics in statistics; Patient-reported outcomes; Reviews of individual patient data; Prospective meta-analysis; Qualitative research and Cochrane reviews; Reviews in health promotion and public health; and Overviews of reviews.

COCHRANE REVIEWS ON DIAGNOSTIC TEST ACCURACY

The CHBG has started to register titles for Diagnostic Test Accuracy reviews. RevMan 5 allows the preparation of these reviews. You will find the first chapter of the Cochrane Handbook for Diagnostic Test Accuracy Reviews at

<http://srdta.cochrane.org/en/authors.html>

It is still under development!

The Australasian Cochrane Centre is currently collecting individual diagnostic accuracy studies for the Diagnostic Study Register.

REVIEW MANAGER (REVMAN)

The following text contains important information for authors of CHBG reviews and other interested researchers about the most recently released version RevMan 5 and conversion of reviews.

What is RevMan?

Review Manager (RevMan) (<http://cc-ims.net/RevMan>) is the software used for preparing and maintaining Cochrane reviews. RevMan allows you to enter protocols, as well as complete reviews, including text, characteristics of studies, comparison table, and study data. It can perform meta-analysis of the data entered, and present the results graphically. RevMan 5 is the latest version, released on March 10, 2008 and replaces previous versions. RevMan 5 will let you do more and is simpler to use. Its new interface lets you work in a single document that is easily shared with co-authors and editors, it is also much more user friendly. In addition to Intervention reviews, the new version includes the ability to write Diagnostic test accuracy reviews, Methodology reviews, and Overviews of reviews (the new term of Umbrella reviews).

On what platforms RevMan works?

RevMan 5 works on multiple platforms, including Windows, Mac OS X, and Linux.

From where to download it, how, and when should authors start using RevMan 5?

The Cochrane Collaboration Steering Group (CCSG) is presently writing to all authors of Cochrane reviews with an e-mail address in Archie (Archie is the Cochrane Collaboration's central server for managing documents and contacts details

(<http://archie.cochrane.org/>)) to inform them of the date by which all Collaborative Review Group editorial offices will begin using RevMan 5 to process reviews, and the implications this will have for them and their review teams.

Ongoing support for authors.

There is a RevMan 5 User Guide, a substantially updated Cochrane Handbook, and a self-paced RevMan 5 tutorial. The CHBG will continue to provide support to authors in the use of RevMan. However, authors may also contact the author's reference Cochrane Centre for assistance.

Converting reviews from RevMan 4 to RevMan 5 and responsibility.

During the transition period, The CHBG will be responsible for converting as many reviews as possible. Reviews will be converted individually. A checklist is developed by the RevMan team to detail what should be checked before Cochrane groups release a RevMan 5 review for publication and what can be left until the authors update their review. At the end of the conversion period, reviews that have not been converted during the transition period will be converted centrally. This conversion will take place immediately after the November 2008 quarterly module submission deadline.

Who will support authors in the conversion of their reviews from RevMan 4 to RevMan 5?

The CHBG will support the conversion of reviews submitted for editorial processing. If the review is converted during the editorial processing of a new draft, or an amended review submitted by authors during the transition period, the checking will be the responsibility of both the authors and the editorial base, as part of the usual editorial processing of drafts. Reviews converted centrally either during or after the transition period will not need to be checked by the authors or The CHBG unless the person doing the central conversion has queries. In such cases, the CHBG will be asked to check the conversion. Authors



will be informed when their reviews have been converted in case they wish to check the conversion of their reviews in Archie.

When do the new tables in RevMan 5 (Summary of Findings, Risk of Bias) have to be completed?
It is not expected that the new tables will be produced at the time of conversion. The new tables should be completed for reviews that have protocols submitted for editorial processing after the CHBG's initial adoption of RevMan 5. However, it is strongly encouraged that the new tables are completed for new and updated reviews, submitted for editorial processing following the conversion period. For the Summary of Findings and Risk of Bias tables, see the updated Handbook.

Which field does the RevMan 4 substantive updated field feed into in RevMan 5?
During the conversion to RevMan 5, the date of last substantive update in RevMan 4 will become a History date in RevMan 5 with the Event described as "New citation: conclusions changed" and the Description given as "Substantive amendment". The 'What's new section' in RevMan 5 will give the date on which the review was converted to RevMan 5 with the Event "Amended" and the Description "Converted to a new review format".

What will happen to the information in the 'What's new section' of the RevMan 4 file when the review is converted to RevMan 5?

The information from the 'What's new section' in RevMan 4 will be copied to unpublished notes fields (yellow sticky notes) for the Dates section and the 'What's new section'. Authors or the editorial base can create history events in RevMan 5 based on this information manually, if they wish to do so. If not, users of The Cochrane Library interested in this information can consult previously published versions in the archive of The Cochrane Library.

Please note that

- It will not be possible to revert a review to RevMan 4 after it has been edited in RevMan 5.
- If a Contact author uses RevMan 5 all Co-authors must also use RevMan.
- All protocols and reviews have to be converted to RevMan 5 within nine months (ie, three module submissions to The Cochrane Library) following the general release of RevMan 5 -

see <http://www.cc-ims.net/RevMan/RevMan5/>.

- During the transition period, both RevMan 4 and RevMan 5 reviews will be published alongside each other.
- Cochrane reviews must start their life in Archie with the registration of a title. Authors with access to Archie can check the title out of Archie in order to develop their protocol. Authors will be able to create new reviews in RevMan 5 but will not be able to check them into Archie. Authors would need to contact The CHBG editorial base about this. A quick start for author's material on how to use Archie is to be found at <http://cc-ims.net/Projects/newIMS/Training/Quickstart-for-Authors.pdf>
- Authors must prepare and submit their reviews, following the updated Cochrane Style Guide. It continues to be part of RevMan as well as it is to be found on the Cochrane webs site, <http://www.cochrane.org/style/home.htm>
- Authors are strongly advised to run the RevMan 5 tutorials on the RevMan website.

Technical advice on how to change the amount of memory that RevMan 5 is allowed to use (Windows only)

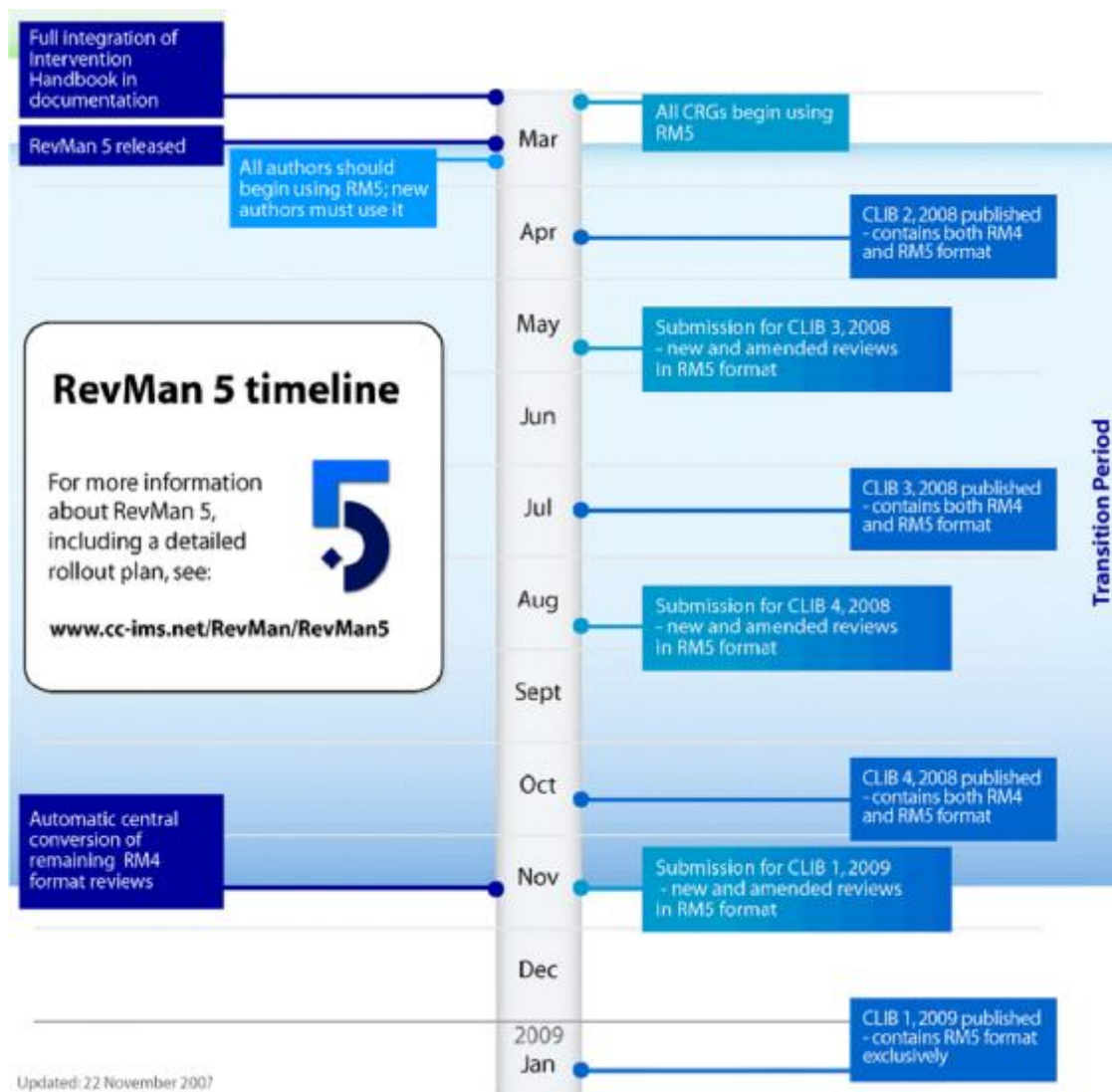
If you are working on large reviews and have plenty of RAM, or use a computer with a small amount of RAM, you might get better performance from RevMan's if you adjust the amount of memory that RevMan is allowed to use (the default is 256 MB): Right click on the Review Manager shortcut on the desktop, and choose Properties. In the Target box, which will contain something like "C:\Program Files\Review Manager 5\Review Manager 5.exe", add the following after the last double-quote ' -J-Xmx512m' (do not add the single quotes, but do add a space between the double quote and the first dash). This will set the maximum amount of memory to 512 MB. You should adjust the number to a value suitable for your system.

On page 9, the timeline for RevMan 5 is given.

COCHRANE COLLABORATION WEB SITE

If you wish to follow the news connected with policy decisions, updates of materials for authors, workshops and meetings, and software programmes, visit regularly <http://www.cochrane.org>





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 in paper and electronic formats world-wide to all people on The CHBG members list who either have contributed, are contributing, or have shown interest in the work of The CHBG. The purpose with The CHBG Newsletter is to inform its readers about activities within The CHBG.

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PROGRAMME
of
**THE 22nd COCHRANE HEPATO-BILIARY
GROUP BIENNIAL MEETING**
DURING THE 2008 EASL MEETING
MILAN, ITALY

Date: Wednesday, April 23, 2008
Time: 9:00 am - 11:45 am
Meeting room: Orange 1 Hall
Meeting place: Milano Convention Centre
Via Giovanni Gattamelata 5

Chairs: Gennaro D'Amico and Christian Gluud

9:00 am - 9:05 am	Welcome and presentation of the programme.	Christian Gluud
9:05 am - 9:15 am	The CHBG in its 12th year.	Dimitrinka Nikolova (DK)
9:15 am - 9:55 am	Early versus delayed laparoscopic cholecystectomy for acute cholecystitis. and Day-case versus overnight laparoscopic cholecystectomy. Two Cochrane Systematic Reviews.	<u>Kurinchi Selvan Gurusamy</u> , Kumarakrishnan Samraj and Kurinchi Selvan Gurusamy, Sameer Junnarkar, Marwan Farouk, and Brian Davidson (UK)
9:55 am - 10:15 am	Emergency sclerotherapy versus medical interventions for bleeding oesophageal varices in cirrhotic patients. An update of a Cochrane Systematic Review.	<u>Gennaro D'Amico</u> , Luigi Pagliaro, Giada Pietrosi, and Ilaria Tarantino (I)
10:15 am - 10:45 am	Glucocorticosteroids for alcoholic hepatitis. A Cochrane Systematic Review.	Andrea Rambaldi (I), Humberto Saconato (BR), Erik Christensen (DK), Kristian Thorlund (DK), Jørn Wetterslev (DK), and <u>Christian Gluud (DK)</u>
10:45 am - 11:05 am	Pentoxifylline for alcoholic hepatitis. A Cochrane Systematic Review.	<u>Kate Whitfield (DK)</u> , Andrea Rambaldi (I), and Christian Gluud (DK)
11:05 am - 11:25 am	Milk thistle for alcoholic, hepatitis B, and hepatitis C liver diseases. A Cochrane Systematic Review.	<u>Andrea Rambaldi (I)</u> , Bradly Jacobs (USA), and Christian Gluud (DK)
11:25 am - 11:45 am	Discussions and closing of the meeting.	The chairs

The CHBG meetings are run twice a year: during the annual EASL and AASLD meetings. They are open to everybody interested.
The Cochrane Hepato-Biliary Group (CHBG) is a non-profit organisation without industrial ties.

