



CHBG NEWSLETTER

Cochrane Hepato-Biliary Group

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THE COCHRANE HEPATO-BILIARY GROUP INTO ITS FOURTH YEAR

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Belated Happy New Year to all CHBG-members and Cochrane collaborators! In March 29 1999, the CHBG turns three years old. As for every three-year-old you see a dramatic progress since birth - but there is still plenty to learn.

The dramatic progress, focusing on the development during 1998, encompasses the following achievements:

- The CHBG now consists of more than 200 members spread all over the world.

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INVITATION TO PARTICIPATE

- Seventy-two titles for systematic reviews are registered within the CHBG.
- Eighteen of these titles have developed into protocols for systematic reviews, of which 15 protocols and 2 reviews are now published in the CHBG Module of the Cochrane Library.
- In the next 1999 Issue No 2 of the Cochrane Library, there will be published 4 new protocols and 1 systematic review.
- Further five to ten protocols are expected to be materialized into systematic reviews during the 1999.
- Torben Jørgensen has finished his Danish health technology assessment of interventions for bile stones - and this will materialize into a systematic review during 1999.
- Handsearching is progressing fast: out of the about 200 specialist journals that the CHBG has on its list of pertinent scientific journals, 24 journals are in the process of being hand-searched.
- The CHBG has been represented with posters, abstracts and special CHBG or Cochrane GI-meetings during the APASL meeting in February in Perth, the EASL meeting in April in Lisbon, the World Congress of Gastroenterology meeting in Vienna in September and during the IASL-AASLD meeting in November in Chicago. Further, Dimitrinka Nikolova represented the CHBG during the 6th Cochrane Colloquium in Baltimore.
- EASL has expressed their interest in the CHBG, which hopefully will materialize into presentation of the Group during the 2000 Rotterdam meeting and the 2001 Prague meeting.
- Ronald Koretz and Christian Gluud had negotiations with the Clinical Research Committee of the AASLD during the November 1998 Chicago meeting.
- LIVER and CHBG have signed a co-publication agreement.

- The initial steps towards a similar agreement between Journal of Hepatology and the CHBG have been taken.
- The CHBG ProCite database now blossoms with over 10,600 references, of which more than 5,000 are randomised or controlled clinical trials.
- Saboor A. Khan has finished his Ph.D.-study in Leeds and the results of his reviews are awaited in 1999.
- Lise Lotte Kjaergard's Ph.D.-study at the Editorial Team Office in Copenhagen is progressing well and the results of the first study were presented in Chicago.
- Lea Niemann has made the initial moves to start a Ph.D.-study at the Editorial Team office. The study is going to evaluate immune-modulators for primary biliary cirrhosis.
- Both an Italian and an American physician have expressed strong interests in doing Ph.D.-studies based on systematic reviews of interventions pertaining to hepato-biliary disorders.
- Close links to the International School of Hepatology and Tropical Medicine, Faculty of Medical Sciences, University of Groningen, Holland have been established.
- The CHBG has been marketed in publications appearing in Journal of Hepatology (one Editorial and one original), Liver (Editorial), Oxford Textbook of Clinical Hepatology, and will hopefully enter the columns of Hepatology in 1999.
- Two posters will be presented at the EASL meeting in April in Napoli this year.

During the autumn of 1998, Ms Anne Gethe Hee finished working as coordinator of the CHBG and is now employed within The Copenhagen Trial Unit. I will like, also here, to thank Anne for her devoted work during the difficult establishing phase of the CHBG.

What about the future?

The CHBG must, during 1999, expand further. Among other things to:

- Get more handsearchers.
- Get more researchers involved in preparation of systematic reviews.
- Turn more titles into protocols, and more protocols into systematic reviews.
- Secure further funding. The generous grant of 3 million DKK from the 1991 Pharmacy Foundation will be used fully during 1999 and without further support from external funds, the achievements obtained until now will run the risk of disintegration.

COMPUTING NEWS

The *Cochrane Reviewer's Handbook* is now available in Spanish, from the Spanish Cochrane Centre's Website:
<http://www.cspt.es/cochrane/ccdownld.htm>
 The Glossary and the Appendices are also available in Spanish.

Cochrane Library support materials

Guides and training materials for supporting use of the Cochrane Library (Clib) are available to download free of charge from the following web site -

<http://www.york.ac.uk/inst/crd/cochlib.htm>

These are updated for every new version of the Cochrane Library and include the self-teaching guide developed by Ian McKinnell and Jim Elliott in Cambridge. This has also been adapted for the internet version of the Clib. Also available from the same site are shorter guides and teaching materials to support those carrying out training sessions on the Clib.

The Cochrane Collaboration (CC)

Visiting this address you will be able to find information on the CC activities and products

<http://www.update-software.com/ccweb/default.html>

Training opportunities

The Collaboration web site has an international listing of training opportunities offered by Cochrane Centres and other groups involved with systematic reviews. At the moment the page has details of workshops offered in 1999 by the Australasian, Dutch, Nordic, San Antonio, South African, Spanish and UK Cochrane-Centres.

<http://som.flinders.edu.au/fusa/cochrane/cochrane/workshop.htm>

THE COCHRANE LIBRARY (Clib)

For information on how to subscribe to *The Cochrane Library* in your area see: <http://www.update-software.com/cochrane.htm>

or contact: Update Software, info@update.co.uk

NEWS FROM DENMARK

Members of The Danish Medical Association can access The Cochrane Library Online free of charge from the association's web site (DadlNet). Two buttons on the front page make a link to The Cochrane Library and MEDLINE.

In addition, health care professionals and students can get free access through a commercial site, Net-Doktor.dk.

HOW DOES THE COCHRANE LIBRARY DIFFER FROM MEDLINE?

Unlike MEDLINE, *The Cochrane Library* (Clib) includes:

- the full text, including graphs, of the original systematic reviews produced by the Cochrane Collaboration;
- reviews which are regularly updated as new information becomes available and in response to comments and criticisms;
- quality assessed information;
- critical appraisals of high-quality reviews published elsewhere; selections from important, but previously unpublished material, including conference proceedings and publications in languages other than English;
- Clib contains much larger number of RCTs, CCTs, M-As due to the constant feeding from the hand searchers.

PAST EVENTS

The CHBG had a meeting in November 9 1998 during the AASLD/IASL Joint Meeting in Chicago. There were approximately thirty people present and they were introduced to the achievements of the Group. Ronald Koretz gave an interesting talk on his personal experience of evidence-based medicine and why he found the Cochrane Collaboration pivotal for the further progress of medicine. The programme included presentations on the quality of reporting of RCTs published in *Liver, Journal of Hepatology*, and *Hepatology*, as well as presentations of the protocol for the systematic review on 'Branched chain amino acids for hepatic encephalopathy' and the results of the systematic review 'Ursodeoxycholic acid for primary biliary cirrhosis'.

THE COCHRANE HEPATO-BILIARY GROUP: NOTES FOR HANDSEARCHERS

This is a short guide intended to help individuals who handsearch a journal(s) for the CHBG, or those with the intention to become hand-searchers. You will find more detailed information in the Cochrane Hand Search Manual. <http://www.cochrane.dk/cochrane/hsmpt1.htm>

The Cochrane Hepato-Biliary Group (CHBG) register and code as below articles within the hepatobiliary diseases that report on:

- Randomised clinical trials (RCT)
- Quasi randomised clinical trials (CCT)
- Second opinion ought to be sought (SOS)
- Meta-analysis (M-A)
- Letters (LTTs) sent to the editor and answers containing the above, i.e. RCT/CCT/SOS/M-A.
- Letters discussing RCT/CCT/SOS/M-A, published elsewhere
- Editorials and reviews that contain information on RCT/CCT/M-A.
- Planned or ongoing RCTs/CCTs.
- RCT, CCT, SOS and M-A published as abstracts in Supplement issues or in the parent journal.
- Citable units, describing interventions where performance of RCTs and CCTs is very unlikely (e.g., liver transplantation, trials with participation of children);
- Reports on consensus conferences.

1. Citable units of interest should be those that:

- are conducted in humans,
- are prospective (the intervention and control groups are divided and studied at the same time),
N.B. Do not include studies in which there is only one treated group compared to "historical controls", i.e. the patients given the investigational drug are compared with similar patients treated with the control drug at a different time and place)
- investigate intervention efficacy by comparing
 - established versus new intervention,
 - or
 - placebo versus new intervention.
- the patients are randomly assigned and not deliberately selected to either of the intervention groups.

Include studies on healthy individuals only in case vaccines or other preventive interventions, like smear, screenings are tested.

2. Coding of the identified trials

Randomised clinical trial (RCT): Prospective trials including human beings where two or more intervention groups are compared. The authors should explicitly state that the individuals/groups, compared in the study, have been assigned to the intervention by random allocation (by use of some variant of the term 'random'). The generation of the allocation sequence could be determined using a table of random numbers, computer generated random numbers, flip of a coin, or similar. Crossover trials including trials employing Latin square design may also be RCTs.

Controlled clinical trial (CCT): Trials that fulfil the criteria above, but some form of 'quasi-randomisation' has been used. 'Quasi-RCTs' include trials that use ordered categories such as: days of the week, patient record number, etc. for assigning the interventions.

Second opinion sought (SOS): Clinical trials that may be classified as a RCT or CCT, but in which a second opinion is sought preferably after contact to the authors.

Meta-analysis (M-A): Whenever a citable unit describes an attempt to combine data statistically across studies involving humans being exposed to interventions in RCTs or CCTs, it has been included in this category.

3. What next?

- Use the inventory sheet to write down your findings. (You will receive the CHBG's inventory sheet upon registration for handsearching of a journal.)
- Start from the very first page perusing through every title and scanning the abstract and the rest of the body text until you come upon that of interest.
- For every identified study, write down the page numbers, e.g. (127-154), the second name of the first author, e.g. (Lock, B) and check off under the correct field. Under "Notes", write LTT for Correspondence or Editorials, or REV for Reviews or Editorials, or whether it is a report on a planned or ongoing study. If the study does not fall in the hepato-biliary field diseases, write ÷ CHBG (Cochrane Hepato-Biliary Group).
- When you reach the end of the journal, count the total number of the citable units. Abstracts published elsewhere, book advertisements etc. must not be counted. Write down the figure on the top left side of the page.
- Photocopy the articles that are of interest to the CHBG in full, but photocopy only the first page

of the articles that are not relevant to the group. Check whether the reference information is to be found on the hard copies and if not, write down the necessary.

Let us suppose you have handsearched a whole year, some, or all the years of the journal. What you have to do next, is to send to the Editorial Team Office of the CHBG in Copenhagen, **the results of your handsearch.**

This means that you have to **send the photocopies of the trials you have identified together with the inventory sheets** (you get this from the Editorial Team Office) **completed for each issue of the journal.**

The hard copies of all the articles will be filed with a ProCite number. Thus they will be merged with the database, containing also the Specialised Register of CHBG trials. The Specialised Register contains only RCT, CCT and SOS trials (including the ongoing and planned), and it is only these trials that we send for inclusion in The Cochrane Library. The remaining references are only to help reviewers with additional information. The CHBG takes on the responsibility of forwarding the handsearcher's search result to the staff at New England Cochrane Center at Providence office after the required quality check control is performed. The completion of the specified years will also be reported to the New England Cochrane Center at Providence, and the result will be entered on the Master list report*.

* This is a regularly updated list which gives the status of the progress made within handsearching of the specialist journals.

CALENDAR OF EVENTS

34th EASL Annual Meeting Naples 8-12 April, 1999

Congress Venue
Mostra d'Oltremare
Viale J.F. Kennedy
80125 Naples, Italy

For more information please visit: <http://www.easl-napoli99.com>

The Cochrane Hepato-Biliary Group (CHBG) Meeting in Naples

The CHBG is going to have a meeting on Sunday, 11 April 1999 from 3.30 p.m. to 6.30 p.m. in Naples, Italy during the 34th EASL Meeting.