



CHBG NEWSLETTER

Cochrane Hepato-Biliary Group

Volume 3, Issue 1

March 1999

THE COCHRANE HEPATO-BILIARY GROUP INTO ITS FOURTH YEAR

Christian Gluud

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 handsearched.
- 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/ccdownload.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 handsearchers.

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 '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 handsearchers. You will find more detailed information in the Cochrane Hand Search Manual.
<http://www.cochrane.dk/cochrane/hsmt1.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.

The meeting room is CRECIA ROOM on the second floor of the Teatro Mediterraneo, inside the Mostra d'Oltremare.

The chairs of the Meeting will be Luigi Pagliaro and Christian Gluud.

The draft programme is enclosed as well as an invitation to participate form. Please distribute to other people if you think they might be interested.

VII Cochrane Colloquium

The best evidence for health care:
the role of the Cochrane Collaboration
October 5 to 9, 1999 Rome, Italy
Università S. Tommaso D'Aquino
Largo Angelicum, 1 - Roma (Italy)

Under the high Patronage of The President of the Italian Republic

Objectives of the Colloquium

To introduce the Cochrane Collaboration, its achievements and its plans to all those interested in using the best available evidence for the planning and delivery of health care.

- To provide an opportunity for those producing systematic reviews to meet and make progress in their work.
- To discuss potential alliances among consumers, policy makers, administrators, clinical researchers and industry in the health care arena.
- To create a forum for discussion of barriers to the production of evidence relevant to patient care and to its implementation.

Target Audience

- Members of the Cochrane Collaboration and potential contributors who have an interest in learning more about the Collaboration's activities.
- Health care providers and consumers interested in the application of reviews to health policies, as well as patient care.
- Potential partner organisations and institutions.
- Health care providers and consumers interested in the application of reviews to health policies, as well as patient care.

For more information please visit:

<http://www.areas.it/roma99>

AASLD Meeting 1999:

It will take place in November 5-9, Wyndham Anatole Hotel, Dallas, TX; New City and Venue!
The CHBG will have a three-hour meeting during the AASLD meeting.

For further information, contact the AASLD at:
AASLD

1729 King Street, Suite 100

Alexandria, VA 22314-2720

Email: AASLD@asld.org

Fax: 703-299-9622

ABOUT THE NEW VERSION OF THE COCHRANE COLLABORATION'S REVIEW MANAGER SOFTWARE (REVMAN 4.0)

In a few months time, a new version of the computer program for creating Cochrane Reviews will be released. This is the next step in the development of the Review Manager software and it will be called RevMan 4.0. It will look somewhat different to the software that existing users have become accustomed to over the last few years and we hope that this is not too off putting. However, the changes are necessary if RevMan is to catch up with the requirements of reviewers and the users of our reviews, which have arisen in the 2½ years since its last major release in 1996. This report outlines why and how the software has been revised and highlights some of the new features. Fuller information will be available in the RevMan 4.0 User Guide, but if anyone has any questions now, we will do our best to answer them - please contact either Mike Clarke (convenor of the RevMan Advisory Group, email: mike.clarke@ctsu.ox.ac.uk) or Monica Fischer (convenor of the Software Development Group, email: m.fischer@cochrane.dk).

Background

One of the decisions taken by the Cochrane Collaboration at its first Colloquium at Oxford in October 1993 was to agree on the standard structure for a Cochrane Review. This would ensure consistency across all reviews and make it easier for the users of these reviews to move between them. To help with this, and to allow all Cochrane reviewers to use common statistical methods, computer software was prepared and made available as RevMan 1.03 for DOS. This was in July 1993. Later that year the RevMan Advisory Group was formed to provide input from reviewers to the development of future versions and its first meeting took place in January 1994. Why does RevMan need to be updated? Since then, the Collaboration has expanded considerably, the needs of reviewers and users of reviews have evolved and computer technology has moved ahead even faster. RevMan has had to keep pace and versions 2 and 3 became available in November 1995 and October 1996 re-

spectively. Interim versions have been released subsequently but it was recognized that a period of stability was desirable and so no major changes were made for a couple of years. This allowed time for the requirements of RevMan 4.0 to be clearly identified, considered and acted upon. In addition, during this time, responsibility for preparing RevMan was transferred from Update Software to the Nordic Cochrane Centre.

How were the requirements for RevMan 4.0 determined and implemented? Following wide consultation within the Collaboration and discussions with others from outside, a list of possible changes was compiled into the "wish list". Each of these was assigned a priority by the RevMan Advisory Group and a group of computer experts met to decide which could, and could not, be implemented in the new software. This allowed a prototype to be prepared and the Advisory Group discussed this in March last year. In "computer-speak", this was revised into an "alpha" version which many people had a look at during the Baltimore Colloquium. Further changes were made and it is now a "beta" version, which is being tested in March and April. If you would like to help with this testing, please contact Monica Fischer as soon as possible. If all goes as planned, the "live" version of RevMan 4.0 will be made available to Cochrane reviewers from 15 July 1999. The software will be distributed to reviewers through their Collaborative Review Groups and further details on the relevant procedures will be available nearer the time. After mid-July, all reviews submitted for the Cochrane Database of Systematic Reviews will need to be prepared in the new format. (RevMan 4.0 will, of course, come with a facility, which will convert reviews, prepared using earlier versions of the software.)

What are the changes?

In order for RevMan 4.0 to perform many of the functions now required of it, the software has had to be prepared as "32-bit" program. Because of this, it will only work on computers, which runs Windows 95, 98 or NT. It will not work with other systems such as Windows 3.11 (a "16-bit" system), but these systems are becoming increasingly uncommon as we move towards the millennium. In terms of what the software does, those familiar with RevMan will notice at once that the new screens are quite different to those in earlier versions. This has been done to make RevMan 4.0 look, and work, more like other software that many reviewers are probably using now and are increasingly likely to use in the near future. In this way, we hope that it will be easier for both existing and new reviewers to make the best possible use of the new functions in RevMan and,

thereby, to further improve the quality and accessibility of Cochrane Reviews.

Some of the important changes are outlined below:

- ◆ The main window displays reviews in a tree structure. Any section of any of the reviews can then be opened by moving around this tree structure.
- ◆ This Tree has become the backbone of RevMan 4.0. It is not only used to access the various detail screens (such as Characteristics of included studies) but also to make changes in the review. For example, the comparison table can now be restructured (without losing the data entered) and studies - along with their associated details - can be moved easily from Awaiting assessment to Included studies.
- ◆ New sections have been added to reviews; including What's new? A synopsis and a section to describe the contributions of each reviewer.
- ◆ References are entered and stored in a structured format.
- ◆ The reviewer can specify the statistical method and graphical settings they want the reader to see first when they look at their review on The Cochrane Library.
- ◆ A spell checker, a word counter, the ability to detect differences between two reviews, and an improved help system have been added.
- ◆ The reviewer can move and change the size of most windows, and keep several windows open at the same time.

What of the future?

As with RevMan 3.0, the release of RevMan 4.0 will be followed by a period of stability, with no major new releases planned for at least three years. If a problem is identified with the software before then, it will be rectified as quickly as possible. Likewise, if new functions become available, these will be made available to those reviewers who need them. In the longer term, the wish list for RevMan 5.0 is already open and we would encourage anyone with ideas for further developments to send them in through the RevMan wish-list form on the Cochrane Collaborations Internet pages.

Mike Clarke (convenor of RevMan Advisory Group 1998-),

Andy Oxman (convenor of RevMan Advisory Group 1994-1998),

Monica Fischer (convenor of Software Development Group 1994-)

WHAT IS NEW IN THE COCHRANE LIBRARY 1999 ISSUE 2

NEW REVIEWS

- ◆ Neoadjuvant and adjuvant therapy for operable hepatocellular carcinoma, Chan ES-Y, Chow PK-H, Tai B-C, Machin D, Soo K-C

NEW PROTOCOLS

- ◆ Antibiotic prophylaxis for bacterial infections in cirrhotic patients with ascites, Bernard B, Grangé JD, Nguyen Khac E, Regimbeau C, Amiot X, Opolon P, Poynard T
- ◆ Cholecystectomy for gallbladder dyskinesia, Toouli J, Craig AG
- ◆ Glucocorticosteroids for alcoholic hepatitis, Saconato H, Di Sena V, Gluud C, Christensen E, Atallah A
- ◆ Sphincterotomy for biliary sphincter of Oddi dysfunction, Toouli J, Craig AG

NEW TITLES REGISTERED WITHIN THE CHBG

We are very glad that the titles below have been registered with the CHBG within the past few months. Now we look forward to receiving developed protocols. Do not forget that reviewers should submit protocols to the Editorial Team Office within six months after registration of the title.

- 1 . Chinese medical herbs for hepatitis B surface antigen carriers, A/Prof Jianping Liu, P.R. China
- 2 . Qigong for hepatitis B, A/Prof Jianping Liu, P.R. China.
- 3 . Plaster for hepatitis B, A/Prof Jianping Liu, P.R. China.
- 4 . Acupuncture for hepatitis B, A/Prof Jianping Liu, P.R. China.
- 5 . Organic nitrates for portal hypertension, Dr Tian-shu Liu, P.R.China.
- 6 . Ribavirin and ribavirin plus interferon for hepatitis C virus infection, Dr L.L. Kaergard, Denmark.
- 7 . Cyclosporin versus tacrolimus (FK506) for liver transplanted patients, Dr Vincent di Martino, France.
- 8 . Liver transplantation versus resection for hepatocellular carcinoma, Dr Lily YN Chan, USA.

JOURNALS AND HANDSEARCHERS RE- CENTLY REGISTERED WITHIN THE CHBG

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- Chinese Journal of Clinical Hepatology (1985-1998): Jiangping Liu, Yafei Li, P.R.China
- Chinese Journal of Infectious Diseases (1983-1998): Jiangping Liu, P.R.China
- Chinese Journal of Integrated Traditional and Western Medicine on Liver Diseases (1991-1998): Jianping Liu, P.R.China
- Gut (1960- 1979) Monika Kjaer, Denmark
- Scandinavian Journal of Gastroenterology (1966-68) Sheila Grenbom, Denmark
- Scandinavian Journal of Gastroenterology (1968-1998) Supplement, Sheila Grenbom, Denmark

TO THE REVIEWERS

If you have any questions concerning RevMan or you would like to discuss something, then you can subscribe to the Revman discussion list by sending an email to:

majordomo@cochrane.co.uk

and in the body of the message put:

subscribe revman <your-email-address>

(eg: **subscribe revman fred@abc.edu**)

That's all. Don't fill in the subject or add a signature. Send it.

For more information on the Cochrane discussion list follow the below link:

http://som.flinders.edu.au/fusa/cochrane/cochrane/oz_cc.htm or

send an email with your questions to Nader Salasshahri (IT advisor at the CHBG), at: nader.s@ipm.hosp.dk

This newsletter has been prepared by the CHBG Editorial Team Office, Copenhagen Trial Unit, Institute of Preventive Medicine, H:S Kommunehospital DK-1399 Copenhagen K. Tel: +45 3338 3742, Fax +45 3332 4410, E-mail: CHBG@ipm.hosp.dk

Researchers, wishing to assist the Cochrane Hepato-Biliary Group in doing handsearches and systematic reviews, are invited to contact: The Editorial Team Office, The Copenhagen Trial Unit, Institute of Preventive Medicine, Copenhagen University Hospital, DK-1399 Copenhagen, Denmark, Tel: +45 3338 3742, or +45 33383743; Fax +45 3332 4410; Email CHBG@ipm.hosp.dk, or obtain more information on the Cochrane Collaboration and the CHBG by visiting the following Internet home pages: <http://www.cochrane.co.uk>; <http://hiru.mcmaster.ca/cochrane> and <http://inet.uni2.dk/~ctucph/chbg>.

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(eg: subscribe revman fred@abc.edu)
That's all. Don't fill in the subject or add a signature. Send it.

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http://som.flinders.edu.au/fusa/cochrane/cochrane/oz_cc.htm

or

send an email with your questions to Nader Salasshahri (IT advisor at the CHBG), at:

nader.s@ipm.hosp.dk

This newsletter has been prepared by the CHBG Editorial Team Office, Copenhagen Trial Unit, Institute of Preventive Medicine, H:S Kommunehospital DK-1399 Copenhagen K. Tel: +45 3338 3743, Fax +45 3332 4410, E-mail: CHBG@ipm.hosp.dk

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