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NEW REVIEWS

193. Methods to decrease blood loss during liver resection: a network meta-analysis. Moggia E, Rouse B, Simillis C, Li T, Vaughan J, Davidson BR, Gurusamy KS.

194. Hepatitis B immunoglobulin during pregnancy for prevention of mother-to-child transmission of hepatitis B virus. Eke AC, Eleje GU, Eke UA, Xia Y, Liu J.

UPDATED REVIEWS

77. Probiotics for people with hepatic encephalopathy. Dalal R, McGee RG, Riordan SM, Webster AC.

NEW OR MAJOR UPDATED PROTOCOLS

341. Clevudine in people with chronic hepatitis B virus infection. Ricaforte-Campos JD, Benjamin CLM, Nikolova D, Gluud C.

342. Contrast-enhanced ultrasound compared with computed tomography, magnetic resonance imaging, and positron emission tomography for diagnosing liver metastases in people with newly diagnosed colorectal cancer. Lund M, Bjerre T, Abramovitz, Grønbaek H, Mortensen F, Kragh Andersen P.

343. Fish oil-based lipid emulsions versus standard lipid emulsions for prevention of parenteral nutrition-associated liver disease in children. Gana JC, Castet A,

Villarroel del Pino LA, Cifuentes Li, Torres-Robles R, Alberti G.

344. L-ornithine L-aspartate for people with cirrhosis and hepatic encephalopathy. Shao W, Song J.

345. Emtricitabine for adults with lamivudine-resistant chronic hepatitis B virus infection. Mok S, Mohan S, Hunter KM, Wang YR, Judge TA.

346. Serological tests for primary biliary cholangitis. Aralica M, Giljaca V, Poropat G, Hauser G, Štimac D.

347. Total serum bile acids or serum bile acid profile, or both, for the diagnosis of intrahepatic cholestasis of pregnancy. Manzotti C, Casazza G, Stimac T, Nikolova D, Glud C.

NEW REGISTERED TITLES

511. Essential phospholipids for non-alcoholic fatty liver disease. Varganova D, Pavlov CS.

512. Deep neuromuscular blockade in adults undergoing an abdominal laparoscopic procedure. Brintjes M, Warle MC, Gurusamy KS, van Laarhoven CJHM.

PAST EVENTS

COCHRANE COLLOQUIUM. 23 TO 27 OCTOBER 2016, SEOUL, SOUTH KOREA

The Cochrane Colloquium in Seoul attracted 813 participants from 49 countries. Videos from the four plenary sessions, including the Annual Cochrane Lecture, as well as the full 2016 Annual General Meeting, are now available on Cochrane's YouTube channel

<https://www.youtube.com/user/CochraneCollab/featured>.

THE 37TH BI-ANNUAL CHBG MEETING (AFFILIATED LIVER® MEETING EVENT) AND EXHIBITION DURING THE LIVER® MEETING. 11 TO 15 NOVEMBER 2016, BOSTON, USA

We thank all presenters, the chair, and the people who attended The CHBG meeting as well as those who visited The CHBG exhibition stand. We fail in increasing our meeting attendance as the

times we are offered by AASLD for our meeting coincide with large industry symposia.

FUTURE EVENTS

BASIC RESIDENTIAL COURSE. 4 TO 8 APRIL 2017, GARGNANO, GARDA LAKE, ITALY

The course programme is published on the CHBG website <hbg.cochrane.org>.

CHBG BI-ANNUAL MEETING AND EXHIBITION STAND DURING THE INTERNATIONAL LIVER® CONGRESS™ 20 TO 22 APRIL 2017, AMSTERDAM, THE NETHERLANDS

This year, the CHBG will not run a bi-annual meeting in Amsterdam because of unsuitable days and times offered for the meeting. Friday 21, CHBG representatives will meet with the EASL Governing Board to discuss possibilities for educational joint CHBG/EASL meetings. At these meetings, we plan presentations on methodology of systematic reviews and presentation of most recent or new CHBG reviews.

The CHBG stand is number 203. We will be happy to see you.

SYSTEMATIC REVIEWS AND META-ANALYSES OF DIAGNOSTIC TEST ACCURACY. 4 TO 6 SEPTEMBER 2017, BIRMINGHAM, UK

This three-day course is organised jointly by faculty from the University of Birmingham and the University of Amsterdam. The course is designed for individuals undertaking health technology assessment, health service researchers, and healthcare professionals interested in understanding key issues in the design and conduct of systematic reviews and meta-analyses of diagnostic test accuracy (DTA) studies. The course will be delivered through a mixture of interactive presentations, discussions and hands-on computer exercises.

For more information on this course as well as other training courses, visit

[http://training.cochrane.org/search/site?f\[0\]=bundle%3Aworkshop&f\[1\]=bm_field_archived%3Afalse](http://training.cochrane.org/search/site?f[0]=bundle%3Aworkshop&f[1]=bm_field_archived%3Afalse)

PRESENTATION OF TRIAL SEQUENTIAL ANALYSIS INFORMATION ON FIGURES IN CHBG SYSTEMATIC REVIEWS

The following is guidance for drawing and presentation of Trial Sequential Analysis figures included in systematic reviews.

The table below will guide authors of systematic reviews on how to display lines, and what colour, thickness and type of line should they use when drawing a Trial Sequential Analysis figure, using the Trial Sequential Analysis software <http://www.ctu.dk/tsa/>.

Please ensure that you always work with 0.9.5.5 Beta, the most current software version.

Trial Sequential Analysis (TSA)	Colour	Type of lines	Line thickness
Conventional boundaries	green	dotted	1 (smallest width)
Trial sequential monitoring boundaries for benefit or harm, or futility	red	dotted	2 (width)
Z-curve	blue	full	1.5 (width)
	black	filled square	6

The label above the figure shall have the following order and contain the following information:

DARIS = Pc 30%; RRR 20%; alpha 2.5%; beta 10 %; diversity 60%

Abbreviations:

DARIS: diversity-adjusted required information size;
Pc: control group proportion observed in the trials;
RRR = a relative risk reduction.

The alpha in a Trial Sequential Analysis will depend on the number of the primary and secondary outcomes defined in your protocol. Therefore, alpha could be different for the primary and secondary outcomes. Based on Jakobsen 2014*, alpha is reached by dividing 0.05 with the sum of (the number of outcomes in the 'family' (n) plus 1) divided by 2; i.e.,

Number of outcomes	Alpha (in %)
1 outcome	5.00%
2 outcomes	3.30%
3 outcomes	2.50%
4 outcomes	2.00%
5 outcomes	1.60%
6 outcomes	1.40%
7 outcomes	1.25%
8 outcomes	1.10%

*Jakobsen J, Wetterslev J, Winkel P, Lange T, Gluud C. Thresholds for statistical and clinical significance

in systematic reviews with meta-analytic methods. BMC Medical Research Methodology 2014;14:120.

RECENT PUBLICATIONS RELATED TO THE USE OF TRIAL SEQUENTIAL ANALYSIS

Wetterslev J, Jakobsen JC, Gluud C. Trial Sequential Analysis in systematic reviews with meta-analysis. BMC Med Res Methodol. 2017;17(1):39. doi: 10.1186/s12874-017-0315-7.

VISITORS

Goran Bjelakovic, Serbia, CHBG editor and author, visited the CHBG Editorial Team office from January 25 until February 14, 2017. Goran and colleagues worked on the “Vitamin D supplementation for chronic liver diseases in adults” review which is now undergoing peer review evaluation.

Jian Ping Liu, PR of China, CHBG editor and author, visited the CHBG Editorial Team office 10 of February 2017. A discussion point was reviews on

Chinese medicinal herbs.

A Chinese Ph.D. student is expected to work for a year on several of these reviews from September 2017.

LATEST NEWS AND EVENTS

For latest news and events, we advise you to visit the Cochrane website <www.cochrane.org>. For example, you may read about “Cochrane's 'logo review' gets an update”, or “The Cochrane Library - iPad edition”, or “Early bird registration and stipends now open for the Global Evidence Summit”.

Early bird registration
and stipends now open
for the Global Evidence
Summit

8 March 2017



The Cochrane Hepato-Biliary Group (The CHBG) Newsletter is written, edited, and published in electronic and paper format by Dimitrinka Nikolova and Christian Gluud at The CHBG Editorial Office in Copenhagen, Denmark.

It is issued twice a year and it is also distributed for free world-wide to all people on The CHBG member list who have contributed, are contributing, or have shown interest in the work of The CHBG or in this CHBG Newsletter.

The purpose with The CHBG Newsletter is to inform readers about activities of The CHBG.

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