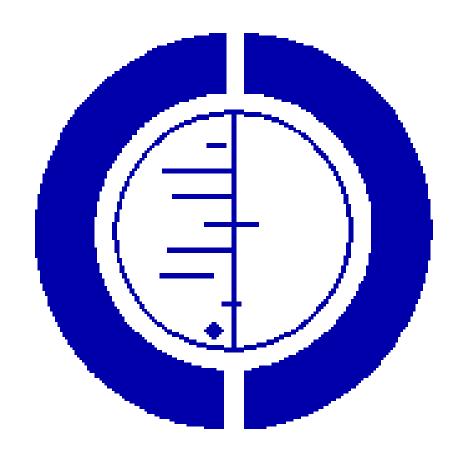
# CANADIAN COCHRANE NETWORK AND CENTRE



1997 ANNUAL REPORT

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### The Canadian Cochrane Report for 1997

It is our great pleasure to present the 1997 Canadian Cochrane Report on behalf of the Canadian Cochrane Network and Centre. The Cochrane Collaboration (CC) is an international organization that aims to help people make well informed decisions about healthcare by preparing, maintaining and promoting the accessibility of systematic reviews of the effects of healthcare interventions.

Canada's contribution to the CC is coordinated by the Canadian Cochrane Centre at McMaster University. The work of the CC in Canada is carried out by the Canadian Cochrane Network, with sites at all Canadian universities with medical schools, and representatives from consumers, various health professional organizations, health technology assessment groups, and government. We acknowledge with gratitude the interest and financial support of the Canadian Deputy Ministers of Health and the Medical Research Council of Canada.

The Canadian Cochrane Network has been very active this year with workshops across the land, the move into Canada of the Health Promotion Field (under the leadership of Dr. Alba DiCenso at McMaster University), and the participation of many Canadians in the CC as reviewers, methodologists, hand searchers, "field hands" and Steering Group members. Special thanks are due this year to Jean Jones and Beverly Shea who have served so well on the Steering Group, a challenging and demanding task.

The CC has continued its frenetic growth in 1997. The rate of development of new reviews continues apace, with a doubling of the number of reviews every 10 months. The Cochrane Library (CL) "came of age" in 1997 as an invaluable resource, with 276 completed reviews in the Cochrane Database of Systematic Reviews (CDSR) in Issue 4 for 1997 and 283 protocols for reviews in gestation. The Database of Abstracts for Reviews of Evidence (DARE) now contains abstracts for 1842 systematic reviews that have been published outside the Cochrane aegis, and the Cochrane Controlled Trials Register now has 150,744 entries. The CL also contains an extensive bibliography on the methodology of systematic reviews and a complete manual for preparing reviews. If you are not already a subscriber to the CL, please check it out - we're sure that you will agree that it lives up to its aim to be the best single source of reliable evidence about the effects of health care.

Despite the progress in creating reviews, it will take many years to complete the database. Iain Chalmers and Peter Gotzsche have undertaken the task of extending coverage to all health care problems that are not currently under review. Still, as the number of completed reviews increases, there will be a gradual shift in emphasis towards dissemination of the findings of reviews. We've already begun this task in Canada, with initiatives in Hamilton and other network sites.

Anyone who is interested in becoming involved in either the review or dissemination work of the CC is invited to contact us at cochrane@fhs.mcmaster.ca or at any of the Network sites identified in this report. We look forward to hearing from you!

Brian Haynes MD, Ph.D. Director

Alejandro Jadad MD, DPhil Co-director

#### **Centre Staff**

Director Co-Director

Network Coordinator Administrators

Communications/Research Assistant

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Ms. Shari Beal and Ms. Ritz Kakuma

Mr. Tom Oliver

#### **Network Site Representatives**

Dalhousie University
McGill University
McMaster University

Memorial University of Newfoundland

Queens University Université de Laval Université de Montréal University of Alberta

University of British Columbia

University of Calgary
University of Manitoba
University of Ottawa
University of Saskatchewan
University of Sherbrooke
University of Toronto

University of Western Ontario

Dr. Robin Whyte Dr. Michael Kramer Dr. R. Brian Haynes Dr. John Fardy Dr. Kristan Aronson

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Dr. Paul Peloso
Dr. Jean-Pierre Tetrault
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Dr. Jack W.D. McDonald

#### **Affiliates**

Canadian Association of Occupational Therapists Canadian Coordinating Office for Health Technology

Assessment

Canadian Institute for Health Information

Canadian Nurses' Association

Canadian Physiotherapy Association

Consumers

Fond de Recherché en Santé du Québec

Health Services Utilization and Research Commission

**Technology Assessment Groups** 

The Canadian Association of Speech-Language

Pathologists and Audiologists

Ms. Nancy Pollock Ms. Pat Stuckless

Mr. Serge Taillon Ms. Sarah Hayward Ms. Dianne Parker-Taillon

Ms. Jean Jones Dr. Pierre Boyle Mr. Steven Lewis Dr. Arminée Kazanjian Dr. G. Keith Christopher

# Leaders/Coordinators for Review Groups, Fields and Methods Working Groups

Back Review Group for Spinal Disorders

Esmail

Inflammatory Bowel Disease Review Group

Musculoskeletal Review Group

**Neonatal Group** 

Health Promotion Field

RCT Quality Assessment Methods Working Group

Dr. Claire Bombardier/ Ms. Rosmin

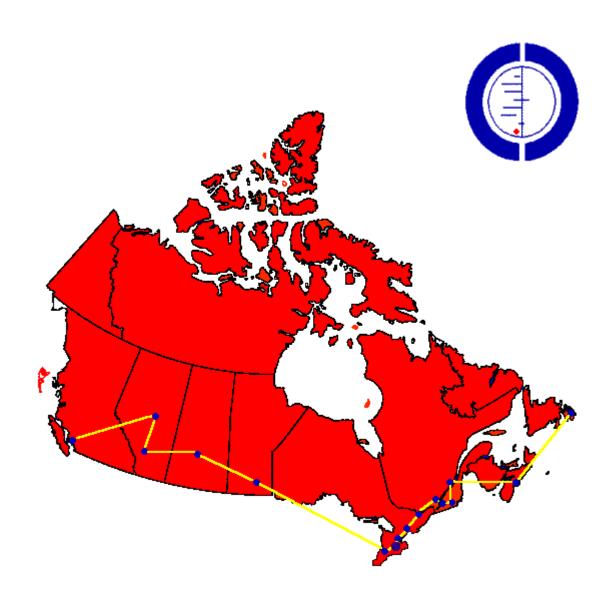
Dr. Jack McDonald / Ms. Lorinda Simms

Dr. Peter Tugwell / Ms. Bev Shea

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Dr. David Moher

# The Canadian Cochrane Network and Centre



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# Overview and Structure of the Canadian Cochrane Network and Centre

#### **Canadian Cochrane Network**

Composed of representatives from the 16 Canadian universities supporting an academic health sciences centre **GOALS:** 

- To identify & support Canadians within each network site region who wish to participate in the Collaboration
- To promote local & regional appreciation, dissemination, and application of systematic reviews of health care interventions

#### **Canadian Cochrane Centre**

Established in 1993 at the Health Information Research Unit at McMaster University **GOALS:** 

- To recruit & support training of Canadian reviewers
- To support development of new Canadian-based review groups and fields to assist Canadian audiences to access and utilize the information contained in Cochrane Reviews
- To develop dissemination models, strategic plans, and evaluating protocols to further Canadian contributions

#### **Canadian Cochrane Affiliates**

Composed of representatives from various health care professional associations and consumer groups

#### **GOALS:**

- To advise the Canadian Cochrane Network & Centre
- To identify & support Canadian members within each constituency who wish to become involved in the Collaboration
- To promote appreciation, dissemination, and application of appropriate systematic reviews of health care interventions within their constituency

#### **Funders:**

Conference of Deputy Ministers of Health Medical Research Council of Canada

## Strategic Plan

At the Annual General Meeting in November 1997, centre staff and network site representatives developed a strategic plan to identify specific goals and objectives of the Canadian Cochrane Network and Centre for 1998. The goals and objectives developed from this meeting were in the areas of recruitment, training and education, evaluation and impact, dissemination, funding, and succession.

#### RECRUITMENT

To increase the number of Canadians participating in the Cochrane Collaboration

- Pursue opportunities to incorporate the Cochrane Collaboration in the curriculum of undergraduate and graduate health programs.
- Engage in annual meetings of professional societies to profile the Cochrane Collaboration, and highlight avenues of participation.
- Develop a standard follow up protocol for participants of recruitment activities, as well as electronic inquiries.
- Create a Canadian directory of experts available for Cochrane recruitment workshops.

#### TRAINING AND EDUCATION

To determine training and education approaches for diverse populations

- Identify target populations.
- Develop training and education packages and standardize methods of teaching for each identified population.
- Evaluate the target groups to assess their satisfaction with training and education approaches.

Fully utilize available training and education resources in the best possible manner.

- Identify resources required for effective training/education.
- Establish funding responsibilities and priorities.

#### **EVALUATION AND IMPACT**

To evaluate the effectiveness and the impact of Cochrane activities within Canada

- Conduct standardized evaluations of workshop/training activities and communicate the results yearly.
- Develop an inventory of Cochrane products and people, and document their growth over time.
- Review the health policy literature for citation of Cochrane products and evidence of impact upon practice.
- ♦ Establish linkages, determine priorities, and promote evidence based medicine within provincial governments, OTAs, disease foundations, support groups etc.
- Survey students in academic health sciences programs on use and knowledge of Cochrane products.
- Examine major changes in practice for evidence of effect.
- Develop Canadian laboratory to monitor changes in practice patterns (e.g., MCHPE).

#### **DISSEMINATION**

Establish effective dissemination strategies to promote the Cochrane Collaboration

- ♦ Identify Cochrane products that are appropriate for specific audiences e.g. Cochrane Library for health professionals, synopses for consumers.
- Identify target audiences to approach and establish links if possible.
- ◆ Target specific activities to facilitate dissemination e.g. Develop structured abstracts, maintain mailing lists, etc.

#### **FUNDING**

To explore further avenues of funding to expand the role of Cochrane activities within Canada

- Investigate use of Deputy Minister's Funds as matching funds.
- ◆ Explore potential for CFI funding (i.e., research capacity of CCN/C).
- Revisit PMAC commitment to funding Network.
- Rationalize deliverables of infrastructure funding by highlighting successful models currently in operation.
- ◆ Develop research thread in CCN/C.
- Assemble funding team to construct applications.
- Include related Canadian entities in applications.

#### SUCCESSION PLANNING

To ensure appropriate representation of all components of the Canadian Cochrane Network and Centre

- Develop policy to ensure appropriate succession of representatives from network sites, professional associations, and consumers.
- Disseminate policy to appropriate individuals.

# **Policy Development**

The strategic plan will serve as a foundation for the development of an action plan as well as a template for the implementation of policy. Succession planning has already been drafted into policy, and is as follows:

**Executive Committee -** Policy is currently in place.

<u>Network Site Representation</u>- To meet eligibility requirements, an applicant must be an active reviewer and a staff or faculty member of an academic health sciences program (including Chiropractice, Dentistry, Medicine, Methodology / Statistics, Nursing, Occupational Therapy, Pharmacy, Physiotherapy, Psychology, Social Work, Speech and Language Therapy).

It is anticipated the succession planning of Network Site representatives would take 6 months.

Month 1: CCC is notified of a representative's intention to step down, and a replacement call is posted.

Month 2: Nominations for eligible applicants are submitted to CCC.

Month 3: If there are nominations an election will be held. All Canadian Cochranites associated with the

Network site will be eligible to vote. If there are no nominations, efforts will be made to appoint an

appropriate representative.

Month 4/5: A transition period will occur where the incumbent will meet with the existing representative and

CCC members if appropriate.

Month 6: The new representative will be in place.

<u>Professional Association Representation</u> - The CCC and the professional association being represented are notified of the representative's decision to step down. The professional association identifies an alternative representative and informs the CCC. The CCC will make contact with the new representative.

<u>Consumer Representation</u> - The CCC is notified of the representative's decision to step down. The Consumers Association of Canada identifies an alternative representative and informs the CCC. The CCC will make contact with the new representative.

# Reports from the Canadian Cochrane Network Sites

DALHOUSIE UNIVERSITY	
DISSEMINATION	◆ The dialogue continues with deans, department heads, and CEOs. Some improvement in reception of the Cochrane has been detected, including Dean of Health Professions.
RECRUITMENT	<ul> <li>Recruitment activities through review groups are being pursued.</li> <li>Robin Whyte is reviewing with a co-reviewer (in the USA) for Neonatal Review Group.</li> <li>The recruitment and identification of reviewers / Cochrane community will continue in 1998.</li> </ul>
TRAINING	<ul> <li>A Cochrane informed environment is being created through undergraduate education.</li> <li>All year 2 undergraduates problem solve by using a Cochrane format. Each student (total up to 300) is required to solve a problem and outline an exam question on systematic review.</li> <li>The library has supplied the Cochrane Library specifically to train the next cohort of students.</li> </ul>
OTHER	♦ Robin Whyte has identified a librarian who is specifically interested in conducting searches for Cochrane reviewers. A network of regional Cochrane librarians continues to be advocated.

	McGILL UNIVERSITY
DISSEMINATION	<ul> <li>◆ The Cochrane Library is available on several stations in the libraries.</li> <li>◆ The Cochrane Library (CDSR at present) will soon be accessible through OVID.</li> </ul>
RECRUITMENT	<ul> <li>Students are encouraged to participate in the Cochrane Collaboration, and some have indicated interest in becoming potential reviewers.</li> </ul>
TRAINING	<ul> <li>The four Quebec sites continue to collaborate on a potential bilingual workshop.</li> <li>Seminars were conducted for faculty, summer programmes, and epidemiology students.</li> </ul>
OTHER	<ul> <li>Funding opportunities with the Education Ministry, as well as others, continue to be actively explored.</li> </ul>

	McMASTER UNIVERSITY	
DISSEMINATION	<ul> <li>An introductory workshop introducing the Cochrane Collaboration was attended by close to 100 participants.</li> <li>The CCC has partnered with the Health Information Research Unit, two Cochrane groups, the San Francisco Cochrane Centre, and other groups to form an Evidence-Based Practice Centre, with funding from the US Agency for Health Care Policy and Research.</li> </ul>	
TRAINING	<ul> <li>An advanced workshop session was conducted to a capacity crowd on a variety of advance topics.</li> </ul>	
OTHER	<ul> <li>The CCC has been active in methodologic research related to systematic reviews, with funding from the MRC and the UK.</li> <li>Many thanks to Melissa Brouwers and Judi Padunsky who resigned this year from the CCC.</li> <li>New Staff at the CCC includes Tom Oliver as Communication Specialist/Research Assistant, and Ritz Kakuma and Shari Beal as administrators.</li> </ul>	

MEMORIAL UNIVERSITY OF NEWFOUNDLAND	
DISSEMINATION	<ul> <li>Copies of the Cochrane Library are available on networked computer stations on the ward, and residents have been active in accessing the resource.</li> <li>Plans continue to introduce the Cochrane Collaboration into the curriculum of undergraduate and graduate programs.</li> </ul>
OTHER	<ul> <li>Plans for the new year include increased Cochrane activities in recruitment, training, and dissemination.</li> </ul>

QUEEN'S UNIVERSITY	
DISSEMINATION	<ul> <li>Focus is on bringing a greater awareness of the Cochrane Collaboration and the Cochrane Library to faculty and students. A letter of introduction sent to the Dean of the Faculty of Medicine received a very enthusiastic response.</li> <li>Advertisement of the Cochrane Library to key faculty members was initiated.</li> <li>Poster sessions were held in the libraries to further advertise the Cochrane Library.</li> </ul>
TRAINING	<ul> <li>A half day workshop was held highlighting the Cochrane Collaboration, the Cochrane Library, and Cochrane reviews. Information on becoming a reviewer was also provided.</li> <li>Taught critical appraisal to medical students including Cochrane principles and products, a Cochrane presentation was made to epidemiology graduate students, and the Cochrane Library was used in teaching activities with the Family Medicine residents.</li> <li>A national 2 day workshop of research methodology for residents was conducted with promotion of the Cochrane Collaboration, meta-analyses, and systematic reviews.</li> <li>An introduction to the CC and the CL was given to Dept of Neurosurgery, medical residents from all disciplines and staff, and residents in obstetrics &amp; gynaecology from across Canada.</li> <li>Evidence-based family medicine and the Cochrane Library discussed at the 2<sup>nd</sup> Annual Conference of Medicine and at grand rounds for Family Medicine.</li> </ul>
OTHER	<ul> <li>Phil Hahn will fill in for Kristan Aronson as the Network Site Representative while she is away.</li> <li>Cochrane review by Tanveer Towheed, Dept of Medicine (1<sup>st</sup> Reviewer at Queen's)</li> <li>Plans continue to install the Cochrane Library in the health science and hospital libraries.</li> </ul>

UNIVERSITÉ DE LAVAL	
RECRUITMENT	Two students were successfully recruited and went on to become reviewers for the Pregnancy & Childbirth Group.
TRAINING	<ul> <li>Organized a 1-day workshop on meta-analysis with cross-disciplinary participation. A very influential social preventive medicine statistician was one of the presenters.</li> <li>Distributed a questionnaire to the university community evaluating interest in becoming reviewers and in training options. As a result two courses will be offered:         <ul> <li>Masters - EBM: a series of 2-hour reviews on evidence based practice</li> <li>Advanced course on meta-analysis (in collaboration with the other universities)</li> </ul> </li> </ul>
OTHER	<ul> <li>Université de Laval was approved for funding for clinical trials unit; the network site will operate under that umbrella.</li> <li>Dr. Lucille Turcot is new on the team with expertise in clinical epidemiology. She is a resource person for the community for learning RevMan, clinical reviews, etc</li> <li>Laval was able to act as a distributor for the Cochrane Library in 1996, but was unable to continue the service.</li> </ul>

UNIVERSITÉ DE MONTRÉAL	
DISSEMINATION	<ul> <li>A crash course on Cochrane was offered together with McGill University, Université de Sherbrooke, and the Conseil d'Evaluation des Technologies de la Santé du Québec.</li> <li>Two seminars on systematic reviews, evidence-based medicine, and Cochrane Collaboration were offered in the public health sector.</li> <li>Two international presentations were made: One crash course on clinical epidemiology at the Université de Lausanne (Switzerland), and one special lecture at Charles University in Prague (The Czech Republic). Participants were introduced to the domain, relevance, and basic methodology of systematic reviews, and to the Cochrane Collaboration.</li> </ul>
TRAINING	<ul> <li>In graduate education, every student who chooses meta-analysis is required to conduct a systematic review.</li> <li>Systematic reviews as a domain of research at the MSc level are now well accepted. Resulting research papers appear more and more in reputable journals.</li> </ul>
OTHER	♦ A fond farewell to Milos Jenicek who will be leaving the university on Dec 31, 1997. A new network site representative is currently being sought.

UNIVERSITÉ DE SHERBROOKE	
DISSEMINATION	<ul> <li>Integrated the Cochrane Library with the ARIANE system in patients' rooms in one of the four hospitals. The ARIANE is a treatments and diagnoses guidelines hospital information system, and the Cochrane Library is utilized as an evidence service.</li> <li>Plans continue to train doctors and nurses on these systems.</li> </ul>
TRAINING	♦ A one day Cochrane Collaboration workshop was conducted by Gina Bravo.
OTHER	◆ Jean-Pierre Tetrault will fill in for Gina Bravo as the Network Site Representative while she is on sabbatical.

UNIVERSITY OF ALBERTA	
DISSEMINATION	<ul> <li>Promoting greater awareness of CCN/C to the University of Alberta and regional organizations producing guidelines.</li> <li>Guideline producers were approached about the CCN/C. There was a mixed response, but progress was made.</li> <li>University of Alberta libraries have been helpful in supporting and promoting the Cochrane Library.</li> </ul>
RECRUITMENT	Held an introductory Cochrane workshop for family physicians.
TRAINING	◆ Plans continue for a joint advanced workshop between the Alberta, Calgary, and Saskatchewan sites.
OTHER	<ul> <li>Welcome to the recent influx of Cochranites from Ontario: Brian Rowe (Airways), Sarah Hayward (Canadian Nursing Association), and Rob Hayward (Infoward).</li> <li>Alberta medical libraries are heavily involved in guidelines.</li> <li>Health Information system now includes the Cochrane library.</li> </ul>

UNIVERSITY OF BRITISH COLUMBIA	
DISSEMINATION	<ul> <li>BC Official Health Technology Assessment (BCOHTA) librarians are active in presenting seminars on the Cochrane Library.</li> <li>The Cochrane Library is available at the Children's Hospital library, but not yet at the main campus.</li> <li>The BCOHTA uses Cochrane reviews where available in Health Technology Assessment reports, which are circulated and considered by health policy officials in the province.</li> </ul>
TRAINING	◆ BCOHTA hosted a workshop on evidence based decision making and systematic reviews for 50 participants. Trevor Sheldon(NHS Centre for reviews and Dissemination, University of York, UK) and Martin Schechter(National Director, Canadian HIV Trials Network, University of BC) were keynote presenters.
OTHER	◆ Dr. John Cairns commenced his term as Dean of Medicine at UBC in October 1996, and is very familiar with the Cochrane Collaboration.

UNIVERSITY OF CALGARY	
DISSEMINATION	<ul> <li>Implemented a program of regular mail-outs to clinical department heads with relevant summaries of recent updates and additions to the Cochrane Library.</li> <li>Teaching efforts in the Faculty of Medicine continue, including further development of the EBP course for medical undergraduates and graduates, planning for a critical appraisal, EBP course for residents and for a continuing education course for practising physicians.</li> <li>Additionally, Lloyd Sutherland has been actively publicizing the Collaboration's contributions on the circuit of rounds and seminars.</li> <li>The Calgary and Edmonton centres continue to organize a workshop which will cover advanced issues in review construction.</li> </ul>
OTHER	<ul> <li>◆ The Calgary group contributes to the travel costs of investigators attending organizational meetings for review groups.</li> <li>◆ Lloyd Sutherland continues as an active reviewer and co-editor of the IBD review group.</li> </ul>

UNIVERSITY OF MANITOBA			
DISSEMINATION	<ul> <li>The local Cochrane interest group of approximately 40 individuals met three times, focusing on training and dissemination.</li> <li>A Cochrane presentation generated interest within the Department of Medical Rehabilitation.</li> <li>An article on the CC was written for the Manitoba Division of the Heart and Stoke Foundation. This has generated a lot of interest and led to several additional invitations to speak on the CC.</li> <li>The Health Sciences Library was assisted in renewing the Cochrane Library as a network service, enabling access from all sites around the health sciences campus. One of the librarians was also giving regular workshops on how to search the Cochrane Library.</li> <li>The Otitis Media Group continues in review production.</li> </ul>		
RECRUITMENT	<ul> <li>Plans continue to introduce the Cochrane Library to a very large obstetrical private office in Winnipeg. Difficulties have arisen over the lack of appropriate computer software in the office.</li> </ul>		
TRAINING	<ul> <li>A successful one-day workshop on the process of a Cochrane style systematic review was held with visiting speaker Dr. Michael Kramer from Montreal.</li> <li>The Cochrane Library was introduced as a reference source to first year medical students in the revised problem-oriented curriculum which started in the fall of 1997.</li> <li>A course on clinical trials and meta-analysis was offered once more in the winter term.</li> </ul>		

UNIVERSITY OF OTTAWA			
DISSEMINATION	<ul> <li>A newsletter was distributed quarterly to 900 individuals in Canada and worldwide.</li> <li>150 nurses received information packages on the CC.</li> <li>The Cochrane Library is available on network at the Ottawa General Hospital, and there is also a copy in the Clinical Epidemiology Unit at the hospital.</li> </ul>		
RECRUITMENT	Recruitment activities have been concentrated on targeting consumers.		
TRAINING	<ul> <li>Three reviewers spent a minimum of 2 days each with one-on-one Revman training.</li> <li>A workshop was held where approximately 30 participants attended a meeting on the CC and the Cochrane Library.</li> <li>Demonstration of the Cochrane Library was held at the Ottawa General Hospital Medical Grand Rounds.</li> <li>The CC was presented at the Canadian Nursing Research Conference.</li> <li>A presentation on the international aspects of the CC was held at the Center for International Health and Development.</li> <li>The CC was presented at a physiotherapy teleconference at which 22 sites across Canada were on line.</li> </ul>		
OTHER	<ul> <li>With the assistance of the CCC, over 499 handsearched references were keyworded, entered into a Reference Manager database and sent to CENTRAL.</li> </ul>		

UNIVERSITY OF SASKATCHEWAN			
DISSEMINATION	◆ This site has been interacting with the Health Services Utilization Research Centre (HSURC) to highlight Cochrane and evidence-based health care in the province through meetings and newsletters.		
RECRUITMENT	<ul> <li>Two new staff were recruited: One in internal medicine and the other is teaching at the post graduate level.</li> <li>Three people are interested in meta-analyses and may become reviewers: one in community health, one in internal medicine, and one in dentistry.</li> </ul>		
TRAINING	<ul> <li>There are bi-weekly EBM rounds in which students participate and Cochrane is highlighted.</li> <li>In both graduate and undergraduate programs, approximately 6 lectures have been held highlighting meta analysis and the Cochrane Collaboration.</li> <li>The internal medicine residents were very enthusiastic about the Cochrane Library, leading to the installment of the library on the computers on the wards.</li> </ul>		
OTHER	<ul> <li>◆ College of Medicine funded a Cochrane review on neck pain.</li> <li>◆ A review was conducted by Paul Peloso and a student which is currently in the process of being converted into the Cochrane Library format.</li> <li>◆ A soft tissue review is currently being completed with Bev Shea and the Musculoskeletal Review Group.</li> </ul>		

UNIVERSITY OF TORONTO			
DISSEMINATION	<ul> <li>A newsletter was published electronically and distributed to the Clinical Epidemiology and Health Research Program at the University of Toronto (UofT). CC Information and the CCN/C annual report have been distributed to the Dean, Faculty of Medicine and to department heads.</li> <li>Toronto Site reviewers were actively producing reviews, and some participated in and presented at the Amsterdam Cochrane Colloquium.</li> <li>Providing information on the CC and systematic reviews to the Shared Program in Neonatology has resulted in many new Cochrane reviewers, reviews, presentations, and publications.</li> <li>Presentation / lectures on systematic reviews have been presented world-wide.</li> <li>The Fetus and Newborn Committee of the Canadian Paediatric Society has incorporated systematic review techniques in its statements and practice guidelines.</li> <li>The CL is now available at UofT Medical Library, Hospital for Sick Children, Institute for Work &amp; Health, Dept. of Surgery Mount Sinai Hospital, and Delivery Suite Women's College Hospital.</li> </ul>		
RECRUITMENT	<ul> <li>Recruited reviewers for the Airways group, Obstetrics group, Nursing group etc</li> <li>2 students are doing meta analyses.</li> <li>International students have become reviewers with publications in the Cochrane Library.</li> <li>New reviewers have been recruited through the provision of consultation to Cochrane reviewers and to health care workers performing systematic reviews outside of the CC.</li> </ul>		
TRAINING	<ul> <li>Ran 2 Cochrane workshops: introduction and advanced. Both workshops were well attended and received very positive evaluations by the participants.</li> <li>Students in the Epidemiology program completed internships performing systematic reviews.</li> </ul>		
OTHER	<ul> <li>Hand searching of the paediatric literature is now complete up to the spring of 1997.</li> <li>Reviewers in Toronto are collaborating with reviewers in Australia, New Zealand, Northern Ireland, US and Canada (Calgary, London, Halifax).</li> <li>Two business meetings for reviewers at the Toronto site were held in 1997 with a wide variety of review group representation.</li> </ul>		

UNIVERSITY OF WESTERN ONTARIO			
DISSEMINATION	<ul> <li>Presented the CC to clinical department chairs, offering to make departmental presentations.         Presented at Grand Rounds in the Departments of Medicine, Emergency Medicine and Clinical Neurological Sciences. A seminar was presented to faculty and graduate students in the Epidemiology &amp; Biostatistics Department on Dec 12, 1997.</li> <li>The Cochrane Library is available in the UWO Science Library. It will soon be accessible to all students and faculty via modem. Use of the CL is actively encouraged by librarians.</li> <li>The Cochrane Library has become available in several hospital libraries.</li> </ul>		
RECRUITMENT	◆ Recruitment of reviewers continues for the Musculoskeletal, Inflammatory Bowel Disease, Diabetes, Cancer, and Seizure Disorders groups.		
TRAINING	<ul> <li>A lecture was presented (to the whole first year class during their cardiovascular block) on the need for systematic reviews and evidence-based medicine. This included a Cochrane Library demonstration and a comparison with conventional review articles and textbook chapters.</li> <li>Plans continue for a city-wide academic half day for residents in all programmes. This time will be devoted to evidence-based medicine and presentation of the need for systematic reviews. A demonstration of the Cochrane Library will occupy one hour in this four hour session.</li> </ul>		
OTHER	<ul> <li>◆ Lorinda Simms joined the staff this year.</li> <li>◆ It has been agreed in principle to add functional intestinal disorders to the scope of the IBD group.</li> <li>◆ 1300 articles were retrieved via hand searching this year. About 1000 have been transferred to Baltimore. UWO received a grant from Ortho-Janssen to hire a library science student to search abstracts of the American Gastroenterological Association annual meetings.</li> </ul>		

### Reports from the Canadian Cochrane Affiliates, Groups and Fields

#### CANADIAN ASSOCIATION OF OCCUPATIONAL THERAPISTS

- Primary target was to increase occupational therapists' awareness of the Cochrane Collaboration.
- Brought information on Cochrane to a few venues, such as:
  - A national newsletter.
  - A theme issue of the Canadian Journal of OT on evidence-based practice.
  - ♦ A teleconference for telemedicine on EBM in November 1997.
- ♦ The group received a grant from the Canadian OT Foundation which, in part, focuses on systematic reviews. It has linked with CCN/C in this project.
- ♦ In the future, the group will target more directly at 12 university programs to increase the awareness of:
  - Cochrane Collaboration.
  - Review groups which may have relevance to occupational therapists.
  - ♦ Location of Cochrane Library.
  - Site activities and contact people.

#### **CANADIAN NURSES' ASSOCIATION**

- The Canadian Nurses' Association (CNA) is committed to promoting and supporting evidence-based nursing practice and health policy. It is currently re-focusing its activities to concentrate on nursing policy and regulatory support, health policy, and research and information. There are a number of CNA initiatives that share goals with the Cochrane Collaboration, but are currently running in parallel without clear linkages to the Canadian Network. The CNA is interested in exploring mutually beneficial connections.
- The CNA has more emphasis on 'practice' than on research but practice is based on appropriate evidence.
- ♦ Each of the CNA sites should be aware of CCN/C, that there is a site in their local areas, and that there are overviews that need to be done in nursing. Graduate nursing students should be targeted and systematic reviews should be taught use systematic reviews as a thesis topic etc.
- ◆ The CNA's Dissemination Project is an initiative which has the aim of establishing a web-based system providing access to a number of databases and services that will allow nurses to retrieve evidence to support policy and practice decisions. It is hoped that the model can be used eventually to capture various types of data and ultimately to produce and store a variety of evidence. The CNA is working with CIHI in reviewing the Canadian Classification of Interventions to ensure that the classification system is broad enough to capture nursing interventions.
- ♦ The CNA is very supportive of the mission and activity of the CCN/C. The Association would like to see improved linkages with nursing and other health professions. A number of strategies to achieve this goal were raised at the annual general meeting and in group discussions. The suggestions were as follows:
  - Identify and establish links with key contact persons in each health professional faculty or school.
  - ♦ Increase awareness of the CC including presentations to faculty members, undergraduate and graduate students in Nursing and other health professional schools.
  - Consider ways to improve collaboration and support for Nursing schools interested in developing systematic reviews as an option for graduate theses.
  - Consider ways to improve the identification of reviews in CDSR relevant to nursing interventions.
  - ♦ The Network actively identify potential nursing reviewers and provide initial support, through methods workshops, mentoring and linkage with relevant review groups.
  - ♦ Through the Network, promote connections between reviewers in various health professions, in order to advance discussions among reviewers who share issues of methodology and practice.
  - ◆ The CCN/C and its members become increasingly sensitive to the language used to describe the activities of the Cochrane Collaboration, in particular to definitions of "medical" practice and practitioners.
- ◆ The CNA looks forward to increasing participation in and benefits from the endeavours of the CCN/C.

#### **CONSUMERS**

- ♦ Consumer involvement in the Collaboration is increasing. Four consumers attended the Oslo Colloquium (1995), whereas there were more than thirty at the Amsterdam Colloquium (1997). Worldwide, more than 150 consumers are members of the Cochrane Collaboration Consumer Network but only 10 are from Canada.
- One of the criteria for approval of a new entity for registration in the Collaboration is identification of a plan for consumer participation in its work.
- Consumers are interested and receptive to information from the Collaboration.
- CCN/C materials was displayed at the AGM of the Consumers Association of Canada in mid-November in Ottawa to provide information about the Collaboration.

#### **BACK REVIEW GROUP FOR SPINAL DISORDERS**

- ♦ 1 completed review and 11 protocols appeared in the October 1997 issue of the Cochrane Library.
- ♦ 7 protocols are in progress.
- May 1997 there was a publication in the journal SPINE by Bombardier et al. on the Back Review Group for Spinal Disorders.
- October 1997 there was a publication in the journal SPINE by van Tulder et al. on methodologic guidelines for conducting systematic reviews on low back pain.
- ♦ November 1997 the Back Review Group for Spinal Disorders Web Page was launched.

#### INFLAMMATORY BOWEL DISEASE REVEIW GROUP

- ◆ 4 complete reviews have been added to the Cochrane Library.
- ♦ It is anticipated that 12 reviews may be completed in the next year.
- ♦ The review group is currently undergoing restructuring partly because of a lack of progress on some titles and protocols. At the annual group meeting in May 1997, it was agreed that titles and protocols be dropped if, in six months, there was no evidence of work proceeding.
- New group members will be added as necessary, particularly if individuals approach the group with topics for which they wish to take responsibility.
- One criterion to join is that all members must contribute to some aspect of the hand searching effort.

#### MUSCULOSKELETAL REVIEW GROUP

- ♦ In version 4 of the 1997 Cochrane Library, there were 15 new reviews and 41 new protocols by the Musculoskeletal Review Group.
- In addition 12 reviews and 3 protocols have been submitted to the January 1998 edition of the Cochrane Library.
- ♦ There are eight consumers working within the Canadian Musculoskeletal Review Group. A set of roles and responsibilities has been established for these members. Presently this group is working on developing consumer summaries for the published reviews, with the intention of submitting these to the Canadian Arthritis Society for publication to their web page.

#### **NEONATAL REVIEW GROUP**

- ♦ In version 4 of the 1997 Cochrane Library, there were 27 completed reviews (Canada, U.S., Australia, UK) and 31 protocols.
- ♦ There were also 114 assigned titles.
- ♦ A Cochrane related publication was completed Sinclair JC, Bracken MB, Horbar JD, Soll RF. Introduction to neonatal systematic reviews. Pediatrics 1997;100(5):892-895.
- ♦ In the same issue of Pediatrics, another published report of a neonatal systematic review was by: Bhuta and Henderson-Smart. Elective high frequency oscillatory ventilation vs conventional ventilation in preterm infants with acute pulmonary dysfunction.
- The Neonatal Review Group web page is being developed and will include the catalogue of neonatal systematic review titles. This listing will provide up-to-date information on which titles have been assigned and ones that are available for review.

#### **HEALTH PROMOTION FIELD**

- Coordination of the Cochrane Health Promotion Field has been a joint effort involving several people in the UK and Canada. Administration of the field was done by the UK group at the University of London in 1995-1996, and was moved to McMaster University, Canada in 1997. Funding has been provided by the Hamilton-Wentworth Department of Public Health Services Teaching Health Unit through Larry Chambers, Marilyn James, and Jane Underwood. In June 1997, an initial meeting to form an international advisory board for the field was held at McMaster University.
- ♦ At a meeting at the Cochrane Colloquium in Amsterdam in October 1997, it was agreed to expand the scope of the field beyond the initial focus on young people to all age groups and to include the public health. The Field is currently preparing a submission to the Cochrane steering committee for these changes.
- Ongoing activities of the Cochrane Health Promotion Field:
  - Coding reviews in the Cochrane Library to make them accessible to health promotion and public health workers.
  - Identifying relevant overviews to be contributed to the Cochrane Library.
  - Organizing hand searching of health promotion and public health journals. Studies identified will be contributed
    to the Cochrane trials registry and/or to the health promotion specialized databases in the UK.
  - ♦ Communication between researchers facilitated internationally by production of newsletters and development of a field contact database.

#### RCT QUALITY ASSESSMENT METHODS WORKING GROUP

- Many Canadian Cochranites are involved in the CONSORT project which attempts to improve the quality of reporting RCTs. Consort has been widely disseminated and is adopted in about 70 biomedical journals thus far. It is translated into French, German, Spanish, and Japanese and is available on several web sites.
- They published a paper "Improving the quality of reporting of randomized controlled trials: The CONSORT Statement" in JAMA, 1996. From this project emerged the QUOROM project which attempts to improve the quality of reporting meta-analyses.
- This year the RCT quality assessment group has merged with statistics methodology group after receiving Cochrane Steering Committee approval.

# Canadian Contribution to the Cochrane Library - Reviews and Protocols

#### **AIRWAYS**

#### Reviews:

- ♦ Jones AP, **Rowe BH**. 1997. Bronchopulmonary hygiene physical therapy in chronic obstructive pulmonary disease and bronchiectasis.
- ♦ Plotnick LH, **Ducharme FM.** 1997. Efficacy and safety of combined inhaled anticholinergics and beta-2-agonists in the initial management of acute pediatric asthma.
- ◆ Rowe BH, Spooner CH, Ducharme FM, Bretzlaff JA, Bota GW. 1997. The effectiveness of corticosteroids in the treatment of acute exacerbation's of asthma: a meta-analysis of their effect on relapse following acute assessment.

#### **Protocols:**

- ◆ Rowe B, Bretzlaff J, Bota G, Bourdon C . 1997. Asthmatic exacerbation's and magnesium sulphate.
- Rowe B, Bretzlaff J. 1996. Prevention of exacerbations of asthma with early use of glucocorticoid therapy.
- ♦ Rowe B, Spooner C, Ducharme F. 1996. Oral steroids in the initial management of acute asthmatic exacerbations: prevention of hospital admissions.
- Spooner C. 1996. Nedocromil sodium in the prevention of exercise induced bronchoconstriction in asthma.

#### **ACUTE RESPIRATORY INFECTIONS**

#### **Reviews:**

♦ Becker, L., Glazier, R., McIsaac, W., Smucny, J. 1997. Antibiotics for acute bronchitis.

#### **Protocols:**

◆ Klassen TP, Johnson D, Kellner J, Moher D. 1997. Glucocorticoids for the treatment of croup.

#### **BACK (FOR SPINAL DISORDERS)**

#### **Protocols:**

- ◆ Tulder MW van, Esmail R, Bombardier C, Koes BW. 1997. The effectiveness of back schools in the treatment of low back pain.
- ◆ Tulder MW van, Malmivaara A, Esmail R, Koes BW. 1997. The effectiveness of exercise therapy for low back pain: a systematic review and meta-analysis.

#### **EFFECTIVE PROFESSIONAL PRACTICE**

#### **Reviews:**

- Haynes RB, McKibbon KA, Kanani R, Brouwers MC, Oliver T. 1997. Interventions to assist patients to follow prescriptions for medications.
- ◆ Thomson MA, Oxman AD, Davis DA, Haynes RB, Freemantle N, Harvey EL. Harada T, Hughes E. 1997. Outreach visits to improve health professional practice and health care outcomes.
- ♦ Thomson MA, Oxman AD, Haynes RB, Davis DA, Freemantle N, Harvey EL. 1997. Local opinion leaders to improve health professional practice and health care outcomes.

#### **Protocols:**

◆ Thomson MA, Freemantle N, Wolf F, Davis DA, Oxman AD. 1997. Educational meetings, workshops

- and preceptorships to improve the practice of health professionals and health care outcomes.
- ◆ Thomson MA, Oxman AD, Haynes RB, Davis DA, Freemantle N, Harvey EL. 1996. Audit and feedback to improve health care professional practice and health care outcomes (Part I)
- ◆ Thomson MA, Oxman AD, Haynes RB, Davis DA, Freemantle N, Harvey EL. 1996. Audit and feedback to improve health care professional practice and health care outcomes (Part II)

#### **INFLAMMATORY BOWEL DISEASE**

#### **Reviews:**

- ◆ Pearson DC, May GR, Fick G, Sutherland LR. 1997. Azathioprine for maintenance of remission of Crohn's disease.
- ♦ Sandborn W, **Sutherland L**, Pearson D, May G, Schoenfeld P, Modigliani R, Prantera C. 1997. Azathioprine or 6-mercaptopurine therapy For induction of remission In active Crohn's disease: a systematic review.
- Sutherland L, Roth D, Beck P, May G, Makiyama K . 1997. Systematic review of the use of oral 5-aminosalicylic acid in the induction of remission in ulcerative colitis.
- Sutherland L, Roth D, Beck P, May G, Makiyama K. 1997. Systematic review of the use of oral 5-aminosalicylic acid for maintenance of remission in ulcerative colitis.

#### Protocols:

- ♦ Griffiths AM, Koretz RL, Sutherland L. 1997. Crohn's disease: nutritional therapy for induction of remission.
- ♦ Watson A, Robinson A, Lashner B, **Irvine E**, Katchatourian M. 1997. Cancer surveillance in inflammatory bowel disease: a systematic review .
- ◆ Brynskov J, Feagan BG, Jewell D, McDonald JWD, Stange EF. 1996. Crohn's disease: cyclosporine for maintenance of remission.
- ◆ Fardy J, Cortot AJA, MacIntosh D, Fedorak R. 1996. Crohn's disease: antibiotics for induction of remission.
- ◆ Fardy JM, Cortot AJA, Fedorak R, MacIntosh D. 1996. Crohn's disease: antibiotics for maintenance of remission.
- Feagan BG, Modigliani R, Prantera C, Steinhart HA, Thomson ABR, Rask-Madsen J. 1996. Crohn's disease: 5 aminosalicylate therapy for maintenance of remission.
- McDonald JWD, Feagan BG, Jewell D, Brynskov J, Stange EF. 1996. Crohn's disease: cyclosporine induction of remission.
- ◆ Modigliani R, Steinhart AH, Ewe K, Thomsen O, Thomson A. 1996. Crohn's disease: budesonide for induction of remission.
- ♦ Sandborn WJ, **McLeod R**, Jewell D. 1996. Ulcerative colitis: medical therapy for induction of remission in active pouchitis.
- ◆ Steinhart AH, Simms L, Ewe K, Modigliani R, Thomsen OO, Thomson ABR, Feagan BG. 1996. Crohn's disease: budesonide for maintenance of remission.
- ♦ **Steinhart AH**, Hawked CJ, Modigliani R. 1996. Ulcerative colitis: 6-mercaptopurine and Azathioprine for maintenance of remission.
- ◆ Thomsen OO, Ewe K, **Steinhart AH**, Robinson A, **Irvine EJ**. 1996 Ulcerative colitis: topical corticosteroid therapy for induction of remission in distal UC.
- ♦ Steinhart AH, Ewe K, Griffiths AM, Modigliani R, Thomsen OO. 1995. Crohn's disease: corticosteroids for maintenance of remission.

#### **MUSCULOSKELETAL**

#### **Reviews:**

- ♦ Towheed T, **Shea B, Wells G**, Hochberg M. 1997. Osteoarthritis: a systematic review of randomized controlled trials of analgesia and anti-inflammatory therapy in osteoarthritis (OA) of the hip.
- ◆ Clark P, Tugwell P, Bennet K, Bombardier C, Shea B, Wells G, Suarez-Almazor ME. 1997. Rheumatoid arthritis (RA): a meta-analysis of injectable gold in rheumatoid arthritis.

#### **Protocols:**

- ♦ Bonaiuti D, **Shea B**, Lovine R, Negrini S, **Wells G, Cranney A**, Gillespie W, **Hanley D**, **Tugwell P**. 1997. Exercise therapy in preventing bone loss in postmenopausal women.
- ♦ Gamez-Nava JI, Suarez-Almazor M, Gonzalez-Lopez L, Ortiz Z. 1997. Use of Eythropoietin for the anemia treatment of rheumatoid arthritis.
- ◆ Gonzalez-Lopez L, Suarez-Almazor ME, Gamez-Nava JI, Ortiz, Z. 1997. Antimicrobial therapy for rheumatoid arthritis
- ♦ Gross AR, Aker PD, Goldsmith CH, Peloso P. 1997. Conservative management of mechanical neck disorders. Part four: patient education.
- ♦ Gross AR, Aker PD, Goldsmith CH, Peloso P. 1997. Conservative management of mechanical neck disorders. Part two: physical medicine modalities.
- ◆ Papadimitropoulos E, Shea B, Wells G, Tugwell P, Gillespie W, Josse R, Coyte P, Greenwood C. 1997. Osteoporosis (OP): The effects of vitamin D with or without calcium on bone loss in postmenopausal women.
- ◆ Peloso P, Gross AR, Aker P, Goldsmith CH. 1997. Conservative management of mechanical neck disorders. Part three: drug therapies.
- ♦ Aker PD, Gross AR, Goldsmith CH, Peloso P. 1996. Conservative management of mechanical neck disorders. Part one: manual therapy
- ◆ Tugwell P, Wells G, Shea B, Peterson J, Cranney A, Henry D, O'Connell D, Robertson J, Gillespie B. 1996. Hormone replacement therapy for osteoporosis.
- ♦ Ortiz Z, Shea B, Suarez Almazor M, Moher D, Wells G, Tugwell P. 1996. The efficacy of folic acid and folinic acid reducing methotrexate side effects in rheumatoid arthritis.
- ♦ Homik J, Cranney A, Shea B, Adachi R, Tugwell P, Suarez -Almazor M. 1996. The efficacy of various interventions for the prevention of steroid induced osteoporosis
- Pope J, Clements P, Silman A. 1996. Treatment of Raynaud's phenomenon in patients with scleroderma.
- ◆ Buchbinder R, Glazier R, Green S. 1995. The efficacy of all interventions for shoulder pain.
- ◆ Cranney A, Shea B, Wells G, Reginster JY, Adachi R, Tugwell P. 1995. Calcitonin treatment of postmenopausal osteoporosis.
- ♦ Shea B, Tugwell P, Wells, G, Cranney A, Adachi R, Treleavin D, Henry D, Moher D, Peterson J. 1995. The effects of calcium treatment on bone loss in postmenopausal women.
- ◆ Suarez M, Homik J, Wells G, Kvien T, Shea B. 1995. Use of second line drugs for the treatment of early rheumatoid arthritis.

#### **MUSCULOSKELETAL INJURIES**

#### Reviews:

- ♦ Gillespie LD, Gillespie WJ, Cumming R, Lamb SE, Rowe BH. 1997. Interventions to reduce the incidence of falling in the elderly.
- ◆ Quinn K, Parker P, de Bie R, Rowe B, Handoll H. 1997. The prevention of ankle ligament injuries.

#### **Protocols:**

◆ Parker P, Armour K, Craig M, de Bie R, Guly H, Hill P, Quinn K, Ross J, Rowe B. 1996. The treatment of acute and chronic injury to the lateral ligament complex of the ankle.

#### **NEONATAL**

#### Reviews:

- ♦ Howlett A, Ohlsson A. 1997. Inositol in preterm infants with RDS.
- ◆ Taddio A, Ohlsson A. 1997. Lidocaine-prilocaine cream (EMLA) to reduce pain in male neonates undergoing circumcision.

#### **Protocols:**

- ♦ Ohlsson A, Lacy JB. 1997. The administration of intravenous immunoglobulins to prevent bacterial infection in preterm infants.
- ♦ Vickers A, Ohlsson A, Lacy JB, Horsley A. 1997. Massage therapy for premature and/or low birth-weight infants to improve weight gain and/or to decrease hospital length of stay.

- ♦ Whyte RK, Bifano EM. 1997. Allogeneic erythrocyte transfusion of the critically ill newborn infant.
- ♦ Whyte RK, Bifano EM. 1997. Source, storage and handling of erythrocytes for transfusion to infants.

#### **ORAL HEALTH**

#### Protocols:

• Matthews D. 1995. Guided tissue regeneration in periodontal treatment.

#### PREGNANCY AND CHILDBIRTH

#### Reviews:

- ◆ Hodnett ED, Roberts I. 1997. Home-based social support for socially disadvantaged mothers.
- ♦ **Kramer MS**. 1997. Balanced protein/energy supplementation in pregnancy.
- Smaill F. 1997. Antibiotic vs no treatment for asymptomatic bacteriuria in pregnancy.
- ♦ Hannah ME, Tan BP. 1996. Oxytocin for prelabour rupture of membranes at or near term.
- ♦ Hannah ME, Tan BP. 1996. Prostaglandins for prelabour rupture of membranes at or near term.
- ♦ Hannah ME, Tan BP. 1996. Prostaglandins versus oxytocin for prelabour rupture of membranes at or near term.
- ◆ Hannah ME, Tan BP. 1996. Prostaglandins vs oxytocin for prelabour rupture of membranes at term.
- ♦ Hodnett ED. 1996. Continuity of caregivers during pregnancy and childbirth.
- ♦ Hodnett ED. 1996. Alternative versus conventional delivery settings.
- ★ Kramer MS. 1996. Isocaloric balanced protein supplementation in pregnancy.
- ◆ Kramer MS. 1996. Maternal antigen avoidance during lactation for infants with atopic eczema.
- Kramer MS. 1996. Maternal antigen avoidance in pregnancy in women at high risk for atopic offspring.
- ◆ Kramer MS. 1996. Nutritional advice in pregnancy.
- ◆ Kramer MS. 1996. Regular aerobic exercise during pregnancy.
- Kramer MS. 1996. Energy/protein restriction in pregnant women with high weight-for-height or weight gain.
- ◆ Enkin MW, Wilkinson C, Rowe BH, Spooner CH, Ducharme FM, Bretzlaff JA, Bota GW.1995. Uterine exteriorization vs intraperitoneal repair at Caesarean section.
- ♦ Enkin MW, Wilkinson C. 1995. Peritoneal non-closure at Caesarean section.
- ◆ Enkin MW, Wilkinson C.1995. Single versus two layer closure of uterine incision at Caesarean section.
- Enkin MW. Wilkinson C.1995. Lateral tilt during Caesarean section.
- ◆ Fraser WD, Krauss I, Brisson-Carrol G, Thornton J, Breart G. 1995. Amniotomy to shorten spontaneous labour.
- ◆ Enkin MW, Wilkinson C. 1994. Absorbable staples for uterine incision at Caesarean section.
- Hodnett ED. 1994. Support from caregivers during at-risk pregnancy.
- ♦ Hodnett ED. 1994. Support from caregivers during childbirth.
- Smaill F. 1994 Intrapartum antibiotics for Group B streptococcal colonisation.

#### **Protocols:**

- ♦ Brocklehurst P, **Hannah M**, McDonald H. 1997. The management of bacterial vaginosis in pregnancy.
- Ray KL, Hodnett ED. 1997. Support from caregivers for mothers with postpartum depression.

#### **SCHIZOPHRENIA**

#### **Reviews:**

• Mari JJ, Streiner D. 1996. Family intervention for schizophrenia.

#### Protocols:

◆ Thornley B, Adams CE, Awad G. 1996. Chlorpromazine versus placebo for schizophrenia.

#### **SUBFERTILITY**

#### Reviews:

- ♦ **Hughes E, Collins J**, Vandekerckhove P. 1996. Gonadotropin releasing hormone analogue as an adjunct to gonadotropin therapy for clomiphene-resistant PCOS.
- Hughes E, Collins J, Vandekerckhove P. 1996. Clomiphene citrate vs placebo for ovulation induction in oligoamenorrhoeic women.
- Hughes E, Collins J, Vandekerckhove P. 1996. Clomiphene citrate vs placebo or no treatment in unexplained subfertility.
- ♦ Hughes E, Collins J, Vandekerckhove P. 1996. Ovulation induction with urinary follicle stimulating hormone vs human menopausal gonadotropin for clomiphene-resistant polycystic ovary syndrome.
- ◆ Hughes E, Fedorkow D, Collins J, Vandekerckhove P. 1996. Ovulation suppression vs placebo in the treatment of endometriosis.
- Hughes E, Tiffin G, Vandekerckhove P. 1996. Danazol vs placebo in unexplained infertility.
- ♦ Vandekerckhove P, Lilford R, Vail A, Hughes E. 1996. The medical treatment of idiopathic oligo/asthenospermia: androgens (mesterolone or testosterone) versus placebo or no treatment.
- ◆ Vandekerckhove P, Lilford R, Vail A, Hughes E. 1996. Kinin enhancing drugs for idiopathic male infertility.
- ♦ Vandekerckhove P, Lilford R, Vail A, Hughes E. 1996. The medical treatment of idiopathic oligo- and/or asthenospermia: anti-oestrogens (clomiphene or tamoxifen) versus placebo or no treatment.
- ♦ Vandekerckhove P, Lilford R, Vail A, Hughes E. 1996. The medical treatment of idiopathic oligo/asthenospermia: bromocriptine versus placebo or no treatment .
- ♦ Vandekerckhove P, Watson A, Lilford R, Harada T, Hughes E. 1996. Therapeutic effect of oil-soluble and water-soluble media used for tubal patency testing (hysterosalpingography or laparoscopy) on pregnancy rates in infertility patients.
- ◆ Daya **S**. 1995. Comparison of human follicle-stimulating hormone and human menopausal gonadotropin for ovarian stimulation in vitro fertilization cycles.
- ◆ Kotarba D, Kotarba J, **Hughes E**. 1995. Growth hormone in in vitro fertilization.
- ♦ Hughes E, Collins J, Vandekerckhove P. 1994. Bromocriptine compared with placebo in women with unexplained infertility.

Note: Names in bold are registered Canadian Cochrane Reviewers.

# Canadian Contribution to the Database of Abstracts of Reviews of Effectiveness (DARE)

#### **Abstracts of Quality Assessed Reviews**

#### 1996

- ♦ Bucher H, Cook R J, Guyatt G H, Lang J D, Cook D J, Hatala R, Hunt D L . 1996. Effects of dietary calcium supplementation on blood pressure: a meta-analysis of randomized controlled trials. Journal of the American Medical Association 275(13): pp. 1016-1022.
- ♦ Bucher H, Guyatt G, Cook R, Hatala R, Cook D, Lang J, Hunt D . 1996. Effect of calcium supplementation on pregnancy-induced hypertension and preeclampsia: a meta-analysis of randomized controlled trials. Journal of the American Medical Association 275(14): pp. 1113-1117.
- ♦ Cole M G, Primeau F, McCusker J . 1996. Effectiveness of interventions to prevent delirium in hospitalized patients: a systematic review. Canadian Medical Association Journal 155(9): pp.1263-1268.
- ♦ Hatala R, Dinh T, Cook D . 1996. Once-Daily aminoglycoside dosing in immunocompetent adults: a metaanalysis. Annals of Internal Medicine 124: pp.717-725.
- ♦ Heyland D K, Cook D J, King D, Kernerman P, Brunbuisson C . 1996. Maximizing oxygen delivery in critically ill patients: a methodologic appraisal of the evidence. Critical Care Medicine 24(3): pp.517-524.
- ♦ Midgley J P, Matthew A G, Greenwood C M, Logan A G . 1996. Effect of reduced dietary sodium on blood pressure: a meta-analysis of randomized controlled trials. Journal of the American Medical Association 275(20): pp.1590-1597.
- Nichol G, Detsky A S, Stiell I G, O' Rourke K, Wells G, Laupacis A . 1996. Effectiveness of emergency medical services for victims of out-of-hospital cardiac arrest: a metaanalysis. Annals of Emergency Medicine 27(6): pp.700-710.
- ♦ Roberts I, Kramer M, Suissa S . 1996. Does home visiting prevent childhood injury: a systematic review of randomized controlled trials. British Medical Journal 312: pp. 29-33.
- ♦ Siragusa S, Cosmi B, Piovella F, Hirsh J, Ginsberg J S . 1996. Low-molecular-weight heparins and unfractionated heparin in the treatment of patients with acute venous thromboembolism: results of a meta-analysis. American Journal of Medicine 100(3): pp.269-277.

- Cronin L, Cook D J, Carlet J, Heyland D K, King D, Lansang M A, Fisher C J . 1995. Corticosteroid treatment for sepsis: a critical appraisal and meta-analysis of the literature. Critical Care Medicine 23(8): pp.1430-1439.
- ◆ Da Silva O, Ohlsson A, Kenyon C . 1995. Accuracy of leukocyte indices and c-reactive protein for diagnosis of neonatal sepsis: a critical review. Pediatric Infectious Disease Journal 14(5): pp. 362-366.
- ◆ Davis D A, Thomson M A, Oxman A D, Haynes R B . 1995. Changing physician performance: a systematic review of the effect of continuing medical education strategies. Journal of the American Medical Association 274(9): pp.700-705.
- ◆ Daya S, Gunby J, Hughes E G, Collins J A, Sagle M A . 1995. Follicle-stimulating hormone versus human menopausal gonadotropin for in vitro fertilization cycles: a meta-analysis. Fertility and Sterility 64(2): pp. 347-354.
- Garg R, Yusuf S. 1995. Overview of randomized trials of angiotensin-converting enzyme inhibitors on mortality and morbidity in patients with heart failure. Journal of the American Medical Association 273(18): pp. 1450-1456.
- Green C J, Hadorn D, Kazanjian A . 1995. Anticoagulation for stroke prevention in chronic non-valvular atrial fibrillation. Vancouver: B.C. Office of Health Technology Assessment, Centre for Health Services and Policy Research, University of British Columbia. vii, 89.
- ♦ Jadad A R, Browman G P. 1995. The WHO analgesic ladder for cancer pain management: stepping up the quality of its evaluation. Journal of the American Medical Association 274(23): pp. 1870-1873.
- ◆ Laine L, Cook D . 1995. Endoscopic ligation compared with schlerotherapy for treatment of esophageal variceal bleeding: a meta-analysis. Annals of Internal Medicine 123(4): pp. 280-287.
- ♦ Lensing A W A, Prins M H, Davidson B L, Hirsh J . 1995. Treatment of deep venous thrombosis with low-molecular-weight heparins. Archives of Internal Medicine 155(6): pp.601-607.
- ◆ MacRae H M, Macleod R S . 1995. Comparison of hemorrhoidal treatment modalities: a meta-analysis. Diseases of the Colon & Rectum 38(7): pp. 687-694.
- ♦ Marshall J K, Irvine E J . 1995. Rectal aminosalicylate therapy for distal ulcerative colitis: a meta- analysis. Alimentary Pharmacology & Therapeutics 9(3): pp. 293-300.

- ♦ McKelvie R S, Teo K K, McCartney N, Humen D, Montague T, Yusuf S . 1995. Effects of exercise training in patients with congestive heart failure: a critical review. Journal of the American College of Cardiology 25(3): pp. 789-796.
- ♦ McQuay H, Carroll D, Jadad AR, Wiffen P, Moore A. 1995. Anticonvulsant drugs for management of pain: a systematic review. British Medical Journal 311: pp.1047-1052.
- ♦ Osmond M H, Klassen T P . 1995. Efficacy of ipratropium bromide in acute childhood asthma: a meta- analysis. Academic Emergency Medicine 2(7): pp.651-656.
- ♦ Pearson D C, May G R, Fick G H, Sutherland L R . 1995. Azathioprine and 6-mercaptopurine in Crohn disease. A meta-analysis. Annals of Internal Medicine 123(2): pp.132-142.
- ♦ Wells P S, Lensing A W A, Davidson B L, Prins M H, Hirsh J . 1995. Accuracy of ultrasound for the diagnosis of deep venous thrombosis in asymptomatic patients after orthopedic surgery: a meta-analysis. Annals of Internal Medicine 122(1): pp. 47-53.

- ◆ Ciliska D, Hayward S, Thomas H, Mitchell A, Dobbins M, Underwood J, Rafael A, Martin E . 1994. The effectiveness of home visiting as a delivery strategy for public health nursing interventions: a systematic overview. Hamilton, Ontario: McMaster University; Toronto: University of Toronto, Quality of Nursing Worklife Research Unit pp.48.
- Cohen J E, Goel V, Frank J W, Bombardier C, Peloso P, Guillemin F. 1994. Group education interventions for people with low back pain: an overview of the literature. Spine 19(11): pp.1214-1222.
- ♦ Cook D J, Reeve B K, Scholes L C . 1994. Histamine-2-receptor antagonists and antacids in the critically ill population: stress ulceration versus nosocomial pneumonia. Infection Control & Hospital Epidemiology. 15(7): PP.437-442.
- ♦ De Jesus Mari J, Streiner D . 1994. An overview of family interventions and relapse on schizophrenia: metaanalysis of research findings. Psychological Medicine 24: pp. 565-578.
- ♦ Fardy F M, Laupacis A . 1994. A meta-analysis of prophylactic endoscopic sclerotherapy for esophageal varices. American Journal of Gastroenterology 89(11): pp. 1938-1948.
- ◆ Fine M J, Smith M A, Carson C A, Meffe F, Sankey S S, Weissfeld L A, Detsky A S, Kapoor W N . 1994. Efficacy of pneumococcal vaccination in adults: a meta-analysis of randomized controlled trials. Archives of Internal Medicine 154: pp.2666-2677.
- ♦ Held P H, Yusuf S . Jan 1994. Calcium antagonists in the treatment of ischemic heart disease: myocardial infarction. Coronary Artery Disease 5(1): pp. 21-26.
- ♦ Kirby D, Short L, Collins J, Rugg D, Kolbe L, Howard M, Miller B, Sonenstein F, Zabin LS. 1994. School-based programs to reduce sexual risk behaviors: a review of effectiveness. Public Health Reports 109(3): pp.339-360.
- ◆ Matchar D B, McCrory D C, Barnett H J M et al . 1994 Jul 1. Medical treatment for stroke prevention. Annals of Internal Medicine 121(1): pp. 41-53.
- ♦ Moreland J, Thomson M A . 1994. Efficacy of electromyographic biofeedback compared with conventional physical therapy for upper-extremity function in patients following stroke: a research overview and meta-analysis. Physical Therapy 74(6): pp.534-547.
- ♦ Ohlsson A, Myhr T L . 1994. Intrapartum chemoprophylaxis of perinatal group B streptococcal infections: a critical review of randomized controlled trials. American Journal of Obstetrics and Gynecology 170(3): pp.910-917.
- ♦ Soliman S, Daya S, Collins J, Hughes E G . 1994. The role of luteal phase support in infertility treatment: a metaanalysis of randomized trials. Fertility and Sterility 61(6): pp. 1068-1076.
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Over 180 Canadians are members of Cochrane collaborative review groups, or have been actively involved in the development of the Canadian Cochrane Network and Centre.

We at the Canadian Cochrane Centre wish to express our sincere gratitude to the many organizations and persons who contribute to our success.





The Cochrane Collaboration is an international network of individuals and institutions committed to preparing, maintaining, and disseminating systematic reviews of the effects of health care. In pursuing its aims, the Cochrane Collaboration is guided by eight principles: collaboration, building on people's existing enthusiasm and interests, minimizing duplication of effort, avoidance of bias, keeping up to date, ensuring relevance, ensuring access, and continual improvement.

