

Cochrane Canada

Annual Report

September 2014 - August 2015



Who We Are

Cochrane Canada is comprised of all Cochrane groups residing in Canada. This includes:

- Centres: Cochrane Canada Centre
- Review Groups: Cochrane Back and Neck, Cochrane Effective Practice and Organisation of Care, Cochrane Hypertension, Cochrane Inflammatory Bowel Disease and Functional Bowel Disorders, Cochrane Musculoskeletal, Cochrane Upper Gastrointestinal and Pancreatic Diseases
- Fields: Cochrane Child Health
- Methods Groups: Cochrane Methods Bias, Cochrane Methods Equity
- Regional Sites and our Advisory Board

The Cochrane Canada Centre (CCC), founded in August 1993, is one of 14 independent, not-for-profit Centres of Cochrane worldwide. The CCC supports the activities of over 3000 members of The Cochrane Collaboration in Canada to promote the Collaboration, Cochrane Library and evidence-based healthcare.

As the central contact point for the Collaboration within Canada, Centre staff aim to:

- Develop relationships with partner organizations in Canada;
- Facilitate national and international linkages;
- Coordinate training activities across Canada;
- Promote awareness, access and use of Cochrane Reviews; and
- Support the other Cochrane groups located in Canada.

The CCC has a partnership of representatives from Canadian universities, health professional organizations, government agencies and consumer groups; essentially the membership of Cochrane located in Canada.

Our Vision

To have individual and system level healthcare decision-makers understand the importance of using Cochrane Reviews to inform practice and that all healthcare decisions in Canada are informed by the best available evidence.

Our Mission

Cochrane Canada cultivates evidence-based decision-making by promoting the use and accessibility of Cochrane Reviews. We support and offer high quality training to those interested in using and producing Cochrane Reviews.

Cochrane Canada Members

Cochrane Canada

Jeremy Grimshaw, Director

Jordi Pardo Pardo, Acting Executive Director

Chris McCutcheon, Senior Funding Strategy Development Advisor

Alicia D'Aguiar, Communications Specialist

Eileen Vilis, Knowledge Broker

Lori Tarbett, Communications Specialist (until December 2014)

Lisa McGovern, Office Coordinator (until September 2015)

Cochrane Policy Liaison Office

John N. Lavis, Professor and Director of the McMaster Health Forum

François-Pierre Gauvin, Knowledge Broker (until August 2015)

Nova Scotia Cochrane Resource Centre

Jill Hayden, Lead

Jenny Cartwright, Research Coordinator

Sarah Visintini, Evidence Synthesis Coordinator

Québec Branch of the Cochrane Canada

France Légaré, Deputy Director

Alexis Turgeon, Scientific Director

William Witteman, Information Specialist

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Denise Thomson, Field Director

Ricardo Fernandes, Field Director

Katrina Williams, Field Director

Aireen Wingert, Project Coordinator

Megan Nuspl, Research Assistant

Methods Groups

Cochrane Methods Bias

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Alain Mayhew, Coordinator (until September 2015)

Cochrane Methods Equity

Peter Tugwell, Convenor

Vivian Welch, Convenor

Jennifer Petkovic, Coordinator

Mark Petticrew, Convenor

Review Groups

Cochrane Back and Neck

Andrea Furlan, Coordinating Editor

Claire Munhall, Managing Editor

Shireen Harbin, Trials Search Coordinator

Allison Kelly, Editorial Assistant

Teresa Marin, Managing Editor (until August 2014)

Cochrane Effective Practice and Organisation of Care

Jeremy Grimshaw, Coordinating Editor

Janet Squires, Editor

Mary Ann O'Brien, Associate Editor

Julia Worswick, Managing Editor

Monica Taljaard, Statistical Editor

Cochrane Hypertension

James (Jim) M Wright, Coordinating Editor

Ciprian Jauca, Managing Editor

Douglas M Salzwedel, Trials Search Coordinator

Cochrane Inflammatory Bowel Disease and Functional Bowel Disorders (IBD)

Nilesh Chande, Coordinating Editor

Brian Feagan, Coordinating Editor

John K MacDonald, Managing Editor

Claire Parker, Trials Search Coordinator

Cochrane Musculoskeletal

Peter Tugwell, Coordinating Editor

Elizabeth Ghogomu, Managing Editor

Lara Maxwell, Managing Editor

Jordi Pardo, Managing Editor

Cochrane Upper Gastrointestinal (GI) and Pancreatic Diseases

Grigorios Leontiadis, Coordinating Editor

Paul Moayyedi, Coordinating Editor

Karin Dearnness, Managing Editor

Yuhong (Cathy) Yuan, Trials Search Coordinator

Regional Site Representatives

Alberta

University of Alberta, Joanne Homik
University of Calgary, Diane Lorenzetti & Roger Thomas

British Columbia

University of British Columbia, Arminée Kazanjian

Manitoba

University of Manitoba, Michael E K Moffatt

New Brunswick

University of New Brunswick & Elizabeth Sloat

Newfoundland and Labrador

Memorial University, Stephen Bornstein

Nova Scotia

Nova Scotia Cochrane Resource Centre
Dalhousie University, Michael Graven & Jill Hayden

Northern (Nunavut, NWT, YK)

The Northern Canadian Cochrane Network
Yukon College, Susan Chatwood & Kami Kandola

Saskatchewan

Vacant

Ontario

McMaster University, currently vacant
Queen's University, Phil Hahn & Tanveer Towheed
University of Ottawa, Peter Tugwell & George Wells
University of Toronto, Joseph Beyene & Prakesh Shah
University of Western Ontario, currently vacant

Québec

McGill University, Pierre Pluye & Jacques Veronneau
Université Laval, France Légaré
Université de Montréal, Nils Chaillet
Université de Sherbrooke, currently vacant

Advisory Board

Krista Connell (Chair), Chief Executive Officer, Nova Scotia Health Research Foundation; Halifax, NS

Timothy Caulfield, Canadian Research Chair in Health Law and Policy; Professor, Faculty of Law and School of Public Health, Health Law Institute, University of Alberta; Edmonton, AB

Heather Davidson, Assistant Deputy Minister, B.C. Health Planning and Innovation Division, Ministry of Health; Vancouver, BC

Christine Fitzgerald, Past Senior Executive at Canadian Institutes of Health Research; Ottawa, ON

David Henry, President and CEO, Institute for Clinical Evaluative Sciences; Toronto, ON (until April 2014)

Jean Légaré, Patient Partner in the Canadian Arthritis Network; Québec City, QC

Mary Catherine Lindberg, Chairperson, Patented Medicine Prices Review Board (PMPRB); Former Executive Director of the Council of Academic Hospitals of Ontario; Toronto, ON

Stuart MacLeod, Senior Clinician Scientist, CFRI; Professor, Division of Administration, Department of Pediatrics, University of British Columbia; Vice President, Academic Liaison and Research Coordinator, Provincial Health Services Authority; Vancouver, BC

Vasanthi Srinivasan, Interim Executive Director, Ontario SPOR SUPPORT Unit; Toronto, ON

François Rousseau, Professeur (médecin), Unité de recherche en génétique humaine et moléculaire, Université Laval & CHUQ Université Laval; Québec City, QC

Jo Watson, Operations Director in the Women & Babies Programme at Sunnybrook Health Sciences Centre; Nurse Practitioner & Adjunct Faculty member at the Lawrence S. Bloomberg, Faculty of Nursing; Toronto, ON

Partners

Health Policy Organizations

Pan American Health Organization
Representative: Luis Gabriel Cuervo

Health Professional Organizations

Canadian Association of Occupational Therapists
Representative: Mary Egan

Speech-Language & Audiology Canada
Representative: Rosemary Martino

Canadian Chiropractic Association
Representative: André Bussièrès

Canadian Dental Association
Representative: Euan Swan

Canadian Dental Hygienists Association
Representative: Paula Benbow

Canadian Medical Association
Representative: Jeff Blackmer

Canadian Nurses Association
Representative: Lisa Ashley

Canadian Pharmacists Association
Representative: Barbara Jovaisas

Canadian Physiotherapy Association
Representative: Kate O'Connor

The College of Family Physicians of Canada
Representative: Jamie Meuser

Dietitians of Canada
Representative: Jayne Thirsk

Royal College of Physicians and Surgeons of Canada
Representative: Tanya Horsley

Canadian Association of Paediatric Surgeons Evidence-Based Resource
Representative: Ahmed Nasr

Health Research Organizations

Canadian Agency for Drugs and Technologies in Health
Representative: Tammy Clifford

Canadian Health Libraries Association
Representative: Doug Salzwedel

Canadian Institute for Health Information
Representative: Georgina MacDonald

Canadian Institute for the Relief of Pain and Disability
Representative: Marc White

Canadian Partnership Against Cancer
Representative: Louise Zitzelsberger

Canadian Task Force on Preventive Health Care
Representative: Marcello Tonelli

Institute for Clinical Evaluative Sciences
Representative: David Henry

Institut national d'excellence en santé et en services sociaux
Representative: Vacant

Seniors Health Knowledge Network
Representative: Lindsay Ogilvie

Arthritis Health Professionals Association
Representative: Raquel Sweezie

Consumer Organizations

The Arthritis Society
Representative: Kate Lee

Canadian Cancer Society
Representative: Robert Nuttall

Health and Safety Organizations

WorkSafe BC
Representative: Craig Martin

Welcome,

It is no secret that this was a challenging year for Cochrane Canada. We began 2015 with the knowledge that policy changes at CIHR would make it impossible for us to renew our core funding, funding that would end in September 2015. While we have not yet overcome this challenge, I am proud of how we came together to face it. By "we" I mean all members of the Cochrane community. It was inspiring to see the passionate support of partners, patients, health care and patient organizations, researchers, clinicians and concerned citizens. The responses to the #saveCochranecanada campaign showed how much we touched Canadians and said loud and clear that we will indeed save Cochrane Canada.

Otherwise, 2015 was a normal year for us, which is to say a successful one. Despite having to divert a substantial amount of our time and energy to search for new funding, it was business as usual. Our review groups published 50 reviews and updates and 41 protocols. Cochrane Canada workshops and webinars trained 631 people to conduct or use Cochrane reviews. And we strengthened the potential impact of our reviews more than ever with innovative approaches to knowledge translation. From practice guidelines to YouTube channels, Facebook to children's e-books, Cochrane evidence is getting around.

In case you missed it, the conclusion of 2015 marked another milestone. Ten years have passed since the Canadian Cochrane Centre moved to Ottawa. A brief reflection on what we have achieved should bring pride to all our members. Today, Canada is responsible for 10% of the systematic reviews in the Cochrane Library. In the last five years alone Cochrane Canada produced 332 reviews and updates and 331 new protocols. Ten years ago there were 1200 Canadians contributing to Cochrane in a variety of roles, such as authors, editors, trainers, peer reviewers or consumer representatives. That number has more than tripled to 3622, and the majority of them, 2252, are Cochrane authors.

Cochrane Canada has become the largest and most efficient producer of systematic reviews in Canada and the most significant contributor to Canada's systematic review capacity. Looking back on what we have achieved the future starts to look bright. Canadians begin 2016 with a new government openly committed to evidence-based decision-making, and Cochrane Canada stands out as the mainstay of Canada's health knowledge infrastructure. It will take a little more time, but I am confident the dots will be connected, money found to keep this national resource.

My thanks to all of you who have built Cochrane Canada into what it is today and to those who have raised their voices to keep it going.

Best regards,

Jeremy Grimshaw
Director
Cochrane Canada

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Greetings

Linking with CIHR

Cochrane Canada has an active relationship with the Canadian Institutes of Health Research (CIHR), which allows for greater dissemination of evidence-based healthcare research, as well as new opportunities for collaboration with other prominent healthcare organizations in Canada.

Throughout the past year, Cochrane Canada has continued to work with the Communications and Public Outreach branch of CIHR to help promote Cochrane Reviews and evidenced-based health information. The goal of the joint communications strategy is to raise awareness among Canadians and CIHR researchers of Cochrane and Cochrane Library as a source of high-quality healthcare evidence. Visit the [Reviews of Health Research Page](#) featured on CIHR's website to see more.

Cochrane Corners

Several Cochrane groups in Canada contribute to a Cochrane Corner with a CIHR Institute. A Cochrane Corner is a dedicated space on an Institute's (or any health organization's) website to promote new Cochrane Reviews that are relevant to that particular area of health. Cochrane Corners are updated at regular intervals ranging from monthly to quarterly.

The following CIHR Institutes feature Cochrane Corners on their websites:

CIHR Institute of Gender and Health (IGH)

Cochrane Methods Equity works with IGH to showcase Cochrane Reviews that have considered sex and gender in their analyses and discussion. In 2014, a redesigned version of the IGH Cochrane Corner website was launched. Each month the Cochrane Methods Equity reviews the abstracts and full texts of new and updated Cochrane Reviews to determine which have considered sex/gender. These reviews are then featured on the Cochrane Corner website.

CIHR Institute of Infection and Immunity (III)

Cochrane Inflammatory Bowel Disease and Functional Bowel Disorders regularly feed reviews of interest to the III Cochrane Corner.

CIHR Institute of Musculoskeletal Health and Arthritis (IMHA)

Cochrane Back and Neck and Cochrane Musculoskeletal contribute reviews to the IMHA Cochrane Corner. The Back Group also shares news items (e.g., BRG news, author interviews) with IMHA for dissemination in their newsletter.

Funding

Approximately 19 per cent of the five-year award granted by the Canadian Institutes of Health Research (CIHR) was used between 1 September 2014 and 31 August 2015.

Cochrane Canada would also like to thank and acknowledge our additional funders:

- Canadian Chiropractic Research Foundation
- Canadian Chiropractic Association
- Canadian Chiropractic Protective Association
- Canadian Chiropractic Examining Board
- Ontario Ministry of Health and Long-Term Care
 - (One million over five years to support the work of Cochrane Canada, particularly in Ontario)
- Ministère de la Santé et des Services sociaux du Québec
 - (French translation of Cochrane abstracts and Plain Language Summaries)
- Fonds de la recherche en santé du Québec
 - (French translation of Cochrane abstracts and Plain Language Summaries)
- L'Institut national d'excellence en santé et en services sociaux
 - (French translation of Cochrane abstracts and Plain Language Summaries)
- CIHR Meetings, Planning and Dissemination Grant (July 2011 notification)
 - (\$100,000 for "Dr Cochrane: developing online learning modules for Cochrane Reviews")
- CIHR Knowledge Translation Award \$100,000
- CIHR Dissemination Events Grant (21st International Cochrane Colloquium) \$25,000

The Cochrane Canada grant totalled \$9.9 million for five years, with contributions from:

Institution	Contribution
Canadian Institute of Health Research (CIHR) Knowledge Synthesis and Exchange Branch	\$5,000,000
CIHR – French Translation project	\$300,000
CIHR Strategy for Patient-Oriented Research	\$2,200,000
CIHR Institute of Circulatory and Respiratory Health	\$150,000
CIHR Institute of Nutrition, Metabolism and Diabetes	\$500,000
CIHR Institute of Musculoskeletal Health and Arthritis	\$250,000
CIHR Institute of Gender and Health	\$500,000
CIHR Institute of Infection and Immunity	\$250,000
CIHR Institute of Health Services and Policy Research	\$500,000
CIHR Institute of Cancer Research	\$250,000

Growth of Cochrane in Canada

Authors

Since Cochrane Canada's current funding period began in 2010, the Canadian author base has steadily increased. In the past year alone, 355 new Canadian authors have been added in Cochrane's database. There are now a total of 2251 Cochrane authors in Canada

Canadian authors can be associated with any of the 53 Cochrane Review Groups around the world, and six of these Review Groups are located in Canada. Authors by group have also increased this year:

- Back and Neck: 111 total authors
- EPOC: 185 total authors
- Hypertension: 112 total authors
- IBD/FBD: 126 total authors
- Musculoskeletal: 201 total authors
- Upper GI: 89 total authors

Members

Along with authoring reviews, members of Cochrane can take on many other existing roles within the Collaboration. For example, there are consumer representatives, peer reviewers, Cochrane trainers, etc. Cochrane Canada added 325 new members (including new authors) to its database between 1 September 2014 and 31 August 2015. There is now a total of 3626 active Cochrane Canada members.

Producing the Evidence: Cochrane Systematic Reviews

Cochrane Reviews

Cochrane Reviews are the main product of Cochrane Library and are internationally recognized as the highest standard in evidence-based healthcare. A Cochrane Review addresses a clearly formulated question regarding a healthcare intervention and investigates whether or not there is conclusive evidence about a specific treatment.

All existing primary research on the topic is thoroughly searched, collated and assessed using strict guidelines. Cochrane Reviews are designed to facilitate the choices that practitioners, consumers, policy-makers and others face in health care. Without Cochrane Reviews, people making decisions are unlikely to be able to access and make full use of existing healthcare research.

Cochrane Review Groups

Review Groups manage the preparation, maintenance and updating of Cochrane Reviews by providing expertise and publishing support to those conducting a review. Six out of 53 Cochrane Review Groups are located in Canada, each focusing on a different area of health.

Review Production

	1 September 2014 – 31 August 2015		1 September 2013 – 31 August 2014	
	Target	Actual	Target	Actual
Cochrane Back and Neck				
Protocols	5	6	5	4
Reviews	5	5	5	2
Updates	5	4* (5 th published 01/09/2015)	5	1
Cochrane Effective Practice and Organisation of Care				
Protocols	4	8	4	8
Reviews	4	3	4	3
Updates	5	1	5	1
Cochrane Hypertension				
Protocols	5	6	5	0
Reviews	5	4	5	7
Updates	5	1	5	1
Cochrane Inflammatory Bowel Disease and Functional Bowel Disorder (IBD/FBD)				
Protocols	5	8	5	6
Reviews	6	2	6	5
Updates	5	3	5	6
Cochrane Musculoskeletal				
Protocols	6	12	6	15
Reviews	6	17	6	5
Updates	6	10	6	11

Cochrane Upper Gastrointestinal and Pancreatic Disorders				
Protocols	6	19	6	8
Reviews	6	7	6	8
Updates	8	12	6	0
Total: All Groups	1 September 2014 – 31 August 2015		1 September 2013 – 31 August 2014	
	Target	Actual	Target	Actual
Protocols	31	59	31	41
Reviews	32	38	32	30
Updates	34	31	32	20

Fields

Fields promote awareness and use of Cochrane Reviews that are relevant to a particular area of health care and communicate the research evidence needs of its population to Review Groups. There are 10 fields in the Collaboration (including the Cochrane Consumer Network, which is categorized as a Field). One Field, the Cochrane Child Health, is located in Canada.

Cochrane Child Health (CHF) publications (September 2014 - August 2015)

	Target	Actual
Cochrane Overviews of Reviews published in each issue of Evidence-Based Child Health	6	1 (journal ceased publication in 2014)
Cochrane Reviews supported by CHF	10	10

Resources to support review production

CENTRAL

The Cochrane Central Register of Controlled Trials (CENTRAL) is a database containing information on clinical trials that may be relevant to Cochrane Reviews. Each Review Group maintains a collection of trials that relate to its own area of interest, which are called 'Specialised Registers'. Submissions to Specialised Registers include the title of the article, where it was published, and often, a summary of the article. Three fifths of the records submitted to CENTRAL are taken from MEDLINE.

Specialised Register Submissions

New Additions to Specialised Registers of Trials by Canadian Groups		
Cochrane Group	New additions this period (2014 - 2015)	TOTAL in Group's register on 31 August 2014
CBN	775	9018
EPOC	0	9175
HTN	584	27,075
IBD/FBD	0	3207
MSK	356	5212
UGPD	0	20,761

Total new trials identified and added to register 940

Developing the Methods

METHODS GROUPS

Methods Groups develop the set of scientific procedures that are used in Cochrane Reviews and advise The Cochrane Collaboration on how the conduct of Cochrane Reviews can be improved. In addition to doing methodological research, they provide advice, training and support to Review Groups, Centres and authors around the world. They help monitor the quality of systematic reviews prepared within the Collaboration and serve as a forum for discussion. There are 16 Methods Groups, three of which are located in Canada (the GRADEing Methods Group is located in Canada but is not funded by CIHR).

Cochrane Methods Equity

	Target	Actual
Cochrane protocols supported by Equity Methods	2	4
Cochrane Reviews supported by Equity Methods	2	5
Other Equity-related publications	4	16

Cochrane Methods Bias (CMB)

	Target	Actual
CLIB Protocols	2	3
CLIB Reviews	2	2
CLIB Updates	1	0
Methods Research publications	1	10
CMB Led & collaborative workshops	2	6

*As a Methods Group, CMB does not publish protocols, reviews and updates per se. The CLIB protocols, reviews and updates in the table above are those Cochrane publications with the Methodology Review Group (dealing specifically with methods issues), which include CMB members; those publications with any group co-authored by CMB convenors or staff member, or publications with any group in which there is specific acknowledgement of a CMB convenor or staff member.

Building the Capacity of Canadians: Education and Training

Cochrane Canada trainers work across the country to increase the knowledge and capacity of Canadians to conduct Cochrane Reviews.

Workshops

In the past year, the Cochrane Canada Centre (CCC) has expanded the number and geographic spread of its face-to-face training sessions, including sessions in London, Winnipeg, Toronto, Vancouver, and Ottawa. Demand for Cochrane Standard Author Training Workshops continues to outpace the CCC's ability to deliver sessions.

Looking forward, the CCC will work with the Québec Branch of the Cochrane Canada to build both training and systematic review capacity amongst Canadian Francophones.

2014-2015 Introduction & Standard Author Training Workshops

Location	Province	Date	Participants
University of Manitoba	MB	September 2014	50
Western University	ON	November 2014	28
Canadian Agency for Drugs and Technologies in Health	ON	February 2015	20
Laval University	QC	March 2015	15
University of Toronto	ON	March 2015	26
University of British Columbia	BC	March 2015	19

Webinars

Cochrane Canada released Cochrane first webinar series in 2009. Webinars have since proven to be a favourite medium of training among Cochrane members both within Canada and internationally. The CCC focuses on a wide range of topics that are relevant to people with beginner or advanced knowledge of Cochrane, Cochrane Reviews and Cochrane Library.

2014-2015 Education and Training Webinars

Title	Date	Partners	Participants
Health Systems Evidence	October 2014	PAHO & Policy Liaison Office	32
Rapid Response Program	November 2014	PAHO & Policy Liaison Office	47
Risk of Bias	January 2015	PAHO & Cochrane Methods Bias	42
Stakeholder Dialogues	January 2015	PAHO & Policy Liaison Office	106
Citizen Panels	February 2015	PAHO & Policy Liaison Office	108
Health Systems Learning	March 2015	PAHO & Policy Liaison Office	138

Capacity Building to Use Reviews: An Update from Cochrane Canada Groups

Cochrane Back and Neck (CBN)

COCHRANE REVIEW CAPACITY BUILDING: AUTHOR TRAINING ACTIVITIES

Cochrane Back and Neck (CBN) editorial base has been involved in a number of workshops in the last year in order to increase authorship and to increase the knowledge of our authors. In addition CBN released updated methods guidelines in August 2015 to help CBN authors when they are completing their Cochrane reviews in the field of back and neck pain.

Coordinating Editors Maurits van Tulder and Andrea Furlan, and Managing Editor Claire Munhall, presented sessions at the Institute for Work & Health systematic review workshop, which includes a component of Cochrane Reviews, in December 2014 and May 2015 in Toronto. Claire Munhall also taught a section of the Cochrane Standard Author Training at the University of Toronto School of Dentistry in May 2015.

CBN published 2015 updated methods guidelines in August 2015 in Spine. Previous versions of these guidelines have been widely downloaded and cited by CBN authors both in Canada and abroad. Currently CBN has 109 Canadian authors across the country and five Canadian consumer referees

KNOWLEDGE TRANSLATION ACTIVITIES

In the past 12 months Cochrane Back and Neck (CBN) has undertaken many initiatives to communicate with stakeholders. This includes regularly posting on [Facebook](#) (n= 831 likes), [Twitter](#) (n=1,842 followers) and [YouTube](#) (n=7 videos posted), sending [newsletters](#), and updating our [website](#).

In September 2014, CBN hosted a pre-conference day with CBN editors and authors before the back pain forum. The agenda included presentation of recent reviews by CBN authors, discussions about methodology and priorities within the field and it was really well received by attendees.

Additionally CBN created a knowledge synthesis tool called [QuickDecks](#) that are a quick snapshot of the evidence presented in each CBN review. They have been downloaded over 2000 times since being posted and they were presented at the Cochrane Symposium in Calgary to Cochrane authors and consumers. Authors have also been encouraged to post short videos of themselves presenting the QuickDecks slides that can be posted on the CBN YouTube channel. CBN has currently posted 5 of these QuickDecks videos.

Cochrane Back and Neck (CBN) incorporate consumers as part of the editorial process to ensure integration of knowledge user valuable input. Consumers provide input during peer review at the protocol stage and review stage and also help to write and/or edit Plain Language Summaries to ensure they are meaningful and clear.

To ensure reviews being undertaken are relevant and current, CBN authors and editors discussed priority reviews were discussed and identified at the CBN conference day prior to the Low Back Pain forum in Brazil in September 2014.

Cochrane Methods Bias (CMB)

COCHRANE REVIEW CAPACITY BUILDING: AUTHOR TRAINING ACTIVITIES

Cochrane Methods Bias has taught part or all of five face-to-face workshops and one webinar in Canada, with over 100 participants. Target audiences for these workshops have included Cochrane author teams, students, federal government staff, health technology agencies and others. CMB was actively involved in the launch of Canadian EQUATOR centre, which will increase profile and use of resources for authors to aid with writing and publishing research. We have continued to provide peer review support and ongoing input to authors for both Cochrane and non-Cochrane reviews, and offer guidance and support to those using or interested in Cochrane methods on request.

Over half of Canadian CMB members are from Ontario. However, our materials are available to all Cochrane authors and other interested researchers, and can be accessed easily on our website.

KNOWLEDGE TRANSLATION ACTIVITIES

CMB continues to use a Twitter account for dissemination of information. Twitter followers include journalists, administrators, clinicians, researchers and students. In addition, the BMG listserv has over 200 members.

The CMB is actively involved in providing content and editorial support to the Cochrane Methods Journal. This journal, published annually in September, reports on methodological issues within Cochrane. In the 2015 issue, CMB submitted a report of ongoing activities and listed relevant publications and provided a commentary on a published article.

CMB has recently updated their website, incorporating the new Cochrane logo and standard branding. New content has been added and changes have been made to the format. Among other modifications, CMB has updated our list of relevant references, adding an additional 99 references to the list and added a description of a simple search function for users of the list.

Cochrane Child Health (CHF)

COCHRANE REVIEW CAPACITY BUILDING: AUTHOR TRAINING ACTIVITIES

Cochrane Child Health has 65 Canadian members (Alberta: 27, Ontario: 22, BC: 7, Nova Scotia: 3, Quebec: 3, Manitoba: 2, Yukon: 1). No activities were undertaken in the past year to increase membership.

As well, Cochrane Child Health conducted a six-month project exploring the use of social media as a tool for disseminating child-relevant Cochrane evidence. This campaign led to an increase in the Field's Twitter followers to over 1,500 followers.

Lastly, the Field invests considerable resources supporting physicians and trainees to be authors of Cochrane Reviews. Typically these individuals come to the Field because they have identified a topic that they feel is important for practice, where they have identified that a SR is not currently available. The Field then provide methods, statistical and/or searching assistance in completing the review. The overall goal for the Field is increasing the body of child-relevant evidence in the Cochrane Library and building capacity among child health practitioners to produce and interpret Cochrane systematic reviews.

KNOWLEDGE TRANSLATION ACTIVITIES

One of Cochrane Child Health's main areas of activity is the development and implementation of knowledge translation initiatives aimed at increasing the uptake and use of systematic reviews in general, and Cochrane evidence in particular. For example, Dr. Hartling led a project to develop and test an e-book for healthcare consumers (parents), based on Cochrane evidence for croup. Another Field project evaluated infographics versus critical appraisals to translate systematic review evidence.

The Field involves knowledge users in all stages of the conception, development and implementation of its initiatives.

Evidence for Clinicians: This column appears in each issue of Paediatrics and Child Health, the journal of the Canadian Paediatric Society. Each profiles a child-relevant Cochrane review and its implications for practice. Review selection is guided by an advisory panel of community paediatricians and general practitioners. In a June 2015 reader survey, Evidence for Clinicians was ranked as the fourth most-often read article type.

Translating Emergency Knowledge for Kids: This is a national network of researchers, clinicians, national organizations and health consumers working to improve emergency care for children across Canada. Dr Hartling has led a project of identifying all Cochrane Reviews relevant to pediatric emergency care, and obtained approval to include the Plain Language Summaries on trekk.ca. She has also developed KT tools (bottom line recommendations) based on the evidence (Cochrane where available) for front-line practitioners.

Social media project: This six-month project was funded by Alberta Innovates-Health Solutions to test the use of social media to accelerate the dissemination of child-relevant Cochrane evidence. Clinicians guided the selection of the reviews that were featured. A weekly blog post highlighted an individual review, and then the post was publicized via the Field's Twitter account. There was also a monthly Twitter Journal Club focussing on a review led by a review author or clinical expert. The project drew interest from around the globe and demonstrated increased access to the reviews (e.g., average increase in the altmetric scores for the 61 articles promoted was 216%).

Cochrane Policy Liaison Office (CPLO)

The CPLO currently has two main sites: the McMaster Health Forum (mcmasterhealthforum.org) and Health Systems Evidence (www.healthsystemsevidence.org). The CPLO periodically profiles Cochrane-related work on the McMaster Health Forum website. However, Health Systems Evidence (HSE) is the primary site for promoting and disseminating Cochrane Reviews. HSE includes three portals:

- 1) Intergovernmental Organizations' Health Systems Documents Portal;
- 2) Canada's Health Systems Documents Portal; and
- 3) Ontario Health System Documents Portal.

Integrating these portals within HSE means results of searches for policy-relevant documents will prompt users to view related research evidence, including Cochrane Reviews.

Type of article	Total in HSE		New articles added to HSE in 2014-15	
	Total	Cochrane	Total	Cochrane
Reviews	4955	698	880	126
Protocols	672	206	251	9
Evidence briefs	138	Not applicable	128	Not applicable

**As of October 2015, HSE had more than 11,000 registered users, which is an increase of more than 1,700 users for this one-year period. There are more than 2,400 policy-makers, 1,200 managers and 2,600 professionals registered to HSE. In addition, HSE has more than 4,400 subscribers to the HSE customizable evidence service (more than 400 new registrations this year alone).

The CPLO made a number of enhancements in 2014-2015 to increase its usability and usefulness for policy-makers, stakeholders and researchers in addition to growing the HSE database with Cochrane content:

- launched Primary Health Care (PHC) Evidence, powered by HSE and incorporated in the Primary Health Care Performance Initiative (<http://phcperformanceinitiative.org/>), making Cochrane content focused on primary health care and low- and middle-income countries available to a wider audience;
- scheduled for completion by the end of 2015, the HSE interface is undergoing a complete redesign to enhance the user experience, including a responsive design to optimize the interface on both desktop and mobile, a more powerful search engine and improved sort function to ensure the most relevant results are quickly identified, a guided search tool is available for users who want additional assistance in applying filters, and the ability to save preferred searches for future use including the option to receive email updates of those searches.

The CPLO has iTunesU and YouTube channels to disseminate video tutorials and interviews with stakeholder dialogue participants. It also has a Facebook page and several Twitter accounts to share upcoming events and research evidence recently added to HSE:

- www.twitter.com/MacHealthForum
- www.twitter.com/HSEvidence
- www.twitter.com/HSEvidenceFr
- www.twitter.com/EIHRportal
- www.twitter.com/portailRSSDP

The CPLO periodically profiles Cochrane-related work on the Health Systems Evidence Twitter accounts.

The CPLO continued its capacity building initiatives in 2015 through Health Systems Learning (HSL), which is an educational program developed and managed by the McMaster Health Forum, to provide online and in-person training about how to reform, renew or strengthen health systems, and how to get cost-effective programs, services and drugs to those who need them. The program is designed to build the capacity of policymakers, stakeholders and researchers who are interested in developing a range of skills including: 1) finding and using research evidence to inform their work related to prioritizing problems to address, and developing and implementing policies and programs; and 2) understanding the political factors that shape the processes underlying the prioritization of problems and the development and implementation of policies and programs.

During 2014-2015 the CPLO used three types of newsletters:

- 1) a newsletter for McMaster Health Forum announcements;
- 2) the McMaster Health Forum Evidence Service which provides monthly updates about topics covered in previous stakeholder dialogues (in English); and

- 3) the Health Systems Evidence customizable evidence service which provides monthly updates on newly identified documents related to user's interests (in Chinese, English, French, Portuguese, or Spanish).

The CPLO's two evidence services are its principal newsletter vehicles for bringing Cochrane reviews to the attention of policy-makers and stakeholders.

Over the past year the CPLO held five stakeholder dialogues that brought together policy-makers, leaders, citizens and researchers for off-the-record deliberations about pressing health challenges including: improving leadership capacity in primary and community care; optimizing clinical practice based on data, evidence and guidelines; exploring models for pharmacist prescribing in primary and community care settings; improving pain and symptom management in cancer care; and using financial incentives to achieve health-system goals. The stakeholder dialogues were informed by evidence briefs that draw heavily on Cochrane reviews. Additionally, the CPLO and the McMaster Health Forum Student Leadership Team organized several public talks, panel discussions and workshops on topics such as humanitarian trips, bioethics in medicine, community health, and the role of health policy in advancing the health of our aging population. These events aimed to provide opportunities for professional growth, learning, interdisciplinary discussion and collective action among students to address pressing health challenges.

Cochrane Effective Practice and Organisation of Care (EPOC)

AUTHOR TRAINING AND SUPPORT ACTIVITIES

EPOC produces innovative reviews that evaluate interventions designed to improve the implementation, practice, and organization of healthcare services. These reviews tend to be complex and as a result, the methods to conduct these reviews need to be explicit and sensitive to guide review authors. EPOC has developed and continues to update its EPOC specific online resources to help authors address and react to these complexities. As well, EPOC continues to provide highly specialized search support for all review authors. For the period, the EPOC Trials Search Coordinator (TSC) was involved with the development and operationalizing of more than 27 search strategies for its review authors.

In 2013-2014, the EPOC review group engaged with 47 author teams on new review proposal requests. EPOC accepted five new review proposals which are currently in protocol development.

EPOC enlists new authors locally and internationally through outreach activities in editorial offices located in Ottawa, Paris, Oslo, Melbourne, Oxford and Bologna. In 2014-2015, the EPOC review group engaged with 47 author teams on new review proposal requests. Additional authors are often recruited during the review development and production process in consultation with lead authors and experts in the field. The EPOC website provides resources for authors and a quick access point to register/recruit new authors through its 'get involved' portal. EPOC also engages new authors and reviewers through open meetings held at annual Cochrane Symposia (Calgary 2015) and Colloquia (Hyderabad 2014). Through these efforts, EPOC has added 64 new authors and peer reviewers for a total of 987; fifteen new authors are Canadian and are located in Alberta, Ontario and Québec. This brings the current Canadian author content to 172. This addition of new Canadian authors increases the Group's Canadian perspective in this area of research and will contribute to the Canadian body of evidence as their work is published in the near future.

KNOWLEDGE TRANSLATION ACTIVITIES

EPOC disseminates evidence in a variety of ways. Using social media, EPOC announced and provided publicly accessible links to newly published EPOC protocols, reviews and updates on a monthly basis through Twitter feeds from @CochraneEPOC and through bilingual tweets in partnership with the Cochrane Policy Liaison Office/Health Systems Evidence @HSEvidence. Through Cochrane, and its publisher, five EPOC review teams have been approached to develop podcasts to disseminate evidence from their published reviews. One podcast was released for this reporting period. As well, EPOC worked with Cochrane and Wiley to promote a review that was published to coincide with World Asthma Day 2015. This review was selected and promoted as a Cochrane 'feature review', giving the review group and author team additional media exposure.

EPOC also disseminates evidence of effective interventions to change professional practice and medicines use by consumers through the Canadian Agency for Drugs and Technologies in Health (CADTH) Rx for Change database (www.rxforchange.ca). EPOC supports users of the database, providing search and evidence retrieval support upon request. EPOC provided support for two requests for information for the period.

EPOC reviews extend their reach into the literature of our stakeholders to contribute evidence and inform policy, practice and future research. Demonstrating good engagement with the evidence from EPOC reviews, citation statistics show that a review published by the Effective Practice and Organisation of Care Group in 2012 or 2013 was cited, on average, 15.966 times in 2014. As well, of the top ten most cited reviews published in the Cochrane Library, two are EPOC reviews. One of these reviews, 'Audit and feedback: effects on professional practice and healthcare outcomes' is led by a Canadian review team. This review was cited 128 times in 2014.

Altmetric data tracks social media sites like Twitter, Facebook, Google+, and Pinterest as well as blogs, newspapers, magazines and online reference managers like Mendeley and CiteULike for mentions of the published Cochrane Protocols and Reviews. This demonstrates good interest in EPOC reviews. The highest altmetric scores reported in July 2015 for EPOC reviews ranged from 3 to 34 (based on data tracked on seven reviews). As EPOC's foray in to social media is quite recent, these scores are expected to increase over the next year as a result of increased social media activities planned.

As part of a Cochrane wide strategy to identify priority reviews, the editors of the review group identified 15 EPOC systematic reviews that they determined to be important to decision makers globally based on consultation with content experts, citation and usage statistics and priority interests of EPOC satellite countries and funders. Five of these priority reviews are led by Canadian author teams. The EPOC editorial staff in Ottawa is currently working with these teams to update these reviews, co-ordinating the update activities, performing evidence searches, screening titles and abstracts, and helping with data extraction.

EPOC integrates knowledge users at every stage of the review development process. Content experts are engaged to comment on the relevance of new review proposals, protocols, reviews and updates through the peer review process. EPOC strives to engage content experts globally to provide a broad perspective in keeping with the international focus of the Cochrane Collaboration.

Cochrane Methods Equity

COCHRANE REVIEW CAPACITY BUILDING: AUTHOR TRAINING ACTIVITIES

Cochrane Methods Equity increased membership to 790 between September 2014 and August 2015. This includes 355 Canadians located across 9 provinces. The Equity Group has increased membership over the past year through webinars hosted by PAHO and the National Collaborating Centre for Methods and Tools, through workshops at CADTH and Health Quality, and invited presentation at PHAC, Cornell University, and Public Health Ontario. The group has also continued to hold workshops at the Cochrane Colloquium and assist with Standard Author Training.

KNOWLEDGE TRANSLATION ACTIVITIES

Cochrane Methods Equity was invited to present on defining disadvantage and conducting and reporting equity in systematic reviews to various organizations, including the National Collaborating Centre for Methods and Tools (NCCMT), Public Health Ontario, Health Quality Ontario, and Cornell University (WHO nutrition systematic reviews course). The NCCMT has created a summary of the presentation on their website: <http://www.nccmt.ca/registry/view/eng/223.html>.

Over the past 12 months, the Equity Group's website has received 3643 sessions from 2642 users for a total of 7920 pageviews. This is an increase from the previous 12 months (September 2013-August 2014; 3206 sessions, 2487 users, 6685 pageviews).

The Equity Methods Group is developing a special collection of summaries of systematic reviews on topics relevant to health equity. To decide on the priority reviews to summarize, the group has conducted priority setting exercises with stakeholders in each of the topic areas to identify and rank the priority Cochrane reviews. This work will be used to develop new summaries to add to the special collection which is hosted on the Cochrane.org website.

The Equity Methods Group has included stakeholders at all stages, included initial project design, for a project to develop reporting guidelines for equity-relevant randomized controlled trials (CONSORT-equity). These international stakeholders include trialists, patients, and representatives from disadvantaged groups.

Cochrane Hypertension (HTN)

COCHRANE REVIEW CAPACITY BUILDING: AUTHOR TRAINING ACTIVITIES

The Cochrane Hypertension group conducted a 3-day standard Cochrane author training course on 2 – 4 March 2015 at the University of British Columbia in Vancouver, BC. The course brought together 19 participants and 6 trainers. All but one of the participants were new to Cochrane methodology. The course was highly rated by participants and most of them expressed an intention to actively contribute to Cochrane in the near future. For example, one participant has completed a hypertension systematic review since then, and another participant took the lead in updating an existing review.

The Cochrane Hypertension group was invited to give a half-day workshop on GRADE and Summary of Findings Tables as a satellite event held in conjunction with the General Assembly of the International Society of Drug Bulletins in July 2015 in Pamplona, Spain. This workshop was attended by more than 20 editors of independent drug bulletins from a dozen different countries. The workshop was highly rated by participants.

The Cochrane Hypertension group holds weekly meetings, allowing attendees to connect in person or via internet videoconference, where authors present their work, ask questions and receive support from the group's staff and editors. While the primary focus of these meetings is naturally on hypertension reviews, they are open to any current or prospective Cochrane authors.

The Cochrane Hypertension group works with 578 contributors from over 40 countries, of whom 512 are review authors. 141 of these authors are from Canada (28%) and three quarters of them (106) are from British Columbia, but the group has also supported authors from Alberta (7), Saskatchewan (2), Manitoba (2) Ontario (10), Quebec (13) and New Brunswick (1).

In addition, Cochrane Hypertension has also provided face-to-face methodological support to numerous Cochrane authors based in British Columbia who are undertaking reviews for other Cochrane groups.

KNOWLEDGE TRANSLATION ACTIVITIES

Hypertension is a condition with large and increasing prevalence in Canada and around the world in both developed as well as developing countries. Cochrane Reviews published by the Cochrane Hypertension group often have implications for public health and have been used by stakeholders in setting policy and informing the public. For example, a Cochrane Review published by the Cochrane Hypertension group (Pharmacotherapy for mild hypertension) received significant attention in the media and contributed to the debate around over-diagnosis and over-treatment of this common chronic condition, both in Canada and internationally, ultimately leading to a change in clinical guidelines worldwide to recommend less treatment for people with mild hypertension.

The Cochrane Hypertension group developed a mentoring project for students in health disciplines such as medicine, pharmacy, nursing, public health etc. at the University of British Columbia. Students received an elective course in critical appraisal of systematic reviews and were asked to select a Cochrane Review based on their personal interest. The students were then asked to respond to an online anonymous questionnaire aimed to capture their perception of the quality and reliability of Cochrane Reviews. Over 100 students have participated so far, and most of them have submitted (or are in the process of doing so) feedback for publication in Cochrane Library. Some of the students who participated in this project prepared oral or poster presentations that were presented at various scientific meetings and conferences, and a few were motivated to become Cochrane authors or referees.

Another project initiated this year with the volunteer support of an undergraduate science student at the University of British Columbia was aimed at improving hypertension-related content in Wikipedia. Students were given access to Cochrane hypertension reviews and were asked to search in Wikipedia to establish if the information presented in Wikipedia is consistent with the findings of Cochrane reviews, and encouraged to make changes in Wikipedia to correct any discrepancies found.

Cochrane Hypertension has undergone rebranding during the last year, which was completed successfully and resulted in a refreshed image for the group, a redeveloped website and a steady increase in social media engagement. For example, Cochrane Hypertension now has 637 followers on Twitter (a 60% increase over the 12 month period) and the number of "likes" for the Cochrane Hypertension Facebook page has increased by more than 400%.

Cochrane Inflammatory Bowel Disease and Functional Bowel Disorders (IBD/FBD)

COCHRANE REVIEW CAPACITY BUILDING: AUTHOR TRAINING ACTIVITIES

During the period 1 September 2014 to 31 August 2015, the Cochrane IBD Inflammatory Bowel Disease and Functional Bowel Disorders Group recruited 46 new authors. During this period these new authors contributed to the publication of six new protocols. The IBD/FBD Group recruited 10 new Canadian authors during this reporting period. These new authors contributed to the publication of three new protocols.

In the past year, the IBD/FBD Group routinely engaged in the following capacity building Knowledge Translation activities to help facilitate the completion of reviews: providing software support for 9 different author teams; providing assistance with developing search strategies for 14 reviews; and performing full literature searches for 33 different reviews (both new reviews and updates).

The IBD/FBD group conducted a Cochrane Standard Author Training Workshop at the University of Western Ontario, London Ontario, 7-9 November 2014. There were 28 participants and seven trainers. Participants were very satisfied with the workshop and the average rating for the item 'The Workshop increased my knowledge of how to conduct a Cochrane review' was 4.9/5. Partners included the Cochrane Canada Centre, the Cochrane Statistical Methods Group, the GRADEing Methods Group, the University of Toronto and McMaster University.

KNOWLEDGE TRANSLATION ACTIVITIES

During this reporting period, members of the IBD/FBD Group gave five Cochrane presentations aimed at clinicians and consumer groups at local and international meetings, symposia and conferences. The largest of these presentations was the Cochrane Symposium at Digestive Disease Week (DDW) 2015. The Symposium, titled "The next wave of biologic agents for the treatment of IBD: Evidence from Cochrane reviews" took place on 17 May 2015 in Washington DC. The Symposium consisted of the following presentations:

- 1) Severine Vermiere. Selective leukocyte trafficking inhibitors for treatment of IBD.
- 2) Reena Khanna. Ustekinumab as a treatment for Crohn's disease.
- 3) William Sandborn. Immunogenicity of biologic agents and how to prevent sensitization.

The symposium was well received and approximately 1000 people attended.

Other presentations made by the IBD/FBD Group include:

- 1) Nilesh Chande. Evidence-based treatment algorithms for Crohn's disease and ulcerative colitis. City Wide GI Rounds, 10 September 2014, the University of Western Ontario, London, Ontario, Canada.
- 2) Nilesh Chande. Evidence-based treatment algorithms for Crohn's disease and ulcerative colitis. Fellows Teaching, October 7, 2014, St Joseph's Health Care, London, Ontario, Canada.
- 3) Segal D, Bhanji T, MacDonald J, Chande N. Alicaforsen for induction of remission in ulcerative colitis, a meta-analysis. Presented at Canadian Digestive Diseases Week 2015, February 27, 2015, Banff, Alberta, Canada.
- 4) Mosli M, Zou G, Garg S, Feagan S, MacDonald J, Sandborn W, Chande N, Feagan B. A systematic review and meta-analysis of non-invasive biomarkers for assessing disease activity in inflammatory bowel disease. Presented at American Gastroenterology Association Digestive Disease Week 2015, May 17, 2015, Washington, DC, USA.

During the period 1 September 2014 to 31 August 2015, members of the IBD/FBD Group published four Cochrane articles in the peer reviewed Gastroenterology Journals, Inflammatory Bowel Diseases and the American Journal of Gastroenterology:

- 1) Akobeng AA, Sandborn WJ, Bickston SJ, Chande N, Shackelton LM, Nelson S, Feagan BG. Tumor necrosis factor-alpha antagonists twenty years later: what do Cochrane reviews tell us? *Inflammatory Bowel Diseases*. 2014 Nov 20(11):2132-41.
- 2) Mosli MH, MacDonald JK, Bickston SJ, Behm BW, Tsoulis DJ, Cheng J, Khanna R, Feagan BG. Vedolizumab for induction and maintenance of remission in ulcerative colitis: a Cochrane systematic review and meta-analysis. *Inflammatory Bowel Diseases* 2015 May;21(5):1151-9.
- 3) Mosli MH, Zou G, Garg SK, Feagan SG, MacDonald JK, Chande N, Sandborn WJ, Feagan BG. C-Reactive Protein, Fecal Calprotectin, and Stool Lactoferrin for Detection of Endoscopic Activity in Symptomatic Inflammatory Bowel Disease Patients: A Systematic Review and Meta-Analysis. *American Journal of Gastroenterology*. 2015 Jun;110(6):802-19; quiz 820.
- 4) Chande N, Marshall JK, Seow CH, Sandborn WJ, Parker CE, Nelson S, Feagan BG. New applications for traditional drugs in inflammatory bowel disease: What do Cochrane reviews tell us? *Inflammatory Bowel Diseases* (in press August 2015).

Additional IBD/FBD group publications during the reporting period include:

- 1) Lam MCW, Fu N, Bressler B, Rosenfeld G. Vedolizumab for induction of remission in Crohn's disease in adults, a systematic review and meta-analysis. *Journal of Crohn's and Colitis* 2015;9: S227-8.
- 2) Wan Lam MC, Fu N, Rosenfeld G, Khanna R, Mosli MH, Bressler B, MacDonald JK, Levesque BG, Feagan BG). Vedolizumab for induction of remission in crohn's disease in adults, a systematic review and meta-analysis. *Gastroenterology* 2015;148(4 Suppl 1): S271-2.
- 3) Stewart MJ, Al-Darmaki A, Panaccione R, Kaplan G, Seow CH. Biologic therapies are effective in inducing and maintaining mucosal healing in ulcerative colitis: A systematic review & meta-analysis. *Gastroenterology* 2015;148(4 Suppl 1): S271.

Cochrane Musculoskeletal

COCHRANE REVIEW CAPACITY BUILDING & AUTHOR TRAINING ACTIVITIES

Cochrane Musculoskeletal is extremely active in reaching out to the rheumatology field. Peter Tugwell, the Coordinating Editor, is a continuous presence in national and international meetings and conferences to disseminate the results of Cochrane Musculoskeletal and engage with stakeholders. In the past year, he has participated in ten different events within the rheumatology and the rehabilitation community. The group has maintained the emphasis on the production of updates, and this approach has allowed doubling the number of updates compared to the previous year, demonstrating the switch of priorities has produced the desired outcome.

One of the global challenges is to ensure the relevance for stakeholders of Cochrane Reviews. The group has been engaging with key stakeholders in Canada and abroad to identify key knowledge gaps that can be addressed with new or updated Cochrane Reviews. Consumers are a pivotal part of this process to ensure that their needs are fully represented in the priorities of the group. As part of this effort, the Cochrane Musculoskeletal Group has set up a partnership with the James Lind Alliance for identifying knowledge gaps in joint replacement. We aim to reproduce this kind of initiative for other conditions: we will link with the initiative that IMHA is promoting in the area of fibromyalgia.

The Group has 201 authors from 24 different cities in Canada, located in the provinces of Alberta, British Columbia, Manitoba, Nova Scotia, Ontario, Québec and Saskatchewan. The Group provides a

wide range of support services to Canadian authors, from designing and running searches to methodological assistance. Recently, the group has developed a tool to monitor new trials published in top journals to inform authors of new trials in their area and set up a system to alert of the need of new updates. McMaster Plus identifies the trials and staff at the Musculoskeletal Group assigns the studies to the reviews. Automatically, the contact author gets a message alert of the availability of the new study.

KNOWLEDGE TRANSLATION ACTIVITIES

Working with patients is a key component in Musculoskeletal Group activities. The group's consumer panel is extremely active; their roles range from priority setting to commenting on reviews. There are 32 active patients in the Group.

Peter Tugwell is extremely active with the Canadian Rheumatology Association and other provincial rheumatology groups and serves on several committees. He is also a convenor of the Outcome Measures in Rheumatology (OMERACT) group, which aims to identify valid, responsive, feasible health outcomes through an evidence-based multi-stakeholder consensus process.

The Group has had a great deal of success with its social media strategy, currently with 2220 Twitter followers – an increase of more than 300 followers over the past 12 months. In addition, the Group sent out one electronic newsletter to its members. The newsletter highlighted Cochrane specific news, as well as highlighting year development within the group. Finally, the Group has improved the visual appeal of its website and upgraded to the new branding of Cochrane. The site was also redesigned to improve ease of navigation. The website had 18,345 page views over the last year, a figure that is up 6.5% per cent. The majority of website visitors are from Australia (20%), United States (17%) and Canada (15%).

During this period, Cochrane Musculoskeletal reviews have been cited 43 times in 33 different guidelines and management recommendations on musculoskeletal conditions.

Cochrane Upper Gastrointestinal (Upper GI) and Pancreatic Diseases (UGPD)

COCHRANE REVIEW CAPACITY BUILDING: AUTHOR TRAINING ACTIVITIES

The UGPD Review Group ran a three-day author training workshop with 18 participants. Participants travelled from across Canada, the United States, Japan and Uruguay. Cochrane symposia were run at major international gastroenterology conferences (United European Gastroenterology Federation in Amsterdam and Digestive Disease Week in San Diego).

The UGPD Group supports authors daily by responding to an average of five requests per day for direct software, statistical and methodology support. The number of UGPD authors has grown from 738 to 813 (78 to 89 Canadian authors, 255 to 273 authors from developing countries) over the past year. The Group completes an average of four literature searches per month for new or updated reviews.

KNOWLEDGE TRANSLATION ACTIVITIES

Three consumers are actively involved with the UGPD Group. They routinely contact relevant patient organizations to form links and share information, in addition to authoring promotional material. They also peer review all protocols and reviews published by the UGPD Group.

The UGPD Group engages with relevant national and international associations regarding the scope and timing of Cochrane Reviews and is currently working with the Canadian Association of Gastroenterology to map content of both organizations to identify priority topics.

The UGPD Group promotes its work and publications through Twitter (473 followers) and its website.

Two reviews published by the UGPD group this past year were newsworthy. In July the review titled “*Helicobacter pylori* eradication for the prevention of gastric neoplasia” was published and garnered significant press coverage on over forty websites including Forbes, BMJ, and a variety of other specialist sites.

Another review titled Early routine endoscopic retrograde cholangiopancreatography strategy versus early conservative management strategy in acute gallstone pancreatitis, was the most cited review published by the UGPD group in the past year. This review was cited 10 times in 2014.

Putting Evidence into Practice: The Application of Knowledge

Cochrane Canada's Knowledge Translation (KT) activities involve our 26 partner organizations representing healthcare professional associations, health policy, health research, health and safety and consumer organizations. This year we were pleased to welcome another partner organization, the Canadian Association of Paediatric Surgeons Evidence-Based Resource.

Knowledge Translation (KT) strategies at Cochrane Canada bridge the gap between research evidence, applying the best available evidence to practice and using the many Cochrane resources available. We continue to give face-to-face presentations and our webinars have attracted participants from across Canada and internationally. Cochrane Canada also provides regular Cochrane Corner updates and collaborates on projects with our partner organizations.

Dietitians Peer Review Project

Although the dietitians' peer review project was launched over two and a half years ago, the three online modules, developed by Cochrane Canada and the Dietitians of Canada, remain a resource for dietitians to increase their understanding and confidence in knowledge synthesis and use of Cochrane Reviews. Many dietitians continue to complete the modules and request becoming involved as peer reviewers. Eighteen Cochrane Review Groups now have dietitian peer reviewers as a result of this project.

Cochrane Canada participates in Canadian Chiropractic Association PBRN (Practice Based Research Network) Project

The Canadian Chiropractic Association invited representatives from four areas: researchers, practitioners, stakeholders and the public to participate in their Canadian Chiropractic Guideline Initiative project "Creating a Chiropractic PBRN (Practice Based Research Network): Enhancing the management of musculoskeletal health" which was initiated in December 2014. The purpose of this project was to establish a network of chiropractic clinicians and researchers across the country. PBRNs are founded on an integrated knowledge translation framework and participatory approach to enhance the uptake of research in practice and over time create systems change.

Cochrane Canada participated in discussions to assist bringing together researchers and groups of clinicians so clinical and organizational questions could be asked and answered, ultimately reducing the gap between research and practice and improving service delivery. Knowledge translation strategies to identify the opportunities and challenges of tailoring and implementing interventions were examined. Input from this meeting is now being used to start regional PBRNs and has been highlighted at the 2015 Canadian Chiropractic Association Convention and Trade Show.

Knowledge translation webinars and presentations

This year, Cochrane Canada coordinated and hosted a five-part series of webinars in conjunction with the Cochrane Policy Liaison Office (CPL0), aimed at policy-makers, to promote the use of evidence. These five webinars included Health Systems Evidence, Rapid Response Program, Stakeholder Dialogues, Citizen Panels and the Health Systems Learning Program with a total of 453 participants. In addition, there were 641 on demand YouTube views.

Cochrane Canada continues to work with partner organizations to develop and present webinars tailored to the organizations' members. Other webinars were developed in collaboration with two partner organizations. The Canadian Dental Hygienists Association webinar informed members how to access and use the numerous Cochrane resources available in "Everything you wanted to know about Cochrane Resources, but were afraid to ask!" The Canadian Physiotherapy Association and Cochrane Canada also developed "Navigating the best evidence for neck pain", which was presented by Nadine Graham, a physiotherapist and Cochrane author. Over 200 members joined these two webinars.

Although webinars are a popular way to communicate healthcare evidence, over 250 people attended face-to-face presentations which were given to groups of healthcare professionals, healthcare undergraduate and graduate students, and consumers in the community and at conferences.

Consumers disseminating and using Cochrane

Consumers are passionate about informing others about Cochrane and continue to play an important role in disseminating Cochrane resources in their communities. The input from a consumer workshop held the previous year, "Consumers Communicating Cochrane Reviews: developing a standardized knowledge translation (KT) program to be delivered by consumers", this year moved forward with Cochrane Canada and Canadian consumers together completing the development of a consumers standardized knowledge translation presentation.

Often, consumers find themselves speaking to audiences from a variety of backgrounds and disciplines. The consumers standardized KT presentation provides consumers with the information needed to present to a wide variety of audiences on Cochrane resources. The new Cochrane branding and website navigation information has been integrated into the presentation format. The slide deck is divided into eight sections, with instructions for presenters on how the content can be used. Depending on the audience and the time allotted, consumers can choose to use all slides or tailor their presentation to their specific audience. Consumers are now beginning to use this presentation. Feedback on how it is used as a consumer resource and perceived by audiences will be gathered. The presentation will then be further refined to meet the consumer and audience needs.

This spring at the Cochrane Canada 12th Annual Symposium, "Reaching New Heights, Measuring Success", in Calgary, Alberta, 21-22 May 2015, a consumer round table was held. The discussion focused on "Enhancing consumer involvement in Cochrane Canada". Over the last 10 years, Cochrane Canada has benefited from the involvement of consumers disseminating information about Cochrane Reviews and resources across Canada. As Cochrane in Canada plans for future funding, the opportunity was ripe to review past consumer involvement and explore what future consumer involvement could look like. The discussion acknowledged strengths such as consumer diversity, tenacity and expertise as well as the support provided to consumers by Cochrane Canada staff. It also looked forward to future opportunities such as the need to develop a formal consumer recruiting process and mentoring program. These are promising avenues to increase consumer involvement.

Ten consumer stipends were awarded, providing assistance for Canadian consumers to attend the symposium. Following the symposium, three consumers collaborated on writing articles that were published in the Arthritis Research Canada, Fall 2015 newsletter <http://www.arthritisresearch.ca/fall2015-ihavearthritis/consumers-as-partners>, the Canadian Arthritis Patient Alliance (CAPA) <http://www.arthritispatient.ca/> and <http://www.arthritispatient.ca/news/september-2015/>. These articles described their symposium experience and the need to support Cochrane Canada as it works to secure new funding.

Partners Teleconference

On 24 February 2015 Cochrane Canada Partners held their annual teleconference. This teleconference is an opportunity for partner organizations to reconnect with Cochrane Canada and with each other. It is a platform to update and share information about initiatives over the past year, how Cochrane resources are used and ways for the Cochrane Canada to meet our partners needs and continue to work together to support evidence-based health care. Partners shared their organizations news and updates including organizational changes, use of Cochrane resources, dissemination of Cochrane Reviews to members through social media and postings on the Partners Page.

This year an update on Cochrane Canada funding was provided to our partner representatives. The past five year Canadian Institutes of Health Research (CIHR) grant has supported the production of 332 new or updated reviews, trained 2896 people, increased Canadian author involvement to over 2000 individuals, led 97 knowledge translation activities and 35 evidence-into-policy workshops.

It was explained to our partners that the mechanism for the directed grant competition was under review by CIHR and Cochrane Canada was advised it would not be allowed to submit a directed grant application. This decision was not based on Cochrane Canada's performance. CIHR has praised our work many times referring to Cochrane as "a vibrant organization, internationally-recognized for its excellence, and committed to engaging patients in its important work;" and they noted the value of our "knowledge translation activities and the quality of [our] synthesis products." In 2013 CIHR awarded Cochrane Canada the prestigious CIHR Knowledge Translation Award, for "Leadership in promoting evidence-based health care".

Cochrane Canada's partners were supportive of Cochrane's plans to secure future funding and agreed they would advocate for Cochrane Canada's continuation.

Cochrane Corners

Cochrane Corners are a knowledge translation strategy used to disseminate Cochrane Reviews to members of organizations. Cochrane Canada collaborates with the organization to develop a search strategy for new and updated relevant reviews. The partner organization develops a dedicated area on its website to host the Cochrane Corner highlighting these reviews.

Seven Cochrane Corners have provided links to 272 Cochrane Reviews over the past year for a wide range of knowledge users, including government, research, health professionals, and consumer organizations. These reviews are valuable tools for knowledge translation in the field.

Cochrane Corner reviews from the past year can be found on the following organizations' websites:

- Speech-Language Audiology Canada (23 reviews posted. The Corner is found in the members' only section of their website)
- Canadian Chiropractic Association (101 reviews posted)
- CIHR Institute of Gender and Health
- CIHR Institute of Infection and Immunity (100 reviews posted)
- CIHR Institute of Musculoskeletal Health and Arthritis (Oral Health section: 17 reviews posted), (Back Review Group and Musculoskeletal Review Group associated with IMHA: 4 reviews posted)
- National Eating Disorder Information Centre (10 reviews posted)
- Canadian Pre-hospital Evidence Based Protocols (17 reviews posted)

Communicating the Evidence: Promoting the use of Cochrane Reviews

One of the main goals of Cochrane Canada is to promote awareness, access and use of Cochrane Reviews in Canada. Cochrane Library houses over 6000 Cochrane Reviews on the effects of health treatments, and it is important that the conclusions of these reviews are disseminated so policy-makers, health practitioners, patients and health consumers can use this information to make the best decisions regarding health treatments. Cochrane Canada endeavours to communicate the work and messages of Cochrane and Cochrane Canada through various platforms and tools which are outlined below.

Cochrane Canada and CIHR Joint Communications Plan

While the Cochrane Canada Centre (CCC) and the Canadian Institutes of Health Research (CIHR) have been working together informally on communications initiatives over the past few years, a formal strategy was prepared and launched in January 2013. The CCC Communications Specialist, Alicia D'Aguiar works with Andrew McColgan, CIHR Public Affairs Officer, to implement this joint communications strategy to raise awareness among Canadians and CIHR researchers of Cochrane and Cochrane Library as a source of high-quality evidence for health research and healthcare decision-making. The CCC and CIHR share the goal of providing the best available evidence to Canadians to help them make informed decisions about their health and health care. The plan intends to reach Canadians in general, CIHR Researchers, and the media.

KEY MESSAGES

- Cochrane is an international network of researchers and consumers that produce systematic reviews of research studies, known as Cochrane Reviews, which aim to help healthcare providers, patients or anyone concerned with their health make informed decisions.
- Cochrane Reviews are published in Cochrane Library, which represents a valuable resource for Canadians, healthcare providers, health researchers, and media across Canada.
- Canada participates in Cochrane through Cochrane Canada, funded by the Canadian Institutes of Health Research as part of its mandate to translate knowledge into better health and health care for Canadians.

Utilizing the existing tools of both the CCC and CIHR (websites, social media platforms including Facebook, YouTube and Twitter, newsletters, and media lists) the groups have:

- Created a new page on the CIHR website that promotes Cochrane and highlights reviews published in Cochrane Library and training opportunities (<http://www.cihr-irsc.gc.ca/e/45333.html>)
- Promoted selected Cochrane Reviews on the CIHR Facebook pages – Health Research in Canada and Show me the Evidence - and on the CCC Facebook page and other social media (three-four reviews per month).

- Prepared and distributed special pitches involving selected Cochrane Reviews and CIHR researchers to Canadian media, and in the process promote Cochrane Library as a source of information for media (one-two pitches per month).
- Promoted Cochrane Canada training opportunities, such as the Cochrane Canada Live webinar series, to CIHR researchers (ongoing).

PROMOTING THE USE OF COCHRANE REVIEWS IN CANADA

Below are the tools the CCC uses to promote awareness, access and use of Cochrane Reviews.

Communication tools 1 Sept 2014 – 31 August 2015		
Social media	Website	www.ccc.cochrane.org 70, 000+ unique visitors (increase of 35%)
	Twitter page	www.twitter.com/CndCochraneCtr 2569 followers (increase 45% since 2014)
	Facebook page	www.Facebook.com/CanadianCochraneCentre 1115 followers (increase by 35% since 2014)
Newsletters	Relay Cochrane!	<ul style="list-style-type: none"> • An e-newsletter, published quarterly • Includes Cochrane news updates and highlights of recent Cochrane Review • 4150 Canadian subscribers
	Training and Events	<ul style="list-style-type: none"> • An e-newsletter, published biannually • Promotes upcoming training opportunities and highlights past training events • First issue published August 2012 • 1672 Canadian subscribers
	Cochrane Canada Connect	<ul style="list-style-type: none"> • An e-newsletters, published monthly • Distributed through the three lists: CC Update, CC Talk, and CC Stakeholders • Covers press releases, news relevant to Canadian, training information and funding updates • 1757 Canadian subscribers

Increasing Awareness of Cochrane Library

In 2015, 12 press releases were sent out about reviews publishing in Cochrane Library garnering 612 media clips across 31 countries.

The top 10 most popular stories are below, as you can see there is a notable trend for the reviews publicised individually through the Publish When Ready (PWR) model to have done much better in terms of volume of coverage.

Cochrane media attention from around the world

Headline	#Clips	Issue/PWR
Hormone Replacement Therapy for postmenopausal women: Does it help or harm your heart?	244	PWR
Antiseptic prevents deaths in newborns	87	PWR

New health evidence gives women informed choice in the stress urinary incontinence surgery debate	77	PWR
Larger-sized portions, packages and tableware lead to higher consumption of food and drink, Cochrane review finds	61	PWR
“Is eating for two” a good idea? Maintaining a healthy weight during pregnancy helps mother and baby	39	PWR
Targeting the strain of bacteria that causes ulcers may help prevent stomach cancer	32	PWR
New evidence helps health workers in the fight against Ebola	27	PWR
Teaching children in schools about sexual abuse may help them report abuse	23	PWR
Effect of natural sweetener Xylitol in preventing tooth decay still unproven	22	PWR

The UK has the most coverage of stories, followed closely behind by the US.

2015 Rank	2014 Rank	Country	# 2015 clips
1	2	United Kingdom	259
2	1	United States	186
3	3	India	13
4	4	Australia	6
5	=5	Italy	5
=6	10	New Zealand	3
=6	11	Ireland	3
=6	12	South Africa	3
=6	13	Singapore	3
=7	=5	Germany	2
=7	6	France	2
=7	7	Spain	2
8	8	Canada	1

Outlets with the most coverage:

2015 Rank	2014 Rank	Media Outlet Name	# Stories
1	2	Medical News Today	6
2	3	Twitter	5
=3	=16	Daily Mail	4
=3	1	Science Daily	4
=3	=4	Article.wn.com	4
=4	=8	Topix	3
=4	=4	Medscape	3
=4	=8	MedicalXpress.com	3
=4	=4	Sciencenewslne	3
=5	=4	Reuters	2
=5	=8	Bioportfolio	2

A selection of coverage highlights:

- **The Guardian:** [New evidence helps health workers in the fight against Ebola](#)
- **The Independent:** [New evidence helps health workers in the fight against Ebola](#)
- **The Lancet:** [New evidence helps health workers in the fight against Ebola](#)
- **Bbc.co.uk:** [Hormone Replacement Therapy for postmenopausal women: Does it help or harm your heart?](#)
- **Australian Doctor:** [Hormone Replacement Therapy for postmenopausal women: Does it help or harm your heart?](#)
- **Business Standard:** [Hormone Replacement Therapy for postmenopausal women: Does it help or harm your heart?](#)
- **Daily Mail:** [Hormone Replacement Therapy for postmenopausal women: Does it help or harm your heart?](#)
- **The Telegraph:** [Hormone Replacement Therapy for postmenopausal women: Does it help or harm your heart?](#)
- **Thomson Reuters - UK – Online:** [Teaching children in schools about sexual abuse may help them report abuse](#)
- **Huffington Post -** [Teaching children in schools about sexual abuse may help them report abuse](#)
- **The Times of India:** [“Is eating for two” a good idea? Maintaining a healthy weight during pregnancy helps mother and baby](#)
- **Daily Mail:** [New health evidence gives women informed choice in the stress urinary incontinence surgery debate](#)

Cochrane Events

12th Annual Cochrane Canada Symposium: *Calgary, Alberta, Canada*

Earlier this year, on 21-22 May, Cochrane Canada held its 12th Annual Symposium at the Hotel Alma, located on the University of Calgary campus. This year we saw 105 attendees, which soared to 170 on the morning of 21 May from a joint meeting with representatives from the Core Outcome Measures in Effectiveness Trials (COMET) Initiative.

This year's theme was Reaching New Heights, Measuring Success. We had 13 poster abstracts, including 3 student submissions, as well as 31 oral abstract presentations, and 7 workshops. Topics covered included social media's role in Cochrane Reviews; information sharing with Canada's aging population; and uncertainty in policy decision-making. While the overall tone of the Symposium focused on our core funding issues the general consensus of attendees was positive in that Cochrane is a necessity in Canada and something must be done to ensure the presence of the Cochrane for years to come.

The 2014 Cochrane Review of the Year was announced during the closing remarks, this year's winner was Dawn Stacey for her review, "Decision aids for people facing health treatment or screening decisions". The 2015 Student Poster Award was also announced, awarding David Herrmann for his poster, "The Use of Methodological Quality Measures in Clinical Specialties".

We'd like to offer special thanks to our Regional Site at the University of Calgary, and Dr Roger Thomas. As well, a generous thank you to our sponsors: Knowledge Translations Platform Alberta SPOR Support Unit; Medlior Health Outcomes; and Wiley.

Impact of Cochrane in Canada

Cochrane Back and Neck

Cochrane Back and Neck (CBN) reviews have been used in many guidelines, technical reports and decision tools and they are documented on the CBN website [here](#). Most recently the following resources have used CBN reviews:

1. Chou R, Hashimoto R, Friedly J, Fu Rochelle, Dana T, Sullivan S, Bougatsos C, Jarvik J. Pain Management Injection Therapies for Low Back Pain. Technology Assessment Report ESIB0813. (Prepared by the Pacific Northwest Evidence-based Practice Center under Contract No. HHS 290-2012-00014-I.) Rockville, MD. March 2015. Agency for Healthcare Research and Quality.
References CBRG reviews:
Injection therapy for subacute and chronic low-back pain (*Staal 2008*)
Radiofrequency denervation for neck and back pain (*Niemisto 2003*)
2. Chou R, Deyo R, Devine B, Hansen R, Sullivan S, Jarvik JG, Blazina I, Dana T, Bougatsos C, Turner J. The Effectiveness and Risks of Long-Term Opioid Treatment of Chronic Pain. Evidence Report/Technology Assessment No. 218. Rockville, MD: Agency for Healthcare Research and Quality. September 2014.
References CBRG reviews:
Non-steroidal anti-inflammatory drugs for low-back pain. (Roelofs 2008)
Opioids compared to placebo or other treatments for chronic low-back pain. (Chaparro 2013)

Cochrane Back and Neck (CBN) also released 2015 updated Methods guidelines in [Spine](#). These methods guidelines are in line with Cochrane methodologies and recommendations but provide guidance and context to authors in the back and neck pain field to help improve quality.

Cochrane Methods Bias (CMB)

The Cochrane Risk of Bias (RoB) tool has been a mandatory component of all Cochrane reviews since 2008. This tool falls under the remit of CMB. As a result, CMB is often consulted for clarification or input on difficult issues in assessing risk of bias. CMB is well aware of the need to keep the RoB tool current and expects to release a new version of the RoB tool within the next year.

The CMB provided a Canadian bilingual train-the-trainer workshop last year. Attendees ranged from five different provinces, from sites where Cochrane workshops had been offered in the past. Since the workshop was held in May 2014, six of the eight attendees have presented the RoB tool to a variety of audiences, either as part of a workshop, education session or lecture to students, allowing for a wider dissemination of the information.

A recent publication that CMB was involved with described the results of a survey about the use of certain components of the Cochrane Risk of Bias tool by Canadian and international review groups. These results will be useful in establishing priorities for future activities of the CMB.

CMB has worked with the Cochrane NRS for Interventions Methods Group to develop a tool to assess RoB for non-randomised studies in Cochrane reviews. The tool has been piloted, and training is

ongoing with CMB involvement. This new tool will provide a consistent mechanism to assess non-randomised studies, improving the quality of Cochrane reviews.

In response to a request from the Canadian Agency for Drugs and Technologies in Health, CMB prepared a short report addressing interventions targeting prescription drug abuse. The data for this report was collected from the RxforChange project which was previously supported by CIHR.

Members of CMB, including one of our convenors, have been very involved with the Core Competencies for Scientific Editors of Biomedical Journals project. This project, supported by Cochrane, is evaluating the current competencies of editors, followed by a needs assessment and Delphi process to set standards. The end product will include training modules to address the requirements of editors and hopefully improve the quality of all biomedical journals and publication sources.

As a Cochrane Methods Group, CMB regards other Cochrane Review Groups and authors as stakeholders. CMB continues to collaborate with other groups within the Cochrane Collaboration and meets regularly with local Ottawa groups to discuss progress, regional and international issues and activities. The majority of the author training has been done along with other Cochrane groups.

Cochrane Methods Equity

Cochrane Methods Equity has maintained an active partnership with the Institute of Gender and Health. In addition to managing the IGH Cochrane Corner, the group has collaborated with IGH on the development of a training module for peer reviewers of research applications involving primary data collection. There is planning for a joint workshop to explore the risk of bias from research that has not considered sex/gender.

In July, the Group prepared an editorial for a Cochrane Library special collection on Indigenous health in collaboration with the CIHR Institute of Aboriginal Peoples' Health, as well as Australia's National Health and Medical Research Council (NHMRC), and the Health Research Council of New Zealand (HRC).

In 2012, the Cochrane Equity Methods published a reporting guideline for systematic reviews with a focus on health equity (PRISMA-E 2012). Since its publication, PRISMA-E 2012 has been viewed over 16,000 times, downloaded almost 3000 times and cited more than 50 times. In 2016, an explanation and elaboration paper, providing more detailed guidance and examples of good reporting, will be published.

The Group is developing a reporting guideline or equity-focused randomized controlled trials (RCTs) with collaborators including: PAHO, the Committee on Publication Ethics, McMaster University, and Western University. This project will improve the transparency and reporting of RCTs with a focus on health equity.

Cochrane Methods Equity has received an operating grant to develop a reporting guideline for equity-relevant randomised controlled trials. This will be an extension to the CONSORT Statement and the project includes multiple methods studies, a methodology systematic review, key informant interviews, Delphi exercise, and finally a consensus meeting to finalize the reporting items to be included in the guideline.

Over the past year, the Group has been collaborating with the Public Health Agency of Canada. In addition to being invited to present on Equity Methods work at a research seminar, the Equity Group has received 3 small contracts from PHAC for projects including a rapid overview of systematic

reviews to assess the effectiveness of social media interventions for public health, and assessing whether the interventions in the best practices portal include equity considerations.

The Equity Methods Group has partnered with the GRADE Working Group to develop a series of papers addressing equity in the development of reporting guidelines. This paper series will be published in the *Journal of Clinical Epidemiology* and will cover: 1) question formulation, scope definition and guideline processes including engagement with stakeholders who represent disadvantaged groups; 2) evidence assessment and certainty; 3) going from evidence to recommendations; and 4) guideline implementation.

Cochrane Child Health

Cochrane Child Health is active in the area of partner initiatives. Field Director Dr Lisa Hartling leads a stream of research in methods for overviews of reviews, funded by a CIHR Operating Grant and New Investigator Award. This work led to four posters, two oral presentations and a workshop at the Hyderabad Colloquium in September 2014. As well, Dr Hartling is leading an author team revising the chapter on overviews of reviews for the Cochrane Handbook for Systematic Reviews of Interventions. Dr Hartling is also leading a working group for the Agency for Healthcare Research and Quality on rapid reviews and has published/presented extensively based on this work and was invited to lead a special session on this topic at the upcoming Vienna Colloquium. The special session will involve speakers from numerous organisations and agencies, including Cochrane and Cochrane Innovations.

Cochrane Child Health received funding from Alberta Innovates-Health Solutions to carry out a project exploring the use of social media to disseminate child-relevant Cochrane evidence. This was a six-month project in which Field staff posted weekly posts to the Field's blog, each highlighting a particular review or overview of reviews, and then publicized the posts through the Field's Twitter account.

Cochrane Child Health invests considerable resources supporting physicians and trainees to be authors of Cochrane reviews. Typically these individuals come to the Field because they have identified a topic that they feel is important for practice, where they have identified that a systematic review is not currently available. The Field then provides methods, statistical and/or searching assistance in completing the review. The overall goal for the Field in providing this support is increasing the body of child-relevant evidence in the Cochrane Library and building capacity among child health practitioners to produce and interpret Cochrane systematic reviews.

Dr Hartling is Co-Principal Investigator on a CIHR Knowledge to Action grant to develop and evaluate KT tools (e-books and whiteboard animation) for croup and gastroenteritis, based on Cochrane reviews.

During this period the Field received funding from Alberta innovates-Health Solutions to use and evaluate social media as a way to engage healthcare consumers. Our purpose of engagement is to gather information from parents on what they consider to be important outcomes – this is important to inform primary research and systematic reviews. This work was presented at the KT Canada and COMET meetings and has been accepted at the Vienna Colloquium. Work on the second stage of this project is ongoing.

Cochrane Child Health completed a project to identify a sample of child-relevant systematic reviews published in the Cochrane Library and in other journals and surveyed the authors with the intent of understanding why authors choose to conduct and publish reviews in Cochrane vs. non-Cochrane journals, with the goal being to establish how the Cochrane Library can overcome any barriers to

making itself the “go-to” source for child-relevant evidence. The results are being presented at the Vienna Colloquium.

Dr Hartling supervises several graduate students working in the Field’s areas of methods research and knowledge translation of child-relevant evidence:

- Michelle Foisy, funded by KT Canada and an a AIHS Graduate Studentship (overviews methods)
- Lauren Albrecht, funded by AIHS Graduate Studentship and a WCHRI Studentship (developing consumer KT tools)
- Kassi Shave, MaTCH program (University of Alberta), WCHRI (KT tools for parents)
- Sanja Schreiber, post-doctoral fellow (updating Cochrane reviews; technologies to increase efficiencies in review conduct)

Cochrane Effective Practice and Organisation of Care (EPOC)

The Effective Practice and Organisation of Care Group was engaged in August 2014 to provide a scoping review to the World Health Organisation (WHO) on recent evidence on non-clinical interventions to reduce unnecessary C-sections. This work has been disseminated at two international conferences in 2015 (both held in Canada) and will feed into the next update of this EPOC priority review slated for early 2016.

Cochrane Hypertension

Cochrane reviews on hypertension are included in many international clinical guidelines for the prevention and treatment of hypertension (for example NICE in the UK) and/or cardiovascular disease, but unfortunately not in the corresponding Canadian clinical guidelines.

Authors and editors with the Cochrane Hypertension group have collaborated with colleagues around the world in using data from Clinical Study Reports (CSRs) in Cochrane reviews, which provides a more complete overview of the evidence. These efforts are on-going.

The Canadian author base of the Cochrane Hypertension group has continued to grow steadily. The group has partnered with the Therapeutics Initiative at the University of British Columbia in special projects aimed at building capacity for conducting systematic reviews, as well as knowledge translation projects aimed at building capacity in health professionals to use evidence from systematic reviews in clinical decision-making.

The Thomson Reuters Web of Science impact factor for the Cochrane Hypertension group in 2014 was 7.571 (14 publications cited 106 times), placing Cochrane Hypertension in the top 10 hypertension journals world-wide (for example the journal ranked 10th in this category, *Journal of Hypertension*, had an impact of 4.720 and the median impact factor in this category was 2.632). More importantly, the 4 most cited Cochrane Hypertension reviews in 2014 were also among the most significant reviews (or updates) published by the Cochrane Hypertension group in 2014: Pharmacotherapy for mild hypertension, Effect of cocoa on blood pressure, Beta-blockers for hypertension and Effect of longer-term modest salt reduction on blood pressure.

Cochrane IBD/FBD

During the funding period (1 September 2010 to 31 August 31 2015), 19 international organizations have used IBD/FBD reviews to inform 43 treatment guidelines for Crohn's disease, ulcerative colitis, chronic constipation, Clostridium difficile, and colorectal cancer surveillance in patients with IBD. These international organizations include: the Canadian Association of Gastroenterology, the Canadian Paediatric Society, the American College of Gastroenterology, the European Crohn's and Colitis Organisation (ECCO), the British Society of Gastroenterology, the Danish Society of Gastroenterology and Hepatology, the Italian Society of Gastroenterology, the New Zealand Society of Gastroenterology, the World Congress of Gastroenterology, the National Institute for Health and Clinical Excellence (NICE), the European Society of Pediatric Gastroenterology, Hepatology and Nutrition (ESPGHAN), the German Society of Gastroenterology, the Scottish Intercollegiate Guidelines Network (SIGN), the Korean Society of Gastroenterology, the Japanese Society of Gastroenterology, the Australasian Society for Infectious Diseases, the Cancer Council of Australia and the World Health Organization (WHO).

During the reporting period 1 September 2014 to 31 August 2015, four international organizations used IBD/FBD group reviews to inform treatment guidelines for ulcerative colitis, Crohn's disease, irritable bowel syndrome, and colonoscopy surveillance for dysplasia and colorectal cancer in IBD patients. These international organizations include: the Canadian Association of Gastroenterology, the Danish Society of Gastroenterology and Hepatology, the German Society of Gastroenterology, and the National Institute for Health and Clinical Excellence (NICE).

The 2014 CRG Impact Factor for the Group is 8.545 (11 publications cited 94 times) placing it at number 8 out of 53 Cochrane review groups. This impact factor is the highest amongst Canadian-based review groups and compares favourably to the Cochrane Database of Systematic Reviews (6.032) and to other journals in its category including the Gastroenterology and Hepatology (2.531), Gastroenterology (16.716), Canadian Journal of Gastroenterology (1.981) and Inflammatory Bowel Diseases (4.464).

Reviews published by the Inflammatory Bowel Disease and Functional Bowel Disorders Group were accessed in full-text format on average 335 times during 2014 (109 articles accessed 36,484 times).

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