RESOURCE PACK D:
FOR REVIEW AUTHORS
UPDATING AN EXISTING COCHRANE REVIEW

Cochrane Consumers & Communication Review Group

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COCHRANE CONSUMERS AND COMMUNICATION REVIEW GROUP

Resource Pack D: For Review Authors Updating an Existing Review

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BACKGROUND

CHAPTER 1: CONSUMERS AND COMMUNICATION REVIEW GROUP SCOPE

The Cochrane Consumers and Communication Review Group, established in 1997, is responsible for coordinating the production of systematic reviews of interventions which affect consumers' interactions with health care professionals, services and researchers. We focus particularly on interventions directed to improving communication and information provision, such as interventions to assist people make decisions about treatment. For this Group, an intervention may be a specific 'thing', such as an informational pamphlet or video, or it may be a set of purposeful activities that have a clear, common aim.

Our research is relevant to people who must make decisions about health and health care, for example, individuals planning their health care, or policy makers in government.

Our main work is to coordinate the production of systematic reviews for publication on *The Cochrane Library*, and to support researchers around the world while they are preparing a systematic review. The key components of the Group are:

- The staff at the editorial base
- An international editorial team
- Authors and referees for the Group
- Interested members of the Group
- Subscribers to *The Cochrane Library* and people interested in the work of the Cochrane Collaboration.

On *The Cochrane Library*, the output of the Cochrane Consumers and Communication Group is available in two formats: protocols, and completed systematic reviews. A protocol for a systematic review describes the rationale, objectives, and methods for the proposed review. Before publication, a systematic review that is in development is known by its title.

For more information about the Review Group please visit our website:
http://cccrg.cochrane.org/

CHAPTER 2: THE REVIEW TEAM (including task list)

> *See the Cochrane Handbook for Systematic Reviews, chapter 2.3*

Whilst enthusiasm and time are the first essential qualities in a review author, each needs to combine knowledge about the topic in which s/he is interested with a willingness to apply methodological rigour to the review process. This combination of qualities rarely exists within a single individual. More often, it will be necessary to arrange partnerships, to try to ensure that content and methodological expertise are both applied in preparing reviews. Such partnerships are generally preferable to working alone, even when both partners possess both types of expertise, to ensure the reproducibility of the judgments that are necessary in preparing reviews. One author will sometimes miss something that the other will pick up. It is also very likely that they will complement each other in various ways, and it is often more fun to work with someone else.

The majority of the guiding principles of the Cochrane Collaboration further support the policy of the Group which requires that reviews are undertaken by not less than two people. The principles also provide a basis upon which teams of authors can base their interaction and work together.

Principles

The Cochrane Collaboration's work is based on ten key principles:

- Collaboration, by internally and externally fostering good communications, open decision-making and teamwork.
- Building on the enthusiasm of individuals, by involving and supporting people of different skills and backgrounds.
- Avoiding duplication, by good management and co-ordination to maximise economy of effort.
- Minimising bias, through a variety of approaches such as scientific rigour, ensuring broad participation, and avoiding conflicts of interest.
- Keeping up to date, by a commitment to ensure that Cochrane Reviews are maintained through identification and incorporation of new evidence.
- Striving for relevance, by promoting the assessment of healthcare interventions using outcomes that matter to people making choices in health care.
- Promoting access, by wide dissemination of the outputs of the Collaboration, taking advantage of strategic alliances, and by promoting appropriate prices, content and media to meet the needs of users worldwide.
- Ensuring quality, by being open and responsive to criticism, applying advances in methodology, and developing systems for quality improvement.
- Continuity, by ensuring that responsibility for reviews, editorial processes and key functions is maintained and renewed.
- Enabling wide participation in the work of the Collaboration by reducing barriers to contributing and by encouraging diversity.

Membership of a Cochrane group is not based on formal qualifications. There are no membership fees. The key requirements are that authors:

- have suitable skills (and willingness to learn new ones)
- can volunteer some time over an extended period
- work as part of a team
- support the aims of the Collaboration
- share the Collaboration's spirit of goodwill

People often express an interest in becoming involved in specific reviews where titles have already been registered with the group. We are very happy to let the existing authors know of other people who are interested in their review. If the protocol is at an early stage, it may be possible to collaborate with them on the topic. However, sometimes participation as a co-author will not be feasible, particularly if a protocol has already been published, as authors will be at a point where it is not easy for them to accommodate a further author. The ultimate decision about who should join a review group as a co-author is made by the people undertaking the review, not by the Consumers and Communication Group editors. However, we are always keen to enlarge our register of potential referees for reviews, so if you have an interest and expertise in a particular subject area please let us know.

If you have not identified any potential co-authors, we may be able to put you in touch with interested parties.

The Group strongly recommends that each review team includes people with content, methodological, and statistical expertise relevant to the review, preferably with an experienced Cochrane review author.

Once you have established a review team or become part of a review team, there are several guidelines that may be useful in ensuring that the team work efficiently and effectively together:

- One person takes overall responsibility for the review called the lead or contact author. The lead author will be the person who liaises with the Managing Editor and Contact Editor.
- Each member of the review team should be given an outline, including a timeline, of all the tasks that need to be undertaken as part of the preparation of the review. (See below for a generic task list).
- Authors need to be mindful that each member of the review team has different levels of funding and different amounts of time available to put into the review. The work should be divided amongst authors based on an explicit understanding of how much each author can contribute.
- A review requires many different types of expertise. Roles should be explicitly determined and allocated.
- Timelines should be followed, and deadlines kept as far as is possible, and authors should let each other and the review group’s Managing Editor, know when they can’t make a deadline.
- Authorship, and in particular lead authorship, should be based on contribution to the review.

- Communication should be timely, honest and respectful.
- It can be helpful for a review team to have regular meetings, either face-to-face or by telephone, as geography and resources permit.
- Review teams may be flexible; it is quite acceptable for authors to leave and join the review team at any time, bearing in mind the points made above.

Task list for update of a Cochrane review

This template is a guide which should be tailored to your own review. You may wish to add or remove tasks, and to reorder tasks (minimally) to suit your particular circumstances.

This task list may also assist you in determining the appropriate order for authors in the review citation.

Task	**Person(s) responsible**	**Timeframe/Deadline**
Divide tasks between authors of review		
Critically review the existing review, considering whether and where changes might be needed (see chapter 2 of Resource Pack D) before the update commences. **NOTE: any substantial changes to methodology and/or inclusion criteria must be approved by the Review Group's editors before the update proceeds.** It may be necessary to prepare, in effect, an amended 'protocol' for the review update, in a Word document.		
Update study selection and data extraction forms (depending on any changes needed before update commences)		

Task	Person(s) responsible	Timeframe/Deadline
Search electronic databases ***NOTE: You must contact the Review Group's Trials Search Coordinator (TSC) (j.kis-rigo@latrobe.edu.au) before commencing the searches for your update, so that the search*** *strategies can be checked.* • Consumers and Communication Group specialised register (refer to TSC of Review Group) • Other databases (MEDLINE, EMBASE, CENTRAL, PsycINFO, trials registers, other)		
Keep audit trail and organise search results from separate databases into reference management software.		
Identify potentially relevant studies from titles and abstracts of search results (at least two independent review authors)		
Obtain full text articles of potentially relevant studies		
Search citation references of identified papers for extra trials (at least two independent review authors)		
Conduct handsearching of relevant journals (if appropriate)		
Contact experts to enquire about additional relevant trials		
Collate decisions on acceptance of trials into the review; coordinate discussions if disagreement arises		
Locate and contact authors of included studies to obtain any missing information		
Complete table of excluded studies		
Assess risk of bias in included studies (at least two independent review authors). NOTE: this may require revisiting previous studies.		
Write-up section "Risk of bias of included studies"		
Extract/tabulate characteristics of included studies (incl. quality assessment of		

Task	Person(s) responsible	Timeframe/Deadline
interventions) (at least two independent review authors)		
Extract data and conduct synthesis of results (incl. meta-analysis if possible) (at least two independent review authors)		
Create (or update) Summary of Findings table (using GRADEPRO software)		
Update “Results” section		
Update “Discussion” section and Author’s Conclusions (“Recommendations for Practice” and “Recommendations for Research”).		
Update Abstract and Plain Language Summary		
Finalise review for submission to Consumers and Communication Review Group (including review and feedback from co-authors, and completion of presubmission checklist		
Submit updated review to Consumers and Communication Review Group		
Revise review after editorial feedback and finalise review for publication		
Liaise with the Review Group about the next update to the review		*Commence approx. 18 months after review publication*

CHAPTER 3: RESOURCES FOR AUTHORS OF REVIEWS WITH THE COCHRANE CONSUMERS AND COMMUNICATION REVIEW GROUP

Your main resource in updating a review is the latest version of the *Cochrane Handbook*.

The following resources are tailored, or otherwise relevant, to authors of reviews with the Cochrane Consumers and Communication Review Group.

Cochrane Collaboration resources

Cochrane Style Guide	http://www.cochrane.org/training/cochrane-style-resource
Online training materials, recorded webinars & face to face workshops	www.training.cochrane.org
Please visit www.cochrane.org for other resources relevant to review authors.	

Consumers and Communication Group tailored resources

These are available on our website at http://cccrg.cochrane.org/author-resources.

- Data extraction template (note, authors must tailor the template for use in their own review/s)
- Quick guides on various methodological issues
- Study Design Guide
- Study Quality Guide
- Review Group Scope and Taxonomy of Outcomes
- Presubmission checklists, protocol and review stage

Other resources

- Quality assessment of the intervention – see Herbert and Bø, Analysis of quality of interventions in systematic reviews, BMJ 2005; 331; 507-9.
- Egger M, Davey-Smith G, Altman D. (2001). *Systematic Reviews in Health Care: Meta-Analysis in Context.* London: BMJ.

WHAT NEEDS UPDATING, AND HOW?

CHAPTER 4: WHAT TO DO NOW

To update your review you will need to make sure you have access to RevMan 5 and that you have set up your Archie user account:

1. Download and install **RevMan 5** software (see later in this Chapter).
2. Respond to the system-generated email to **initiate your Archie account** (new authors).
3. Set up RevMan so it can connect with the Archie server where reviews are stored.
4. Check your review file out of Archie and into RevMan. To do this open RevMan 5 > File > Check out.... Choose the review you wish to work on from those available to you in the list. ***Please remember to check in at the end of every work session***. *Note*: You can only check your review *in* to Archie from RevMan 5 if the version you edited was checked *out* from Archie. All previous versions of the review will be retained on Archie.
5. Prepare your review update within the RevMan 5 software; you will be commencing work on the last published version of the review which you are updating.
6. You can share versions with co-authors by checking it back into Archie and emailing your co-authors to let them know they can now view/check out your version in Archie. Please do not share versions of your review with co-authors by attaching RevMan files to emails.
7. When the review update is ready, submit it for editorial and peer review:
    - Use File > Check in to open the Check-in Wizard in RevMan 5.
    - Describe the version (e.g., 'your name' edits)
    - Check the 'Submit for editorial approval' and enter text in the 'Message to Cochrane Review Group' box to communicate with me about your submission. This replaces a message you would otherwise have sent in an email.
8. If necessary, in a separate Word document outline your response to each item of editorial feedback provided previously or any significant changes that have been made to the review and send it to your Managing Editor.
9. When you first submit your updated review to the Review Group, you also need to complete a review-stage presubmission checklist (available at http://cccrg.cochrane.org/author-resources) and email it to the Managing Editor.

Getting RevMan Software and an Archie Account

The Cochrane Collaboration uses software developed for its own purpose. You must use this software to prepare and submit your protocol and review. The software is free to Cochrane review authors.

Download the latest version of RevMan 5 software from the web at http://tech.cochrane.org/revman

When using RevMan, you will need an Archie user account to check your protocol in and out from Archie, the Collaboration's main server. We ask that you ***check in at the end of every work session*** to ensure that the most up to date version is always available online so you or your co-authors can access it wherever and whenever you need it, as well as to ensure there's no

confusion with version control. To request a user account go to http://archie.cochrane.org and select 'Request a user account'.

Connecting RevMan 5 to the online server Archie

To allow RevMan to communicate with the Archie online server you will need to do the following: Open up RevMan 5 and go to Tools/Preferences and then click on the 'connection' tab. Please choose the Archie server (not the test or training server), then type in your Archie username and password. If this is your own computer click 'save username and password when RevMan is closed', if it is a shared computer and you do this, other people who may be using RevMan may be checking in and out using your Archie user account. If you have problems gaining access you may need to contact your IT department to resolve any issues regarding the proxy address and port.

If you click on the other tabs under tools/preferences we also advise that you check for updates 'every session' and click on the warnings on the general page as well as making your choices on the spell checking tab.

RevMan training and support

A user guide and self-training exercise are available at which we recommend you work through before starting to work on your review update. These are available from the Help menu within RevMan. Other resources and documents are available at http://tech.cochrane.org/revman/documentation. RevMan training may form part of the training for review authors provided (usually at no charge) by regional Cochrane Centres. Visit http://training.cochrane.org/authors/workshops-and-training-events for more information.

Requests for technical and general support should be directed to the Managing Editor in the first instance.

CHAPTER 5: HOW SHOULD A COCHRANE REVIEW BE UPDATED

The aim of a Cochrane review is to assess systematically and thoroughly the best possible scientific evidence about the effects of a health care intervention(s). Everything about the review should aim to minimise the possibility of ending in a biased conclusion. This means:

- the conduct of the review and its analyses should follow clear, pre-specified criteria and with checks along the way
- it should be easy to understand
- any conflict of interest of the people doing the review should be declared
- effort must be made to find every possible study that might be eligible for the review
- the studies included in the review's final analyses should be ones which have as little bias in them as possible
- outcomes that are important to the consumers of the interventions must be considered - whether or not they have been measured by researchers - to avoid conclusions being based on a narrow picture
- the final review should follow the pre-specified criteria, addressing all the important issues originally raised, and highlight any issues and gaps in the information that should be addressed by researchers in future

Cochrane reviews are published on *The Cochrane Library*, can be commented on by anyone, and can be corrected or have new research added in future issues. It is re-issued four times a year

Updates

It is Cochrane Policy that reviews should either be updated within two years, or should have a commentary added to explain why this is done less frequently. Updated reviews reflect not only the emergence of new data but also valid criticisms of published reviews, whether solicited or unsolicited, from whatever source. Reviews may be updated, for example, in response to a comment or criticism lodged through the Comments and Criticism system available to those who view *The Cochrane Librar*y. This process would involve the Group's Comments and Criticisms Editor in the updating of the review. Reviews may also be updated in response to the discovery of new trials. If there are no new trials, and there have been no comments or criticisms added to your review, then it is sufficient to update you review simply by adding a statement to this effect.

It is becoming more common for new authors to undertake the update of an existing Cochrane review. If this is the case, please liaise with the Managing Editor about the level of contribution of the previous author team, and authorship of the review update. **You will also need the Managing Editor to provide you with access to the RevMan 5 file of the latest published version of the review, which you will update. For information about RevMan 5 see http://tech.cochrane.org/revman and please refer to the information in this document about setting up an Archie account as well as 'checking in' and 'checking out' your review using RevMan 5 and Archie.**

Adding new authors

Please ensure that the Managing Editor has the names, contact details and brief CVs of all new authors on the review update. Refer also to Chapter 6 of this Resource Pack for guidance on forming a new team of Cochrane authors. Authors of the previous iteration of the review, who are no longer involved in the review update, should be moved to the 'Acknowledgements' section.

Dealing with methodological changes and RevMan 5

In 2008, the Cochrane Collaboration released a major update of RevMan 5 software and the Cochrane Handbook (www.cochrane-handbook.org). **As a result, it is very important to note that in updating a review, you may need to revise extensively the review's methodology to address new Cochrane requirements and guidelines. This needs to be completed and approved by the Review Group BEFORE searches for the review update commence.**

For instance, features of Cochrane reviews introduced in 2008 include new methods for assessing and presenting the risk of bias of included studies (formerly 'methodological quality'), and a new way of presenting the main review findings, in Summary of Findings tables. These may require authors to revisit studies previously included in the review, to gather new data from them. There are also new recommended subheadings, and structural amendments and additions (such as Appendices). Updating the review is, therefore, not simply a matter of re-running old searches and adding the newly-identified studies.

So, before you start your update, you must:

- **Read section 3.4 of the Cochrane Handbook on "Considerations when updating a Cochrane review"**
- **Consider any need for a change in research question and selection criteria of the review (see Cochrane Handbook 3.4.3)**
- **Update the review methods to incorporate the Risk of Bias tool (see Cochrane Handbook chapter 8) and Summary of Findings table (chapter 11)**
- **Consider whether any other updates are needed to review methods (such as incorporating new statistical approaches that are now available)**
- **Discuss the search strategies with the Group's Trials Search Coordinator (note, strategies will need updating irrespective of whether the review's selection criteria have changed).**
- **Have all changes to methods and inclusion criteria approved by the Review Group, and changes to the search strategies approved by the Trials Search Coordinator, BEFORE you run the search strategies.**

GUIDELINES FOR UPDATING SECTIONS OF THE REVIEW

REVIEW INFORMATION

Title:

The name of the review should properly reflect the subject of the review, and it should be easy to understand. It should follow the standard Cochrane format outlined in the *Style Guidelines for Cochrane Reviews* (found at http://www.cochrane.org/training/cochrane-style-resource). Consider whether any amendment to the review title is indicated.

Review authors:

Update to reflect new authorship, including contact details, deciding whether previous authors who do not contribute to the update should be maintained or moved to 'Acknowledgements'. (See the Cochrane Handbook, section 4.2.2)

Sources of Support:
Update to reflect any changes (See the Cochrane Handbook, section 4.10).

What's New & History
Update these sections. Mention the date the review was updated, the number of studies newly included, and any change in the review's findings. For more guidance on completing these sections see sections 3.5 and 4.2.5 of the Cochrane Handbook.

TEXT OF REVIEW

Plain Language Summary:
Update this section to reflect any change in the review's findings. Ensure the Plain Language Summary meets Cochrane guidelines.

Refer to the Cochrane Handbook, chapter 4.4 for detailed guidance.

Abstract:
Update this section to reflect any changes to the review. Pay particular attention to updating the search strategy, data collection and analysis, main results and conclusions.

Note, the Abstract word limit has been amended from 400 words to 1000 words, so authors are encouraged to provide additional detail in their abstract, than was previously possible.

Refer to the Cochrane Handbook, chapter 4.3 for detailed guidance.

(Note: little should have changed between the review stage and the update stage in terms of most of the following sections. See section 4.5 of the Cochrane Handbook.

Background:
See the Cochrane Handbook chapter 4.5 and 3.4.3.
This should explain the topic being reviewed, and the intervention(s) of interest. The background should make the motivation and rationale for the review clear. The background section is designed to explain to people what is going to be reviewed and why. The author must explain why the question asked is important to answer. For example, it should indicate the areas of uncertainty in relation to the intervention and highlight issues that are controversial or the subject of public concern. All terms and interventions must be clearly defined, and the background must use a balanced tone that does not pre-judge the value of the intervention.

The background should be brief, a few pages long. It is not a monograph or an overview and should be concise and clear. Consider whether any update is required (see Cochrane Handbook section 3.4.3). Consider whether the subheadings now available in RevMan 5 can be utilized. Also include a sentence at the beginning or end of the Background that makes it clear to the reader that this is an update of a previously published review, and cite that review, for example 'This is an update of the original review on the same topic published in issue X, Year'.

Objective:
See the Cochrane Handbook chapter 4.5.

This should begin with a precise statement of the primary objective of the review, ideally in a single sentence. Where possible the style should be of the form "To assess the effects of [intervention or comparison] for [health problem] for/in [types of people, disease or problem and setting if specified]".

This might be followed by a series of specific objectives relating to different participant groups, different comparisons of interventions or different outcome measures. It is not necessary to state specific hypotheses.

METHODS

There are a number of key sections under the broad METHODS heading. Refer to the Cochrane Handbook chapter 4.5.

Criteria for considering studies for this review:

Refer to the Cochrane Handbook chapter 4.5 and chapter 5.

Please note that the heading "Criteria for considering studies for this review" is followed immediately by the next subheading, and cannot have free text after it.

NOTE: Few, if any, changes may be required to this section during a review update. The existing selection criteria (participants, interventions, outcomes, types of studies), if still appropriate, can be used to select studies relevant for inclusion in the review update. Any alteration of selection criteria requires explicit justification and approval by the Review Group before the update commences.

This section has several parts. Together, they should make it clear which studies were included in the review, and which were not eligible. This section is supposed to make the reasons for including a study so clear, that anyone else could apply the criteria, and come to more or less the same decisions.

This section includes:

Type of study: This specifies the design of the studies that will be eligible - usually controlled trials. The aim is to include study designs which minimise the chances of the results being biased.

Authors must define in advance the eligibility criteria for study designs in a clear and unambiguous way. They must justify the choice of study designs (whether they have restricted the review to randomized trials or included non-randomized studies), with regard to appropriateness of the study design to the review question, and the potential for bias.

Authors must refer to the Review Group's *Study Design Guide* (available at http://cccrg.cochrane.org/author-resources), as well section 4.5 and 5 of the Cochrane Handbook, in preparing this section. It may be appropriate to amend the study design selection criterion based on the findings of the previous version of the review; this should be approved by the Review Group before the update is conducted.

Type of participants: This needs to state which groups of people can be included in any studies. For example, some reviews might be looking only at children or people over a particular age. Or they might be looking only at people with a specific disease, of a particular severity (for example, a particular level of high blood pressure).

It can be important to consider and state the age range which you will include.

The eligibility criteria for participants must be defined clearly. Considerations when specifying participants include setting, diagnosis or definition of condition, and demographic factors. Any restrictions to study populations must be based on a sound rationale.

Authors must define in advance how studies that include only a subset of relevant participants will be handled. Any changes since the review was last published must be stated explicitly, with the rationale given.

See chapter 4.5 and chapter 5 of the Cochrane Handbook.

Type of interventions: The interventions and comparator interventions must be defined clearly. Any restrictions on interventions and comparators, such as regarding delivery, dose duration, intensity, co-interventions and features of complex interventions should be pre-defined and explained.

Any changes since the review was last published must be stated explicitly, with the rationale given.

See chapter 4.5 and chapter 5 of the Cochrane Handbook.

Type of outcomes: The outcomes that the authors were going to look for in each study should be listed here. This should include all the most important outcomes that need to be considered to make decisions about the particular intervention.

It may be appropriate to amend the types of outcomes you are looking for, or the ways in which they are categorized. The Review Group's Outcomes Taxonomy was updated in January 2012 and now provides more detailed advice to review authors on outcome specification. See http://cccrg.cochrane.org/author-resources

Any changes since the review was last published must be stated explicitly, with the rationale given. Amendments to the Types of Outcomes section should be planned before the updated review searches are run and data are extracted from newly-included studies. Such amendments may also make it necessary to revisit the previously-included studies and extract different data.

See chapter 4.5, chapter 5 and chapter 7 of the Cochrane Handbook. Recommended subheadings are:

- Primary outcomes
- Secondary outcomes

The following optional headings may be helpful, as supplements or replacements for the headings above:

- Main outcomes for 'Summary of findings' table
- Timing of outcome assessment
- Adverse outcomes
- Economic data

Search methods for identification of studies:
Update this section.

NOTE: For the review update, authors should liaise with the Review Group's Trials Search Coordinator to determine whether search strategies need to be updated before they are run. In the review update, authors must list the databases and dates of new searches. The line-by-line search strategies for all electronic databases must be presented (copy and pasted) in the Appendices of the review to reflect the most recent searches undertaken. Details of the original/previous searches undertaken for the review should be retained in the review (but moved to Appendices). Please also state clearly the date of the original searches and the dates of the revised searches in this section.

This section shows how and where the authors found the trials that could be eligible for inclusion in their review. Refer to the Cochrane Handbook chapter 4.5 and chapter 6.

Sources of trials
Review authors should search the Cochrane Central Register of Controlled Trials (CENTRAL) on *The Cochrane Library*, MEDLINE and any other relevant databases for eligible trials. You should contact researchers who are working in the area for details of any trials they may be involved in or be aware of. Searching should also include searching the reference lists of any relevant reviews or other studies, scanning paper issues of journals relevant to your topic and scanning abstracts from relevant conference proceedings. Other grey literature (e.g. dissertations and theses), can also be an important source of trial data. Finally, online trials registers can be searched through central sites such as TrialsCentral™ (www.trialscentral.org), the WHO Clinical Trial Search Portal (www.who.int/trialsearch), ClinicalTrials.gov, and Current Controlled Trials (www.controlled-trials.com).

The aim of such a thorough search is to ensure that, to the extent it is possible, all trials in the area, both published and unpublished, are identified.

Databases
Various databases need to be searched for slightly different reasons as each has slightly different content. The following is an outline of what is contained in each:

Cochrane Central Register of Controlled Trials (CENTRAL), *The Cochrane Library*: contains RCTs and CCTs on any subject area in all health fields or topics that have been primarily identified in MEDLINE and EMBASE, plus handsearching of other journals and some conference proceedings not otherwise identified in searches of electronic databases.

MEDLINE and/or EMBASE: authors may need to search for RCTs and CCTs on their specific topic to supplement what is found in the Group's Specialised Register, or CENTRAL, particularly to identify the latest references in these databases (most recent 12 months). These databases may also be necessary if studies other than RCTs and CCTs, such as observation studies, are being reviewed. Finally, searching these databases can be useful to find articles which give an overall review of the literature on your topic.

Search filters for Ovid MEDLINE, and EMBASE are available in the Cochrane Handbook at chapter 6.4.11. The Review Group's website has filters which authors can use to identify studies

involving people with chronic diseases, or in various age groups (children and adolescents, middle aged and elderly).

Other databases: e.g. Sociological Abstracts, PsycINFO, Proquest Dissertations and Theses database, Index to Theses, etc… to identify relevant RCTs and CCTs.

Trials registers: Authors should search clinicaltrials.gov and the WHO ICTRP portal, and other sources as appropriate.

Other reviews, and reference lists: Authors should search within previous reviews on the same topic, and check reference lists in their review's included studies and any relevant systematic reviews identified by their search.

Seeking assistance

Authors should liaise with the Trials Search Coordinator to determine whether search strategies need to be updated before they are run. We also encourage authors to consider whether they can access local assistance (for instance at their university or hospital library).

To seek assistance with developing or amending search strategies, identifying relevant databases, or running searches please complete the request form (TSCREV001) which is available on the Resources page of the Review Group's website (http://cccrg.cochrane.org/author-resources), and email it to the Trials Search Coordinator (j.kis-rigo@latrobe.edu.au) together with any attachments as specified n the form. This form provides us with the information we need to action your request in an appropriate and timely manner. The earlier you can access help from the Trials Search Coordinator the better, as the process of refining a search strategy can be complex and time consuming.

The Trials Search Coordinator also reviews the search strategies in your review update when you submit it for editorial and peer review, and will provide feedback if appropriate via the editorial review process.

Subject headings, keywords and important articles.

Many databases have particular coding systems used to index all the studies in them. For example, MeSH (Medical Subject Headings) is used to index MEDLINE. However, in addition to searching on subject headings, it is usually necessary to also search using the free text terms or words, this allowing for synonyms, American as well as British spelling, and singular forms of concepts. If requesting assistance from the Review Group, authors must examine key articles on their review topic and list

Index terms/key words on the request form where applicable. They must also provide reference details for key articles on the request form.

How to write up the Search Strategy section of your review

The write-up of the Search Strategy section in the review should include the databases you searched, the other methods of searching you used, and the search strategies for each database (in appendices), including limitations on your search (for instance, date limitations). Sample text is given below; this must be adapted for your own purposes.

Search methods for identification of studies

Electronic Searches *[recommended level 3 heading]*

We searched the following electronic databases:

- The Cochrane Central Register of Controlled Trials (CENTRAL, *The Cochrane Library*, latest issue);
- MEDLINE (Ovid SP) (*date* to *date*);
- EMBASE (Ovid SP) (*date* to *date*);
- PsycINFO (Ovid SP) (*date* to *date*); and
- *[List other databases and their platforms].*

Detailed search strategies are presented in appendices 1 to X.

[Copy and paste ALL strategies as appendices].

There were no language nor date restrictions *[or specify any restrictions, giving reasons].*

Previous searches for this update were conducted in [Month, Year]. The following databases were searched *[or this can be reported in an Appendix].*

Searching other resources *[recommended, level 3 heading]*

Note: The following *optional* headings may be used, either in place of 'Searching other resources' (in which case they would be level 3 headings) or as subheadings (level 4).

Grey literature

Handsearching

Reference lists

Correspondence

We searched *[list grey literature sources, such as reports and conference proceedings].*

If journals were be specifically handsearched for the review, this should be described here in the format "We handsearched the following journals: Title (dates), Title (dates), etc..

We contacted experts in the field and authors of included studies for advice as to other relevant studies. We also searched reference lists of relevant studies and *(add other sources, eg. personal collections of articles).*

We also searched online trial registers *(list them)* for ongoing and recently completed studies.

Specify any other search activities you undertook.

Data Collection and Analysis:

NOTE: This section must be amended to reflect any changes during the latest update. We recommend that you contact the Review Group for approval of the methodological changes before the review update is conducted. Any change to the methods used in the previous iteration of the review should be clearly stated and justified.

Authors may wish to refer to the Group's Protocol stage guidance for more detailed guidance on review methods relevant to this section.

This section spells out the steps of the review - who did what, and according to what standards and criteria. Refer to the Cochrane Handbook section 4.5 for guidance, and note the subheadings for the Methods section listed there and also given below.

Having decided which studies are eligible for consideration, the authors need to decide which studies were done well enough. If the study was done badly, the results may not be reliable enough, so it could be excluded. This section of the review should make it clear how the risk of bias of studies was assessed, what the criteria were, and what checks were conducted on these steps.

As with the selection criteria, the aim is to be so clear and specific that someone else applying the same methods would come up with more or less the same results.

NOTE: Authors **must** refer to the Review Group's *Study Quality Guide* in preparing this section, and in particular note the suggested text on the assessment of risk of bias in included studies. The *Study Quality Guide* is available at http://cccrg.cochrane.org/author-resources. The Group's Data Extraction Template, available at the same site, is another important resource to consider here.

The authors should include here the statistical methods they used to pool the results of different studies, and any sensitivity or subgroup analyses they did. Any methods that were planned at protocol stage but not applied (for instance, because no trials were found, or results were not pooled) should be retained in an appendix for potential application in future updates of the review.

The authors should also consider the **quality of the intervention** in individual trials – see Herbert and Bø, Analysis of quality of interventions in systematic reviews, BMJ 2005; 331; 507-9. (www.bmj.com)

Recommended subheadings for this section of the review are as follows (and detailed in Chapter 4.5 of the Cochrane Handbook):

- Selection of studies
    - Authors should use at least two people working independently to determine whether each study meets the eligibility criteria, and must have defined in advance the process for resolving disagreements. It is desirable, but not mandatory, that two people independently undertake the initial screening of titles and abstracts. It is mandatory that the selection of studies based on full text should be done by two people independently.
    - Authors must document the selection process in sufficient detail to complete a PRISMA flow chart and a table of 'Characteristics of excluded studies'.
    - Authors must collate multiple reports of the same study.

- Data extraction and management
    - Authors should update the previous data extraction template and collect characteristics of the included studies in sufficient detail to populate a table of 'Characteristics of Included Studies'. It is desirable that at least two people working independently extract study characteristics from reports of each study, and define in advance the process for resolving disagreements. It is mandatory that outcome data are extracted independently by at least two people.

- Assessment of risk of bias in included studies

    - Authors should use the recommended text from the Review Group's *Study Quality Guide* in this section. At least two people working independently should apply the risk of bias tool to each included study, having defined in advance the process for resolving disagreements.

- Measures of treatment effect

  The following *optional* headings may be used, either in place of 'Measures of treatment effect' (in which case they would be level 3 headings) or as subheadings (level 4):
    - Dichotomous data
    - Continuous data
    - Time-to-event data
- Unit of analysis issues

  Alternatively, *optional* (level 3) headings specific to the types of studies may be used, such as:
    - Cluster-randomised trials
    - Cross-over trials
    - Studies with multiple treatment groups

- Dealing with missing data
- Assessment of heterogeneity
- Assessment of reporting biases
- Data synthesis
- Subgroup analysis and investigation of heterogeneity
    - At protocol stage, authors should have specified potential effect modifiers, restricted these in number and provide a rationale for each. (See also 'background' section). They should specify whether or not the planned subgroup analyses were able to be conducted.

- Sensitivity analysis
    - Sensitivity analysis can be used to assess the robustness of results, such as the impact of notable assumptions, imputed data, borderline decisions, and studies at high risk of bias. Authors should specify whether or not planned sensitivity analyses were able to be conducted, and state any that were identified and conducted during the review process (post hoc).

- Summary of Findings table

- This section should describe the methods used to prepare any 'Summary of findings' tables. It should include information about (i) which populations (including the specification of low, medium or high risk populations), interventions and comparisons are being addressed by one or more 'Summary of findings' tables, and why; (ii) the source of any external information used in the 'Assumed risk' column; (iii) a brief comment that the GRADE approach to assessing the quality of the body of evidence was used; and (iv) any departures from the standard methods described in Chapter 11 and Chapter 12 of the Cochrane Handbook, along with a justification for such departures. The review's main outcomes, i.e. those intended for inclusion in the 'Summary of findings' table, should have been listed under the section 'Types of outcome measures'.
- Note: this heading is not included by default within the RevMan software, but should be added by the review author.

The following further, *optional* (level 3) headings for the Methods section may be helpful:

- Economics issues
- Methods for future updates

We would also like you to outline how you took consumers' views into account, and any consumer participation in the review development, at the end of the methods section of your review, with the suggested subheading 'Consumer participation'

RESULTS

The following section of text should be updated to reflect any studies newly included (and excluded). If no new relevant studies have been identified in the update process, however, minimal changes may be needed. Outline clearly for the reader which, if any, new included and excluded studies have been added to the review since the original publication.

Description of studies:

Update this section if required.

See the Cochrane Handbook, chapter 4.5 for a more detailed description of what to include in this section. In particular, please note the recommended subheadings:

Results of the search

Included studies

- Design
- Sample sizes
- Setting
- Participants
- Interventions
- Outcomes

Excluded studies

The following optional headings may be used:

- Ongoing studies
- Studies awaiting assessment
- New studies found at this update

Risk of bias in included studies:
Update this section if required. **Note**, it may be necessary to revisit the previously-included studies to obtain the information now required for a complete assessment of 'risk of bias'.

See the Cochrane Handbook, chapter 4.5 and chapter 8 for a more detailed description of what to include in this section.

This should summarize the general risk of bias in results of the included studies, its variability across studies and any important flaws in individual studies. The criteria that were used to assess the risk of bias should be described or referenced under 'Methods' and not here. How each study was rated on each criterion should be reported in a 'risk of bias' table and not described in detail in the text, which should be a concise summary.

At least two people working independently should apply the risk of bias tool to each included study.

For large reviews, aspects of the risk of bias assessment may be summarized for the primary outcomes under the following recommended (level 3) headings:

- Allocation
- Blinding
- Incomplete outcome data
- Selective reporting
- Other potential sources of bias

NOTE: Authors should refer to the Review Group's *Study Quality Guide* in preparing this section. The *Study Quality Guide* is available at http://cccrg.cochrane.org/author-resources

Effects of interventions:
Update this section if required.
This should be a summary of the main findings on the effects of the interventions studied in the review. The section should directly address the objectives of the review rather than list the findings of the included studies in turn. The results of individual studies, and any statistical summary of these, should be included in 'Data and analysis' tables. Outcomes should normally be addressed in the order in which they are listed under 'Types of outcome measures'. Subheadings are encouraged if they make understanding easier (for example, for each different participant group, comparison or outcome measure if a review addresses more than one).

Authors should avoid making inferences in this section. A common mistake to avoid (both in describing the results and in drawing conclusions) is the confusion of 'no evidence of an effect' with 'evidence of no effect'. When there is inconclusive evidence, it is wrong to claim that it shows that an intervention has 'no effect' or is 'no different' from the control intervention. In this situation, it is safer to report the data, with a confidence interval, as being compatible with either a reduction or an increase in the outcome.

See the Cochrane Handbook, chapter 4.5, chapter 11 and chapter 12.

DISCUSSION

Update this section if required. If there are new included or excluded studies and there is more data on which to base your findings, please highlight the new information gained between this update and the original piece of work.

This should summarise the main findings and outstanding uncertainties, balancing important benefits against important harms. It should include brief comments on any methodological limitations of the included studies and the review that are important for decisions about practice or future research. Comments on how the included studies fit into the context of other evidence might be included here, stating clearly whether the other evidence was systematically reviewed. Comments on how the results of the review fit into the context of current clinical practice might be included here, although authors should bear in mind that current clinical practice might vary internationally.

See the Cochrane Handbook, chapter 4.5 for a detailed description of what to include in this section, as well as chapter 12 on interpretation of results. The following subheadings are recommended (level 2 headings):

Summary of main results

Overall completeness and applicability of evidence

NOTE: Authors are strongly encouraged to systematically map the outcomes reported in trials against those they had already identified in their review protocol as being important.

Quality of the evidence

Potential biases in the review process

Agreements and disagreements with other studies or reviews

Authors' conclusions:

Update this section if required, in particular note any changes since the original publication warranting that previous readers re-read this update.

The primary purpose of the review should be to present information, rather than to offer advice. *Implications for practice* and *Implications for research* are fixed subheadings in this section. The implications for practice should be as practical and unambiguous as possible. They should not go beyond the evidence that was reviewed. 'No evidence of effect' should not be confused with 'evidence of no effect'. The implications for research should not include vague statements such as 'more research is needed'. Authors should state exactly what research is needed, why and how urgently. Opinions on how the review might be improved with additional data or resources might also be included here.

See the Cochrane Handbook, chapter 4.5 and chapter 12.

Acknowledgements:

Update this section.

This section should be used to acknowledge any people or organisations that the authors wish to acknowledge, including people who are not listed among the authors. This would include any previous authors of the Cochrane protocol or review or previous sources of support to the review.

Permission should be obtained from persons acknowledged. We encourage you to acknowledge the contribution of the Cochrane Consumers and Communication Review Group editors and staff, particularly your contact editor (NAME).

If you have obtained independent statistical advice for your review, we would expect the statistician be named as a review author (and not in the Acknowledgement section).

See the Cochrane Handbook, chapter 4.5.

Declarations of interest:
Update this section if required.
Authors should report any present or past affiliations or other involvement in any organization or entity with an interest in the review that might lead to a real or perceived conflict of interest. It is impossible to abolish all conflict of interest, since the only person who does not have some vested interest in a subject is somebody who knows nothing about it at all, and who cannot be affected in any way. However, any interest that could unduly influence judgments in a review (such as deciding which studies can stay in, or what the results mean) needs to be declared.

Financial conflicts of interest in particular need to be declared. This includes the receipt of any benefit in cash or kind, any hospitality, or any subsidy derived from any source with an interest in the results of the review. Any sponsorship or funding of the review needs to be declared.

Refer to the Cochrane Handbook chapter 4.5.

If there are no conflicts of interest, this should be stated explicitly, e.g. by reporting 'None known'.

TABLES
See the Cochrane Handbook, chapter 4.6 and the Group's Data Extraction Template (http://cccrg.cochrane.org/author-resources)

Characteristics of included studies:
See the Cochrane Handbook, chapters 4.6.1 and 11.2.
Update this table to incorporate any newly included studies identified.
The 'Characteristics of included studies' table has five entries for each study: Methods, Participants, Interventions, Outcomes and Notes. Up to three further entries may be specified for items not conveniently covered by these categories, for example, to provide information on length of follow-up, funding source, or indications of study quality that are unlikely to lead directly to a risk of bias. Codes or abbreviations may be used in the table to enable clear and succinct presentation of multiple pieces of information within an entry; for example, authors could include country, setting, age and sex under the Participants entry. Footnotes should be used to explain any codes or abbreviations used (these footnotes will be published in the *Cochrane Database of Systematic Reviews*).

Risk of bias table:
See the Cochrane Handbook chapters 4.6.2 and 8.6.

Update this table to incorporate any newly included studies identified AND to re-assess existing included studies using the new methodology.

A ‘Risk of bias’ table is an extension of the ‘Characteristics of included studies’ table. The standard ‘Risk of bias’ table includes assessments for sequence generation, allocation sequence concealment, blinding of participants and personnel, blinding of outcome assessment, incomplete outcome data, selective outcome reporting and ‘other issues’. For each item, the table provides a subjective judgement regarding protection from bias (Low risk, unclear, high risk) and a description of what was reported to have happened in the study. Direct quotations from the studies can be used to support the judgement.

Characteristics of excluded studies:
See the Cochrane Handbook chapter 4.6.3.
Update this table to incorporate any newly excluded studies identified.

Certain studies that may appear to meet the eligibility criteria, but which were excluded should be listed and the reason for exclusion should be given (for example, inappropriate comparator intervention). This should be kept brief, and a single reason for exclusion is usually sufficient. Reasons should be consistent.

Characteristics of ongoing studies:
See the Cochrane Handbook chapter 4.6.5.
This table has eight entries for each study: Study name, Methods, Participants, Interventions, Outcomes, Starting date, Contact information and Notes. The contents of these entries should be comparable to those in the table of ‘Characteristics of included studies’. Footnotes should be used to explain any abbreviations used in the table.
Update this table to incorporate any new ongoing studies identified, and **check** whether any studies previously listed as ‘ongoing’ are now complete and can be assessed for potential inclusion in the review.

‘Summary of Findings’ tables:
See the Cochrane Handbook chapters 4.6.6, 11.5, 12.2.

A ‘Summary of findings’ table is an optional, although strongly recommended, means of presenting findings for the most important outcomes, whether or not evidence is available for them. A ‘Summary of findings’ table includes, where appropriate, a summary of the amount of evidence; typical absolute risks for people receiving experimental and control interventions; estimates of relative effect (e.g. risk ratio or odds ratio); a depiction of the quality of the body of evidence; comments; and footnotes. The assessment of the quality of the body of evidence should follow the GRADE framework, which combines considerations of risk of bias, directness, heterogeneity, precision and publication bias.
PLEASE NOTE: ‘Summary of findings’ tables have a particular meaning within Cochrane reviews; they are not generic tables summarising the included studies’ results. For more information and assistance with planning for and creating a ‘Summary of findings’ table for a review, authors should contact the Managing Editor in the first instance.

‘Summary of findings’ tables were not widely available for use in reviews before 2008. We strongly encourage authors to consider including such a table in the updated review.

Additional tables:
See the Cochrane Handbook chapters 4.6.7, 11.6.

Additional tables may be used for information that cannot be conveniently placed in the text or in fixed tables. Examples include:

- Information to support the background;
- Summaries of study characteristics (such as detailed descriptions of interventions or outcomes).

Update existing additional tables or add new tables as needed.

STUDIES AND REFERENCES

See the Cochrane Handbook, chapter 4.7 and the Style Guide for detailed information.

Authors should take care to enter reference information in the appropriate Cochrane style. The Review Group reserves the right to return reviews to authors for correction if this is not done.

Authors should ensure that all studies and references are linked within the review text. Running a validation report is a useful mechanism for identifying gaps in reference information.

Update the studies and references as needed. Items previously listed under 'Studies awaiting assessment' should be reviewed to determine whether they can now be assessed for inclusion/exclusion.

DATA AND ANALYSES

Update the data and analyses section to incorporate new results.

Results of studies included in a review are organized in a hierarchy: studies are nested within (optional) subgroups, which are nested within outcomes, which are nested within comparisons. A study can be included several times among the analyses.

RevMan automatically generates forest plots illustrating data, effect estimates and results of meta-analyses (where selected) from the data entered into the 'Data and analyses' structure. The author is able to control whether, and how, meta-analyses are performed.

Authors should avoid listing comparisons or outcomes for which there are no data (i.e. have forest plots with no studies). Instead, authors should note in the text of the review that no data are available for the comparisons. However, if the review has a 'Summary of findings' table, the main outcomes should be included in this irrespective of whether data are available from the included studies.

For detailed guidance on analysis refer to the Cochrane Handbook, chapter 4.8 and chapter 9.

FIGURES

Five different types of figures can be included in Cochrane reviews:

1. RevMan forest plots
2. RevMan funnel plots
3. RevMan 'risk of bias' graphs
4. RevMan 'risk of bias' summaries
5. Other figures

For more information see the Cochrane Handbook, chapter 4.9.

Tips for updating a review

Style of writing:
The text of the review should be clear and to the point. It should be written so that someone who is not an expert in the area can understand it. It must adhere to the *Style Guidelines for Cochrane Reviews* (found at http://www.cochrane.org/training/cochrane-style-resource). Authors should run a spell check and correct any errors before submitting their review to the Review Group.

Data Extraction:
Authors updating a review should endeavour to obtain the data extraction template utilized in the previous version of the review. Contact the Managing Editor if you require assistance.

If it is not possible to obtain the data extraction template, create a new template based on the types of information and data included in the previous version of the review.

You should also note that the Cochrane Consumers and Communication Review Group has developed a data extraction template for use by review authors. The template is recommended as a guide only, and review authors should revise it as appropriate for their own review topic. The template can be downloaded at http://cccrg.cochrane.org/author-resources

IMPORTANT: Record Keeping

All details of **search strategies and dates searched** must be retained by the lead author, whether included in the review or not. This facilitates updating the review later, particularly if new authors are involved. The Review Group also encourages you to retain an electronic file (e.g. in Endnote) of the complete search output, similarly to facilitate updating the review.

Data extraction sheets (paper or electronic) must be retained by the lead author to facilitate data checking. These sheets should be made available to the Review Group editorial base upon request by the Managing Editor. These will be requested in select circumstances where it is unclear how data in the review were derived.

Data entry:
RevMan 5 does not provide functionality for double data entry, but you can use a spreadsheet for doing this and then paste the verified data into RevMan. If data are entered by a single author they must be checked by another author.

Working with RevMan 5, and submitting for editorial review:
As you are working on the review update, we recommend that you check draft versions of the update into Archie at the end of every work session rather than storing them 'checked out' in your RevMan software. Although do save each document in a temporary folder whenever working on it, to ensure that you don't lose any work if your computer crashes.

Once you are ready to submit a draft of the update for editorial review, check it into Archie and during the check-in process, mark it 'submit for editorial review'. Note, once you have done so, it will be 'locked' for editing and you will be unable to access the review update until it is released

again by the Managing Editor. If you need assistance with the RevMan 5 software, please contact us.

Final checks before submitting your review

The Cochrane Consumers & Communication Group requires:

- That authors read the review for grammar and spelling or nominate a review author with first language or very good English language skills to do so;
- That authors ensure that the Cochrane Style Guide is adhered to;
- That authors ensure that all references are completed according to the Cochrane Style Guide and that all are cited within the text and if not cited that they are deleted;
- That wherever possible authors use the standard Cochrane headings including those that can be activated in the left hand side tree-view;
- That a validation report is run on the review by going to File/reports/validation report and that any errors or warnings are addressed before submitting; and
- That when submitting to the editorial team, the author follows the RevMan Wizard and chooses 'submit for editorial approval'. We recommend also that you include a note to confirm that you are submitting your review for editorial approval along with any details such as additional authors to be added to the review or changes to the title.
- That the presubmission checklist is completed (see http://cccrg.cochrane.org/author-resources) and emailed to the Managing Editor.
- For further information on submitting your review please go to chapter 3 of this Resource Pack.

The Managing Editor will return the review to authors if the items above have not been completed.

You may also find the following helpful:

Compare versions in Archie

(This is useful when the review is being finalised for publication and you want to check any changes that have been made to the latest version)

To compare the latest version of your review with an earlier version of your review or see changes the editorial team may have made to your work: In Archie, **open the review** '**Properties**' (double-click on title or right-click and choose Properties)/**History/highlight latest version** (Hold Ctrl + highlight with your mouse the version for comparison/and click on '**Compare'.** You can print or save this 'tracked changes' document (diffdoc.htm) using the icon buttons in the upper left corner of the viewing screen – it will normally automatically save the version to your computer desktop. You will also see here that you can print and save the tracked changes document or the version of your choice as a PDF.

CHAPTER 6: AUTHOR RESPONSE FORM
- This form can be used by authors responding to editorial feedback on their review update

AUTHOR RESPONSE TO EDITORIAL AND EXTERNAL PEER REVIEW COMMENTS

Author name:
Review Title:
Due Date for Comments:

Response to Editorial/External Peer Review Comments

Please respond to all comments given on your Review Update by number, noting if you accept, reject or query the comment, and stating: What changes were made in response to comments/Justification for rejection of comments or suggestions/Queries for Further Information/Further suggestion or proposal

RESOURCES

CHAPTER 7: EDITORIAL TEAM AND CONTACT DETAILS FOR THE REVIEW GROUP

Editorial Base
http://cccrg.cochrane.org/

Acting Managing Editor: Dr. Sue Cole (sue.cole@latrobe.edu.au) to June 2015.
+61 3 9479 5779

Coordinating Editor: Dr. Sophie Hill (sophie.hill@latrobe.edu.au)
+61 3 9479 1941

Trials Search Coordinator: Mr. John Kis-Rigo (j.kis-rigo@latrobe.edu.au)
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Deputy Coordinating Editor: Dr. Rebecca Ryan (r.ryan@Latrobe.edu.au) (on leave until November 2014).

Editorial Team

Editors:
Dr. Josip Car, England
Prof. Adrian Edwards, Wales
Dr. Claire Glenton, Norway
Dr. Bronwyn Hemsley
Dr. Dell Horey, Australia
Dr Simon Lewin, Norway and South Africa
Dr. Brian McKinstry, Scotland
Dr. Sandy Oliver, England
Ms. Nancy Santesso, Canada
Dr. Ruth Stewart, England
Dr. Michael Taylor, Australia

Statistics Editor
Dr. Joanne McKenzie, Australia
Dr. Gian Luca di Tanna, England

Comments and Criticisms Editor: Dr. Andrew Herxheimer, United Kingdom

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CHAPTER 8: EDITORIAL PROCESSES AND POLICIES, AND COCHRANE LIBRARY PUBLICATION DATES

EDITORIAL PROCESS FOR UPDATE STAGE

Editorial Process and Policies for Update Stage

During update of the review, please refer all queries to the Managing Editor in the first instance.

Prepare your review update in RevMan 5 software. When you have a final draft version ready for peer review (after running a validation report and spelling check), check it into Archie and during the check in process mark it 'Submit for editorial approval'. Also complete and email the presubmission checklist (review stage) to the Managing Editor.

Once you have submitted your draft Update to the Review Group, it will be may be subject to the Consumers and Communication Group partial or full referee process depending on the nature of the update. The Consumers and Communication Group editorial team welcome any suggested referees that you consider appropriate to check your updated review. Although the editorial team welcomes your suggestions, they are not necessarily restricted to such suggestions and will allocate referees on the basis of subject, user and methodological knowledge relevant to your review.

If new trials have been added and your review is judged to be substantially updated it will be sent out to three editors of the Group and to at least three external peer reviewers, as well as to the Group's statistical editor and the Trials Search Coordinator.

Authors should note that the Review Group will obtain papers from 6 studies newly included in the review. These papers will be made available to the Group's editors, including the statistics editor. Data extraction will be scrutinized.

Your Contact Editor will provide collated, anonymised feedback to you within seven weeks of submission (notwithstanding events beyond our control which may delay this process). At this stage, you may request a copy of original, anonymised feedback if you wish.

If the review has only had a minor update, it will be sent to your Contact Editor. The Contact Editor may request that the update be sent to the editors of the Group. In this case, feedback will be provided to you by your Contact Editor within four weeks of submission.

You are required to respond to the feedback, indicating how you have addressed each point (agree/disagree/query, and any action taken). You should return this response document to the Managing Editor, together with the revised review in RevMan format.

The Contact Editor is responsible for carefully checking your amendments and may at this stage request further changes, or may recommend the review to the Coordinating Editor for re-publication.

Once the updated review has been recommended to the Coordinating Editor, it is copy edited at the editorial base by the Managing Editor.

Following copy editing (which may require further input from you if any elements of the review update are unclear), the review is submitted to the Coordinating Editor for review and final approval. **Only once the Coordinating Editor is satisfied with the accuracy and quality of the review, will it be approved for publication on *The Cochrane Library.*** You will be given the opportunity to check and comment on the final version before it is published, and all authors will be required to submit a permission to publish form (see below) as well as a conflict of interest declaration.

Timeframes

The Review Group will liaise with you over timeframes in the lead up to publication, and will seek to adhere to all stated deadlines, notwithstanding events that may be beyond our control. Ideally, review authors should submit their draft updated review for editorial and peer review **at least four months before** the time the would like to see the review published.

The Cochrane Library is released continuously

While the Review Group will make every effort to meet agreed deadlines and to facilitate publication on a particular issue of *The Cochrane Library,* publication of a protocol, review or review update always remains at the discretion of the Group's editorial team and the Coordinating Editor. The Review Group retains the right to reject reviews outright if they are not performed to a sufficient standard. Publication of a protocol or review, particularly on a specific issue number of *The Cochrane Library,* is not guaranteed.

Authors should contact the Managing Editor for further details of review timelines and publication schedules.

Permission for publication, and declaration of interest forms

The Managing Editor provides all authors with the permission for publication form and the declaration of interest form electronically via Archie. The forms must be completed in Archie by all authors before publication can proceed.

END OF RESOURCE PACK D FOR REVIEW AUTHORS: UPDATING A COCHRANE REVIEW