

# Introduction to Cochrane

# About us

## **What do we do?**

Cochrane exists so that healthcare decisions get better.

During the past 20 years, Cochrane has helped to transform the way health decisions are made.

We gather and summarize the best evidence from research to help you make informed choices about treatment.

## **Who is Cochrane for?**

Cochrane is for anyone who is interested in using high-quality information to make health decisions. Whether you are a doctor or nurse, patient or carer, researcher or funder, Cochrane evidence provides a powerful tool to enhance your healthcare knowledge and decision making.

Everyone has a role to play so please [get involved](#).

## **Who are we?**

We are a global independent network of researchers, professionals, patients, carers, and people interested in health.

Cochrane contributors from more than 120 countries work together to produce credible, accessible health information that is free from commercial sponsorship and other conflicts of interest. Many of our contributors are world leaders in their fields - medicine, health policy, research methodology, or consumer advocacy - and our groups are situated in some of the world's most respected academic and medical institutions. [Contact us](#) for more information.

Our work is recognized as representing an international gold standard for high quality, trusted information.

## **How do we do this?**

Cochrane's contributors are affiliated to the organization through Cochrane groups: healthcare subject-related [review groups](#), thematic [networks](#), groups concerned with the [methodology](#) of systematic reviews, and regional [centres](#). (Learn more about [our organizational structure](#).)

There is no one place or office that is 'Cochrane'. Our contributors and groups are based all around the world and the majority of our work is carried out online. Each group is a 'mini-organization' in itself, with its own funding, website, and workload. Contributors affiliate themselves to a group, or in some cases several groups, based on their interests, expertise, and/or geographical location.

We do not accept commercial or conflicted funding. This is vital for us to generate authoritative and reliable information, working freely, unconstrained by commercial and financial interests.

### ***Why do we do this?***

The need for Cochrane's work is even greater than it was when we started 20 years ago. As access to health evidence increases, so do the risks of misinterpreting complex content; meanwhile the likelihood of any one person getting a complete and balanced picture decreases. Our mission to provide accessible, credible information to support informed decision-making has never been more important or useful for improving global health.

## What are the different groups?

### ***Review Groups***

Cochrane has a number of subject-related review groups, teams of authors which are responsible for the production of systematic reviews in their respective subject area. You can find a full listing of these by going to <http://www.cochrane.org/contact/review-groups>.

The editorial staff at CRGs (Cochrane Review Groups) are responsible for supporting authors through the editorial processes. These processes entail systematic literature searching, rigorous peer reviewing, frequent and clear communication, and working to deadlines to produce high quality systematic reviews for publication in The Cochrane Library. They aim to assist in the efficient publication of reviews and maintain regular updates of existing reviews.

The major goal of CRGs is to improve the quality of healthcare worldwide, through the provision of timely evidence that will assist clinical and policy decisions.

### ***Methods groups***

Methods groups are concerned with methodology and work in tandem with CRGs (Cochrane Review Groups) in order to produce reviews of a gold methodological standard. Methods Groups aim to develop the methods for producing high quality systematic reviews and to advise on how the validity and precision of systematic reviews can be improved.

Methods Groups functions include:

- Raising awareness of methodological data
- Providing methodological support to reviewers
- Providing methodological guidelines
- Identifying areas of methodological uncertainty

### ***Centres and branches***

Centres and branches can be thought of as 'arms' of Cochrane, and are the bases which are located in nearly every country around the world. There are 14 Centres worldwide, with a number of additional branches as an extension of these dotted around these. They run their

own training events including workshops for prospective authors on how they should get on the path to writing a review.

Centres also function to:

- Act as a central point of contact for Cochrane within that country
- Promote awareness
- Developing relationships with organisations in that country
- Co-ordinating training activities
- Supporting other groups located in the country

### *Fields*

Fields are groups which specialise further into subject areas where this is seen to be needed. For instance the Child Health Field was established in 2000 to represent interests of infants, children and youth (ages 0-18) within The Cochrane Collaboration, and to bring Cochrane evidence on this age group to those working in child health. There are a number of other fields which include the Rehabilitation and Related Therapies Field and the Vaccines Field.

## About the Cochrane Library

The Cochrane Library (ISSN 1465-1858) is a collection of six databases that contain different types of high-quality, independent evidence to inform healthcare decision-making, and a seventh database that provides information about Cochrane groups.

### **Editorial staff**

#### **Editor in Chief**

Dr David Tovey is the first Editor in Chief of the Cochrane Library (since 2009).

#### **Editorial Board**

The Cochrane Database of Systematic Reviews Editorial Board is made up of Co-ordinating Editors of each Cochrane Review Group.

#### **Cochrane Review Group editorial teams**

Each Cochrane Review Group includes one or more Co-ordinating Editors, Managing Editors, and Trials Search Co-ordinators, also supported by a team of specialist Editors. Information about each team is available on Cochrane Review Group websites.

## Editorial staff (Cochrane Editorial Unit)

Senior Editors: Toby Lasserson, Harriet MacLehose

Editors: John Hilton, Nuala Livingstone, Rachel Marshall, Monaz Mehta, Newton Opiyo

Journal Club and Podcast Editor: Mike Clarke

Statistical Editor: Kerry Dwan

Information Specialist: Ruth Foxlee

Publisher editorial team (Wiley)

Publisher: Deborah Pentesco-Gilbert

Production Editor: David Hives

Associate Editor: Gavin Stewart

Assistant Editor: Tony Aburrow

## Oversight Committee

The Cochrane Library Oversight Committee supports the Editor in Chief's editorial independence by providing a mechanism for avoiding or resolving disputes about the content of the Cochrane Library or any editorial positions taken by the Editor in Chief in respect to the Cochrane Library that may arise.

# About Cochrane Reviews

## What is a systematic review?

A systematic review attempts to identify, appraise and synthesize all the empirical evidence that meets pre-specified eligibility criteria to answer a given research question. Researchers conducting systematic reviews use explicit methods aimed at minimizing bias, in order to produce more reliable findings that can be used to inform decision making. (See Section 1.2 in the Cochrane Handbook for Systematic Reviews of Interventions.)

## What is a Cochrane Review?

Cochrane Reviews are systematic reviews of research in healthcare and health policy that are published in the Cochrane Database of Systematic Reviews. There are five types of Cochrane Review:

- Intervention reviews assess the benefits and harms of interventions used in healthcare and health policy.
- Diagnostic test accuracy reviews assess how well a diagnostic test performs in diagnosing and detecting a particular disease.
- Methodology reviews address issues relevant to how systematic reviews and clinical trials are conducted and reported.
- Qualitative reviews synthesize qualitative evidence to address questions on aspects other than effectiveness.

- Prognosis reviews address the probable course or future outcome(s) of people with a health problem.

Cochrane Reviews base their findings on the results of studies that meet certain quality criteria, since the most reliable studies will provide the best evidence for making decisions about health care. Authors of Cochrane Reviews apply methods which reduce the impact of bias across different parts of the review process, including:

- Identification of relevant studies from a number of different sources (including unpublished sources);
- Selection of studies for inclusion and evaluation of their strengths and limitations on the basis of clear, predefined criteria;
- Systematic collection of data;
- Appropriate synthesis of data.

These methods are described in detail in the Cochrane Handbook for Systematic Reviews of Interventions and the Cochrane Handbook for Diagnostic Test Accuracy Reviews (in development).

Cochrane Reviews are updated to reflect the findings of new evidence when it becomes available because the results of new studies can change the conclusions of a review. Cochrane Reviews are therefore valuable sources of information for those receiving and providing care, as well as for decision-makers and researchers.

### **What is a meta-analysis?**

If the results of the individual studies are combined to produce an overall statistic, this is usually called a meta-analysis. Many Cochrane Reviews measure benefits and harms by collecting data from more than one trial, and combining them to generate an average result. This aims to provide a more precise estimate of the effects of an intervention and to reduce uncertainty.

Not every review in the Cochrane Database of Systematic Reviews contains a meta-analysis. This might not be appropriate if the designs of the studies are too different, if the outcomes measured are not sufficiently similar, or if there are concerns about the quality of the studies, for an average result across the studies to be meaningful.

### **What is a Summary of Findings table?**

Summary of Findings tables present the main findings of a review in a transparent and simple tabular format. In particular, they provide key information concerning the quality of evidence, the magnitude of effect of the interventions examined, and the sum of available data on the main outcomes. Most reviews would be expected to have a single Summary of Findings table. Other reviews may include more than one, for example if the review addresses more than one major comparison, or substantially different populations.

### **What is a protocol?**

All research should be carried out according to a pre-defined plan. Cochrane researchers use the protocol to describe the proposed approach for a systematic review. It outlines the question

that the review authors are addressing, detailing the criteria against which studies will be assessed for inclusion in the review, and describing how the authors will manage the review process. Protocols contain information that defines the health problem and the intervention under investigation, how benefits and harms will be measured, and the type of appropriate study design. The protocol also outlines the process for identifying, assessing, and summarizing studies in the review. By making this information available the protocol is a public record of how the review authors intend to answer their research question.

## Our vision, mission and principles

### ***Our vision***

Our vision is a world of improved health where decisions about health and health care are informed by high-quality, relevant and up-to-date synthesized research evidence.

### ***Our mission***

Our mission is to promote evidence-informed health decision-making by producing high-quality, relevant, accessible systematic reviews and other synthesized research evidence.

Our work is internationally recognized as the benchmark for high-quality information about the effectiveness of health care.

### ***Our principles***

Cochrane's work is based on ten key principles:

1	Collaboration	by fostering global co-operation, teamwork, and open and transparent communication and decision-making.
2	Building on the enthusiasm of individuals	by involving, supporting and training people of different skills and backgrounds.
3	Avoiding duplication of effort	by good management, co-ordination and effective internal communications to maximize economy of effort.

4	Minimizing bias	through a variety of approaches such as scientific rigour, ensuring broad participation, and avoiding conflicts of interest.
5	Keeping up-to-date	by a commitment to ensure that Cochrane Systematic Reviews are maintained through identification and incorporation of new evidence.
6	Striving for relevance	by promoting the assessment of health questions using outcomes that matter to people making choices in health and health care.
7	Promoting access	by wide dissemination of our outputs, taking advantage of strategic alliances, and by promoting appropriate access models and delivery solutions to meet the needs of users worldwide.
8	Ensuring quality	by applying advances in methodology, developing systems for quality improvement, and being open and responsive to criticism.
9	Continuity	by ensuring that responsibility for reviews, editorial processes, and key functions is maintained and renewed.
10	Enabling wide participation	in our work by reducing barriers to contributing and by encouraging diversity.

## Our strategy

The *Strategy to 2020* is Cochrane's response to a changing landscape in global health care. It defines the organization's direction for the next five years and provides the framework for strategic decision making.



Building on our original ten principles, the *Strategy to 2020* outlines four key goal areas to focus Cochrane's work. The first three goals, which are interdependent and of equal priority, concentrate on:

- the production of high-quality evidence;
- making Cochrane evidence accessible and useful to everyone, everywhere in the world; and
- making Cochrane the 'home of evidence' to enable informed decision making.

The fourth goal, which underpins and supports the other three, centres around:

- building an organization that is effective and sustainable in a rapidly evolving and increasingly complex healthcare and publishing environment.

The complete text of the *Strategy to 2020* is available to download.

## Governance

Cochrane's governing body is the Cochrane Steering Group, comprising 13 representatives elected from the collaboration's core contributor groups and responsible for overseeing the development and implementation of organizational policy. Cochrane is a registered charity in the United Kingdom and the Steering Group serves as our Board of Trustees. To see the full membership of the Steering Group, go [here](#).

The Steering Group oversees the work of Cochrane's Chief Executive Officer and Central Executive team, which supports development and delivery of all work across Cochrane groups and projects. (See more information about [our organizational structure](#).)



Co-Chairs of the Cochrane Steering Group, 2015: Lisa Bero (L) and Cindy Farquhar

