

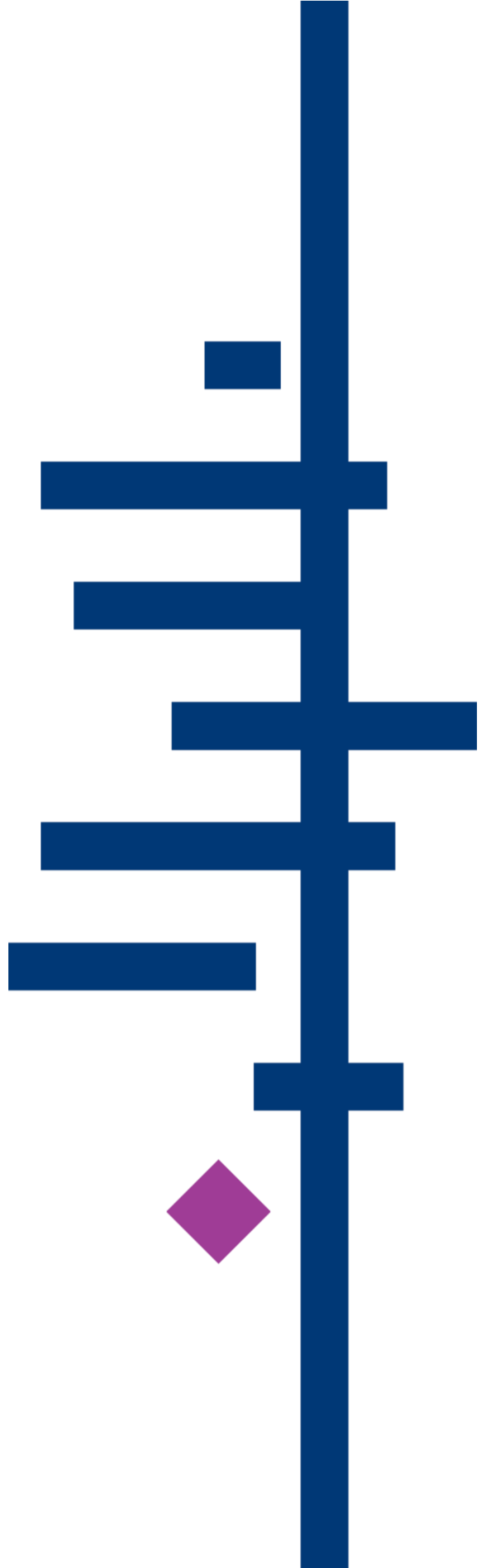
## Cochrane Style Basics

A collection of essential style guidelines for authors of Cochrane Reviews and protocols

From the Cochrane Style Manual  
[community.cochrane.org/style-manual](https://community.cochrane.org/style-manual)

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Informed decisions.  
Better health.**



# Cochrane Style Basics

## Headings

1. Formatting of headings at the correct heading level is very important. If a copy-editor changes a heading level, it becomes difficult to use the 'Compare' function in Archie, as the entire section appears to have been deleted, then added in again. **Heading levels need to be correct throughout protocols and reviews before copy-edit starts.**
  - Ensure that headings are formatted at the appropriate level, i.e. a subheading following a level 3 heading should be formatted as level 4, and so on (see [Headings](#)).
  - Subheadings should always be formatted as the heading level below the heading they follow.
  - Check that level 5 headings are formatted as such and are not normal text presented in bold.
  - Remove unnecessary capitals from headings, Cochrane uses sentence case (see [Use of capitals](#)).

## Consistency

2. Check the review for consistency throughout all sections, particularly:
  - terms used to describe interventions and outcomes (check all sections where mentioned);
  - results cited in the Abstract (Main results, Conclusions), Plain language summary (Key results, Conclusions), Results (Effects of interventions), Discussion (Summary of results), Authors' conclusions, and 'Summary of findings' tables;
  - text in the Results of the search section should match the PRISMA diagram;
  - the numbers cited in the PRISMA diagram should add up.

## Plain language summary

3. Ensure this is:
  - within the word limit (maximum 850 words);
  - in a current preferred form with appropriate headings (see: [PLEACS](#) or [Cochrane Norway template](#)); and
  - written in plain language with technical concepts and terms kept to a minimum and explained.

## GRADE

4. The term 'GRADE' does not need to be defined. Ensure that:
  - 'quality' or 'certainty' is used consistently to describe the evidence, and the GRADE publication that uses the same phraseology is cited;
  - normal text (not italic) is used to present GRADE judgements (e.g. very low-quality evidence **or** very low-certainty evidence).

## General points

5. **Active and passive voice:** the active voice (e.g. “two authors extracted data”) is generally preferable to the passive voice (“data were extracted by two authors”).
6. **Cochrane style for commonly used terms:**

<p>handsearching (<i>not</i> hand searching)</p> <p>website (<i>not</i> web site)</p> <p>P value (<i>not</i> p-value)</p> <p>fixed-effect model (<i>not</i> fixed effect model)</p> <p>random-effects model (<i>not</i> random effects model)</p> <p>subgroup (<i>not</i> sub-group)</p> <p>prespecified (<i>not</i> pre-specified)</p>	<p>Cochrane (when referring to the Cochrane Collaboration)</p> <p>the Cochrane Library (no italics)</p> <p>the Cochrane Central Register of Controlled Trials (CENTRAL)</p> <p>follow up (verb) and follow-up (noun or adjective)</p>
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7. **Numbers:** spell out numbers less than 10 in full, unless used with units (e.g. 5 mL) or in a list with other numbers (e.g. 6, 12, and 24 months), or in tables (see [Numbers](#)). In the text of a review write the number out in full if it is at the start of a sentence.
8. **Bullets/numbered points:** use bullets or numbered points only throughout the review. Use the icons in Review Manager to format them.
9. **Dates:** spell months out in full to avoid confusion between different regional date formats (e.g. January 2000; 1 January 2000), and express decades as, for example, 1960s (no apostrophe).
10. **Pharmaceutical drugs:** use the recommended International Non-proprietary Name (rINN) for all pharmaceutical drugs (and put the specific brand name in brackets if needed).
11. **Databases:** MEDLINE (*not* Medline); Embase (*not* EMBASE); OLDMEDLINE (*not* Oldmedline); PsycLIT (*not* Psychlit); PsycINFO (*not* Psychinfo); CINAHL (*not* CINHAL or Cinahl).

## Abbreviations and symbols

12. Use abbreviations and acronyms only if they are widely known and not using them could make reading tedious.
  - Write out in full in the first instance and follow that immediately by the abbreviated version or acronym in brackets; for example, “We contacted the World Health Organization (WHO). The WHO provided the relevant information.” (See [When to use abbreviations](#).)
  - Use 'e.g.' and 'i.e.' (with full stops, but not followed by a comma), and 'etc.' (see [e.g./i.e.](#)).
  - Standard unit abbreviations do not need to be defined (e.g. mL and mg) (see [Units](#)).
  - Use symbols (e.g. + – & < > =) in text only if the descriptive version is cumbersome or inappropriate.
  - Keep one space either side of the symbol (e.g. > 100 participants) except for a negative number (e.g. negative pressure of –50 mmHg).
  - There should be no space either side of / (e.g. 10/51) (see [Symbols](#)).

## Grammar, spelling, and punctuation

13. Write things you plan on doing in the future tense (most common in a protocol for a Cochrane Review) and things you have already done in the past tense (most common in a Cochrane Review).
14. Insert one space between a number and the unit (e.g. 0.4 mg) (see [Units](#)).
15. Be consistent when using words where different spelling is possible (e.g. randomised and randomized).

## Presentation of data

16. There are different ways to present summary statistics in the text (see [Statistical presentation](#)):
  - the risk ratio (RR) was 0.14 (95% confidence interval (CI) 0.08 to 0.24); [Use this option if the RR and CI have not been abbreviated earlier in the text]
  - mean difference 1.09 hours (95% CI 0.98 to 1.20);
  - (RR 1.02, 95% CI 0.87 to 1.19);
17. Where multiple pieces of information are presented within a bracket, use this order and format: (summary statistic, CI; P value, I<sup>2</sup>; number of trials, number of participants; link to analysis).
18. Present numerical results to two decimal places (e.g. RR 0.14) unless the number is very small, in which case use three significant figures.

## Characteristics of included studies tables

19. These tables need to be formatted consistently as follows:
  - use either bullet points or numbered points, but not both; the choice should match what is used in the review text;
  - start all boxes with a capital letter;
  - follow colons with a lower-case letter, except for proper nouns and acronyms;
  - construct a list of definitions of abbreviations used in the tables in the Footnotes section.

## Data and analysis tables

### 20. Presentation of outcomes:

- start each individual outcome with a capital letter, including subcategories;
- write outcomes in sentence case, for example 'Intranasal spray', not 'Intranasal Spray'

### 21. Presentation of axes:

- check the axes have been labelled appropriately; the default labelling, 'Favours [experimental]', 'Favours [control]' is not acceptable.
- remove square brackets from axes labels when relabelling;
- use sentence case for axes labels, for example, 'Favours intranasal spray' *not* 'Favours [Intranasal Spray]'

## References

22. Inserting references into Review Manager (see [References](#)):

- **study/reference identifier:** use the last name of the first author and the year of publication as the study/reference identifier where possible (e.g. Baldini 2004). Alternatively, if a trial is more widely known by an acronym, authors can use the format 'TRIALNAME YYYY'; use the year of publication of the primary reference for the trial.
- **authors:** list only the first six authors of any reference, and use ' , et al' after the sixth author if there are more than six authors; for example, Abera G, Takahashi N, Thugwane J, Roba F, Hwang Y-C, Yegorova V, et al. The comma before 'et al' is mandatory.
- **punctuation:** no full stops at the end of each line, for example, after the authors or article title.
- **journal article title:** the first letter of the first word of the article title should be in upper case; all other words should be lower-case unless they are proper names (trade names, country names, etc.) or require an upper-case letter.
- **translated article title:** include the English translation of a journal article title if it is provided by the journal or database. If an English translation is not available, only enter the original title.
- **journal title:** enter the *full* journal title using title case (i.e. each substantive word starts with an upper-case letter). If using Review Manager 5, use the 'Choose from list' option where possible.
- **translated journal title:** include the English translation of a journal title if it is provided by the journal or database. Place the English title in square brackets after the original journal title.
- **page number style:** 324-6 or 256-60 are correct (*not* 324-326 or 324-26, nor 256-260 or 256-0).

23. Using references in the text (see [Citing references](#)):

- study/reference identifiers can be used as part of a sentence (e.g. "We included Jones 2001 in the analysis.").
- when not in the text, study/reference identifiers should be listed in round brackets.
- reference brackets should be located before the full stop at the end of the sentence or within the closest punctuation, for example, "Two studies included children (Kamau 2001; Tomescu 2006)."
- if two or more references are used to support one statement, list the references either in alphabetical order and then by year of publication; or in chronological order, starting with the earliest date. Separate each citation with a semicolon.
- sentences that include multiple pieces of information that are supported by a number of citations should be structured so that it is clear to which piece of information each citation relates, for example "One trial included women only (Smith 1990), while another included men only (Jones 1999)."

## How to cite

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