



Minutes
US Contributors' Meeting
XVII Cochrane Colloquium, Singapore
Monday, October 12, 2009, 7:30 – 9:00
Suntec Conference Center, Room 203

1. **Welcome and introductions:** Kay Dickersin, US Cochrane Center (USCC) Director, welcomed everyone to the meeting. The attendees introduced themselves and briefly described ongoing activities.
2. **What's happening in the US:** The US-based groups presented current news, as follows:
 - *United States Cochrane Center (USCC):* Kay Dickersin reported that the USCC presented a conference, “ Stakeholder Summit on Using Quality Systematic Reviews to Inform Evidence-based Guidelines” on June 4-5, 2009. In addition, the USCC presented 2 workshops, one in January and one in July, on how to complete Cochrane systematic reviews. The USCC will be presenting two workshops at the Singapore Colloquium.
 - *USCC San Francisco Branch :* During the past year Lisa Bero, Director of USCC, San Francisco Branch, presented information on the Cochrane Collaboration on 11 separate occasions. While the presentations were mostly to groups in the San Francisco area, she also had presentations at the NIH and the Environmental Protection Agency (EPA). The EPA was especially interested in how Cochrane methodology could be applied to systematic reviews of environmental studies.
 - *North American training opportunities:* Roberta Scherer, USCC Associate Director, reported that the USCC has available a free online course, “Understanding Evidence based Health Care” that, while originally developed for consumer advocates, is available and has been found useful by other groups of individuals. In addition, the USCC is expecting will launch a free online course on peer review in the near future. Another training opportunity reported by Lisa Bero of the San Francisco Branch is the incipient course on critical appraisal emphasizing assessment of bias in drug studies; this course is designed as five 30-minute segments on U-Tube and will provide continuing medical education credit.
 - *Pain, Palliative, & Supportive Care Review Group/Headache Section:* No longer located in the US.
 - *Prostatic Diseases and Urological Cancers Review Group:* No one present from the group.
 - *Eyes and Vision Review Group Satellite:* Roberta Scherer reported that funding from the National Eye Institute (NEI) ended this year for the US satellite of the Eyes and Vision Group (CEVG@US), and that an application has been submitted to NEI for continued funding. The group has been awarded a challenge grant from the American Recovery and Reinvestment Act to investigate meta-analytic methods using indirect comparisons. In addition, CEVG@US is collaborating with the Johns Hopkins Evidence-based Practice Center on a series of systematic reviews on glaucoma.
 - *Neonatal Review Group:* Roger Soll, Coordinating Editor of the Neonatal Group, commented that the Neonatal Group is actively involved in coordinating the update of approximately 260 reviews.

- *HIV/AIDS Review Group*: Tara Horvath, Assistant Managing Editor for the HIV/AIDS Group, described the collaborative activities of the HIV/AIDS review group in San Francisco and the South African Cochrane Centre satellite. The HIV/AIDS group sponsors a mentoring program for new authors, who are mainly from sub-Saharan Africa. They are also active in applying GRADE appraisals to studies of interventions to prevent mother to child transmission of HIV for the World Health Organization (WHO).
 - *Complementary Medicine Field*: Susan Wieland reported on the Complementary Medicine Field for Director Brian Berman. With 2 more years of funding from a 5 year grant from the National Center on Complementary and Alternative Medicine, the Complementary Medicine Field has supported a working group to identify and translate trials from the Chinese biomedical literature and two reviews on acupuncture this year. The Complementary Medicine Field also provided funds for completion of 2 additional systematic reviews on complementary medicine, written numerous journal articles, provided training about the Cochrane Collaboration, and worked with CCNet on plain language summaries and the Nordic Cochrane Center on the application of GRADE.
 - *Behavioral Medicine Field* - No longer in existence.
 - *Screening and Diagnostic Tests Methods Group* - No one present from the group.
 - *Justice Health Field (proposed)* - Catherine Gallagher, co-convenor of the proposed Justice Health Field, reported that there will be an exploratory meeting of the field at the Singapore Colloquium. This third exploratory meeting will provide an overview of the proposed module and follows 2 exploratory meetings held previously in Orlando. The aim of the Justice Health Field is to promote reviews on healthcare for prisoners or other institutionalized persons. This goal encompasses a population of over 8 million persons and children, who carry a disproportionate burden of disease because of the institutional setting. The Justice Health Field expects to collaborate with the Campbell Criminal Justice group and currently has funding from the Agency for Health Care Research and Quality (AHRQ) through a conference grant and through review support.
 - *Consumers United for Evidence-based Healthcare (CUE)*: As reported by Barbara Warren, the USCC received funding for CUE through a conference grant from AHRQ. During this past year, CUE members have collaborated with CCNet on plain language summaries, and been active in health care reform issues. The 2010 Colloquium in the US is especially important for CUE as it is currently reaching out to increase advocacy group membership US-wide.
 - *Cochrane GI annual presentations at Digestive Disease Week*: Ron Koretz noted that the contract for the Cochrane GI annual presentation at the Digestive Disease Week was terminated this year. He does not expect it to be picked up in the future due to financial constraints.
2. **Cochrane Collaboration Steering Group (CCSG)**: Lisa Bero described CCSG reports and activities of special interest to the US. Analyses by Wiley show that the US is one of the primary users of *The Cochrane Library*. There is the possibility of group funding support through the Cochrane Opportunity

Fund, which will be released later this year and will target proposals for projects related to the Collaboration's strategic objectives. The CCSG is looking for ways to increase consumer involvement, including a request to CCNet to develop a consumer participation plan and a half day brainstorming session at the mid-year Center Directors meeting in New Zealand. Lisa also reported the ongoing plans for a collaboration between the Cochrane Collaboration and WHO; the Cochrane Collaboration hopes to have a seat on the World Health Assembly, the governing body of WHO. This development is especially important to the US because of the link between WHO and the Pan American Health Organization (PAHO). PAHO initiated Cochrane systematic review training for the US-Mexico border group this past year.

4. Funding: Successes, challenges & future plans: Various individuals reported on funding successes, as follows:

- Roger Soll continues to receive support from the National Institute of Child Health and Human Development (NICHD) for the Neonatal Group. For this support, the Neonatal Group publishes all their systematic reviews on the NICHD website.
- Susan Norris was approached and is funded by the Centers for Disease Control and Prevention (CDC) to investigate conflict of interest in systematic reviews.
- The CDC also has "AIDS relief" funds, and is reported to be approaching the HIV/AIDS group.
- It was noted that some individuals at the CDC are interested in forming a satellite for the Public Health Group and closer alliances with Cochrane generally.

The ensuing discussion revolved around ways to increase funding. Rich Rosenfeld suggested that persons who are leaders in a clinical organization or society with a journal might try to negotiate with the journal publisher for funding for one or more persons to attend the Colloquium in exchange for submission of a systematic review by these individuals, thus providing a source of increased citations for the journal.

5. 2010 Colloquium in Keystone, Colorado: Robert (Bob) Dellavalle, Paula Marchionda and Vicky Koehler

Bob Dellavalle described plans for the 2010 Cochrane Colloquium to be held in Keystone, Colorado. Keystone is a winter ski resort and a summer holiday resort, and has adequate facilities for handling a large conference, especially during the fall season. Attendance by North American participants is expected to be high due to the location. Attendees are encouraged to be aware of the possibility of altitude sickness, since the elevation at Keystone is about 9,500 ft. Steps to deal with this potential problem include suggesting participants plan a preliminary stay at Denver. In fact, the CCSG will hold the first day of their meeting in Denver, and other groups are planning pre-conference meetings. It was suggested that specific recommendations to prevent or mitigate altitude sickness should be provided to conference participants (e.g., avoiding alcohol use during the first few days at high altitude, taking preventive medications such as carbonic anhydrase inhibitors).

The 2010 Colloquium, a joint colloquium with the Campbell Collaboration, has the theme "Bringing Evidence-Based Decision-Making to New Heights." As a joint meeting, the colloquium will provide a unique opportunity for networking. Committees will be co-chaired by members of both the Cochrane and Campbell Collaborations. Persons named to head committees to date are as follows: Scientific Program: Kay

Dickersin and Hannah Rothstein; Abstract Committee: Lisa Bero; Workshop Committee: Karen Robinson and Terri Petite; and Stipend Committee: Maryann Napoli and Jini Henderson. Bob distributed the working organizational chart to those attending the meeting and encouraged anyone who is interested to help either to contact Bob directly or participate in the local organizing committee monthly telephone calls. These monthly telephone calls use Elluminate (sponsored by PAHO) and anyone could join the call. The Stipend Committee especially could use help.

Based on previous colloquia, the estimated budget for the Keystone Colloquium will be about one million dollars. Past colloquium organizers have found that the majority of required funds come from participant registration, but start-up money is raised locally. The University of Colorado has provided seed money and Bob has also applied to AHRQ for conference funding. The contract with the Keystone Resort is through a memorandum of understanding between the venue and the University of Colorado, meaning that the University currently has undertaken financial responsibility. Bob requested that anyone with suggestions for additional funding sources contact him with details.

Bob announced that postcards describing the meeting and important dates would be available during the entire Singapore Colloquium at an exhibit table. He also said that he would show a video of Keystone at the final plenary and asked all US Singapore Colloquium attendees to participate by wearing cowboy hats at the final plenary.

Discussion about the 2010 Colloquium began with a question by Rich Rosenfeld about plans to publicize the Colloquium within the US, especially among clinicians. He suggested that perhaps one plenary could focus on "How can Cochrane be an asset to your [clinical] society?" Michael Borenstein commented that we should think about other ways to publicize the Colloquium as well, e.g., mailings to individuals already involved in Cochrane. Other suggestions included blast emails, announcements in journals, and memos or blurbs to send to organizations to include with their mailings. There was general consensus with Bob Dellavalle's suggestion that a Public Relations Committee should be in contact with the various organizations to make sure the Colloquium is placed on the appropriate calendars. Ben Djulbevojc commented that it would be useful to highlight the relevance of Cochrane to the organization in the blurb, for example with links to guideline or guideline development. Marguerite Koster, Kaiser Permanente, then suggested that perhaps medical societies could fund specific Cochrane reviews needed to inform guidelines and that perhaps the Colloquium could have a workshop on building partnerships highlighting known successes.

6. Outreach/Issues/Announcements

- *Guidelines International Network (G-I-N)*: Rich Rosenfeld described the opportunities for Cochrane involvement at the upcoming G-I-N Annual Meeting to be held August 25 -28, 2010 in Chicago, Illinois. G-I-N is an international non-profit organization that was started in 2002, and currently is comprised of 96 organizations from various countries. Rich noted that there are synergies between the goals of G-I-N and Cochrane. He voiced the opinion that Cochrane should be a presence at the G-I-N meeting and asked for specific suggestions as to how to facilitate Cochrane involvement. Areas of possible involvement for Cochrane include consumer representation, education, panel participation, searching for trials,

implementation and understanding of reviews. Rich noted that there will be a panel at the G-I-N meeting on external peer review of Cochrane for guideline development.

- *Bureaucratic hurdles faced by reviewers when submitting Cochrane protocols:* Ambuj Kumar reported that he was involved in a situation in which he had prepared a Cochrane protocol, only to be told that the title had been transferred to a different Cochrane group. He was unsure of whom to contact and lamented the bureaucratic hurdles faced by potential Cochrane review authors. Roger Soll commented that this type of situation has been a problem in the past, but he expects to see a change in the “culture” with the appointment of David Tovey, Editor-in- chief of *The Cochrane Library*. Roger went on to say that this type of issue is expected to receive high priority by the Editor. In addition, Ambuj was instructed to contact the USCC in cases like this as it is the responsibility of Centers to advocate for individuals within their reference area.

It was also suggested that the various review groups find some way to thank the external peer reviewers. Currently they receive no recognition. Further, there is a real need to involve “new” physicians.

- *Cochrane response to comparative effectiveness research (CER):* Not discussed due to time constraints.
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