United States Cochrane Center


The Cochrane Collaboration

Preparing, maintaining and

promoting the accessibility of systematic reviews

of the effects of healthcare interventions
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<tr>
<td>AHRQ</td>
<td>Agency for Healthcare Research and Quality</td>
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<td>ARVO</td>
<td>Association for Research in Vision and Ophthalmology</td>
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<td>CAM</td>
<td>Complementary and Alternative Medicine Field</td>
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<td>CCNet</td>
<td>Cochrane Consumers Network and Field</td>
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<td>CCSG</td>
<td>Cochrane Collaboration Steering Group</td>
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<td>CCT</td>
<td>Controlled clinical trial</td>
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<td>CENTRAL</td>
<td>The Cochrane Central Register of Controlled Trials</td>
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<td>CEVG</td>
<td>Cochrane Eyes and Vision Group</td>
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<td>CEVG@US</td>
<td>Cochrane Eyes and Vision Group, US Satellite</td>
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<td>CRG</td>
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<td>CUE</td>
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<td>EBHC</td>
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<td>EPC</td>
<td>Evidence-based practice center</td>
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<td>HSSS</td>
<td>Highly sensitive search strategy</td>
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<td>JHSPH</td>
<td>Johns Hopkins Bloomberg School of Public Health</td>
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<td>Master List</td>
<td>Master List of Journals Being Searched</td>
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<td>NEI</td>
<td>National Eye Institute</td>
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<td>NIH</td>
<td>National Institutes of Health</td>
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<td>NLM</td>
<td>National Library of Medicine</td>
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<td>PaPas</td>
<td>Pain, Palliative and Supportive Care Group</td>
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<td>RCT</td>
<td>Randomized controlled trial</td>
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<td>RevMan</td>
<td>Review Manager</td>
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<td>Review group coordinator</td>
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<td>Abbreviation</td>
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<td>TSC</td>
<td>Trials search coordinator</td>
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<td>University of California, San Francisco</td>
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<td>UKCC</td>
<td>United Kingdom Cochrane Centre</td>
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<td>USCC</td>
<td>United States Cochrane Center</td>
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1. **Introduction**

The United States Cochrane Center (USCC) was established in December 2002 when the New England Cochrane Center Boston Office, the New England Cochrane Center Providence Office, and the San Francisco Cochrane Center merged to form a single registered entity with a central office and two branches. The central office is the first point of contact for the work of the Cochrane Collaboration in the United States and is responsible for fulfilling the Center’s core functions.

The central office of the USCC is at the Johns Hopkins University Bloomberg School of Public Health in Baltimore, Md (JHSPH); the Center Director is Professor Kay Dickersin.

2. **Mission**

The overall mission of the USCC is to further the Collaboration's goal of making widely available systematic reviews of research evidence on the effects of health care. A specific objective is to coordinate and support the USCC-initiated consumer coalition, Consumers United for Evidence-based Healthcare (CUE).

3. **Responsibilities of the USCC**

The core functions of the USCC are to provide support to Cochrane entities with a coordinating base in the US or one of the countries for which the USCC is the reference center; support new Cochrane review groups (CRGs), fields, and methods groups interested in registering with the Collaboration; and support individuals who seek information about the work of the Collaboration.

The USCC shares the same core responsibilities with other Cochrane Centers to:

- Ensure effective and efficient communication between the Center and members of other entities within the Cochrane Collaboration;
- Contribute to maintaining the Center’s Contact Directory;
- Create and maintain a Center Module, updated at least once annually;
- Ensure the sustainability and continuity of Center projects to forward the objectives of the Collaboration;
- Produce a strategic plan with targets and an annual report, which reports on progress in meeting these targets;
- Serve as an information source about the Cochrane Collaboration and support people who want to become involved, including authors, handsearchers, consumers, and others;
- Provide and facilitate training and support for authors, editors, coordinators, handsearchers, and other contributors;
- Support CRG editorial bases, methods groups and fields/networks located in countries for
which the Center is the reference center and where deemed appropriate by Center needs and resources;

- Promote accessibility to *The Cochrane Library* to healthcare professionals, consumers, the media and others;
- Handsearch general healthcare journals from the region and promote handsearching activities in the reference countries; and
- Submit handsearch results to CENTRAL.

In fulfilling these core functions, Centers are required to:

- Ensure effective and efficient communication and mediation between Center members and members of other entities for which the Center is a reference Center;
- Maintain their details in the Cochrane Contact Database (ARCHIE);
- Maintain a description of the Center’s activities in *The Cochrane Library* (Center Module) at least on an annual basis;
- Ensure sustainability and continuity of the Center’s program of work;
- Produce a strategic/business plan with targets and an annual report, which reports progress against these targets.

In addition to core obligations, the USCC has had a unique function that advances the Cochrane Collaboration’s mission. The USCC is responsible for developing, updating, and maintaining the Master List of Journals Being Searched (Master List), which includes over 3,060 journals being handsearched by members of the Cochrane Collaboration. The USCC has additional functions, including to:

- Develop and support a coalition of healthcare consumer advocacy groups, Consumers United for Evidence-based Healthcare (CUE);
- Identify quality checked citations for the National Library of Medicine (NLM) for retagging in MEDLINE as RANDOMIZED CONTROLLED TRIAL (RCT) [publication type (PT)];
- Monitor, and evaluate an online handsearching course; and
- Support Trials Search Coordinators (TSCs) and others who maintain specialized registers of trials to offer training, advice and guidance.

4. Funded Projects

4.1 Agency for Healthcare Research and Quality (AHRQ) conference grant

The USCC was awarded a 5-year conference grant in 2002 from AHRQ to conduct a series of conferences to increase US involvement in and contribution to the Cochrane Collaboration. The conference series in 2006 included two US Contributors’ Conferences, a series of hands-on training workshops, and development of a web-based distance education module on evidence-based healthcare (EBHC) for consumer advocates. An essential part of the conference and
workshop educational plan is evaluation of the workshops. All conference and workshop participants are asked to evaluate the sessions and subsequent workshops are modified accordingly. Resulting from the conferences and workshops will be a critical mass of US-based clinicians, educators, researchers, policymakers, and consumers trained to prepare and use the essential elements of evidence-based healthcare.

The AHRQ grant has also funded the creation and support of a coalition of healthcare consumer advocacy groups. The goal of CUE, founded in 2003, is to foster the growth of a critical mass of consumer advocacy organizations committed to integrating critical appraisal and the concepts of EBHC into their work. CUE meets annually to further its aims to build a coalition of health advocacy organizations who:

1. Incorporate evidence-based methods into their work;
2. Educate constituencies about evidence methods and interpretation;
3. Encourage dissemination of evidence-based findings; and
4. Develop a distance education module on EBHC for consumer advocates for unrestricted use.

Section 7.8 provides additional information on the activities of CUE.

4.2 National Eye Institute (NEI) contract

The US Satellite of the Cochrane Eyes and Vision Review Group (CEVG@US), based at the USCC, was awarded a 7-year contract in 2002 from the NEI to build a critical mass of US-based vision researchers and practitioners who are trained in preparing and using systematic reviews. In 2006, the CEVG@US held two workshops on how to perform a systematic review. Sections 7.9 and 8.1 provides additional information on the activities of CEVG@US.

4.3 Cochrane Collaboration Grant for MEDLINE Retagging Project

For 10 years (1994-2004), the USCC had a grant from the NLM to identify and retag controlled trial reports in MEDLINE. In 2005, the Cochrane Collaboration Steering Group (CCSG) provided funds to continue this project through December 2006. Detailed information on the MEDLINE Retagging Project is provided in Sections 7.1.1 and 7.2.1.

5. Boston Branch of the USCC

The Boston Branch of the US Cochrane Center is part of the Center for Clinical Evidence Synthesis (CCES) in the Institute for Clinical Research and Health Policy Studies, Tufts-New England Medical Center (Tufts-NEMC), Boston. Dr. Joseph Lau, Branch Director, directs CCES and its AHRQ Evidence-based Practice Center (EPC).

The Boston Branch of the USCC has had a special focus on methods research and training in
evidence synthesis. Through formal and informal training opportunities, the Branch educates the Tufts University-wide community and affiliated hospitals throughout New England about the Cochrane Collaboration. Branch faculty regularly teach courses on meta-analysis, introducing students and fellows to The Cochrane Library and the work of the Cochrane Collaboration. The Branch provides unique opportunities to individuals interested in gaining evidence synthesis skills and practical training beyond a single course through a mentorship program for those interested in publishing reviews, including in The Cochrane Library, thus continuing to increase the pool of likely future review authors available to CRGs.

6. **San Francisco Branch of the USCC**

The San Francisco Branch of the USCC, based at the University of California, San Francisco, has been involved in transitioning the development and management of Cochrane’s electronic Criticism Management System to Wiley InterScience, Inc., the new publisher of The Cochrane Library. The Branch supports the HIV/AIDS CRG and is involved in the management on conflicts of interest within the Cochrane Collaboration. The Branch is also active in promoting the Cochrane Collaboration in the Western United States.

7. **Progress Report on targets for 01/01/06 to 12/31/06**

Based on the USCC mission and responsibilities, performance targets, objectives and activities were developed to guide the work of the USCC in 2006. This section summarizes the achievements related to each 2006 performance target (see Appendix A for USCC Performance Targets for January 1, 2006 - December 31, 2006).

7.1. **Coordinate activities for the Cochrane Central Register of Controlled Trials (CENTRAL)**

7.1.1 **Perform and compile results of literature searches (MEDLINE search, handsearch results, and specialized register submissions) through Issue 1, 2006.**

In 2006, the USCC coordinated the following activities related to literature searches:

- **Search for and import citations from electronic search of MEDLINE.** The USCC conducts an annual electronic search of MEDLINE to identify new controlled trials not already tagged as RCT [PT]. To allow for the time lag for NLM indexing, the 2006 MEDLINE search will be completed in early 2007. After a quality control check, 1,176 records were submitted for retagging to the NLM (see Appendix B for 1994-2006 MEDLINE Retagging Submissions to the NLM). These citations are readily accessible and identifiable as RCT [PT] on MEDLINE.

- **Receive and process results of handsearching of journals:** Citations identified by individual handsearching of journals and conference proceedings are submitted quarterly to CENTRAL for processing. The USCC processed 9,507 handsearch submissions for
7.1.2 Coordinate, maintain, and regularly update the Master List of Journals Being Searched (Master List).

The USCC coordinates the Master List, which includes over 3,060 journals and conference proceedings that are handsearched by members of the Cochrane Collaboration to identify controlled trials. The Master List database is maintained through continuous updating which occurs whenever an entity notifies the USCC of a new search, completion of a search, or discontinuation of a search. To keep the Master List current, the USCC conducts an annual Master List update survey, through which the coordinators of all registered handsearches are asked to provide updated information about their handsearch activities via email. The annual Master List update survey conducted in September 2006 resulted in responses from 62 of 71 Cochrane entities with registered searches.

7.2 Work with the National Library of Medicine (NLM) to ensure that controlled trials included in MEDLINE are appropriately indexed as RCT [PT] (“MEDLINE Retagging Project”).

7.2.1 Receive, process, and quality check submissions of handsearch results from Cochrane entities, perform electronic search on MEDLINE, and submit the results to NLM.

The USCC has conducted an annual electronic search of MEDLINE to identify newly added RCTs that remain unindexed as such, using phases I and II of the Cochrane highly sensitive search strategy (HSSS). A complete search of the 2005 MEDLINE records was concluded during the Summer of 2006, resulting in submission of 1,176 citations to NLM for retagging with RCT [PT]. No handsearch records were received or processed in 2006.

7.3 Provide training and support for review authors, review group coordinators (RGCs), trial search coordinators (TSCs), editors, handsearchers, consumers and those responsible for training activities.

7.3.1 Make available on the worldwide web and elsewhere guides for Cochrane procedures.

Training and supporting review authors, TSCs, RGCs, and handsearchers are core functions of the USCC. Training materials are regularly reviewed and modified to ensure that they are accurate, current and useful. The following guides, handbooks, other documents, and Internet links are accessible on the USCC website:

- Evidence-based healthcare and general information;
Handsearcher resources (e.g., Handsearcher Training Manual);
TSC and CENTRAL resources (e.g., TSC Guide, CENTRAL Management Plan, etc.); and
Documents and software of the Cochrane Collaboration.

The USCC strives to make resources easily accessible to affiliated groups and individuals. In 2006, USCC staff completed a comprehensive review of its website resource pages, ensuring that all links were active, updating all pages and their contents (see 7.4.4).

7.3.2 Develop and facilitate Cochrane training workshops and courses.

The USCC developed and presented the following training workshops in 2006:

- Completing a Cochrane Systematic Review. This workshop was offered three times: February 5-7, 2006 in Sarasota, Florida; May 10-12, 2006 in Atlanta, GA; and September 26-30, 2006 in Baltimore, Maryland, (faculty included Kay Dickersin, Roberta Scherer, and Satyanarayana Vedula of the USCC, Ann Ervin of the CEVG@US, and others);

- Evidence-based Healthcare: Searching for the Evidence. One day workshop for medical librarians: May 10, 2006 in Atlanta, GA, (Kay Dickersin and Roberta Scherer of the USCC and others);

- Review of the Distance Education Program for Consumers on Evidence-based Healthcare. CUE 2006 Annual Meeting, September 21, 2006 in Washington, DC. (Kay Dickersin and Marianne Hamilton of the USCC, and others);

- Train the Trainers: Techniques for Training Systematic Review authors. XIV Cochrane Colloquium, October 24, 2006 in Dublin, Ireland. (Roberta Scherer of the USCC, Denise O’Connor, Nandi Siegfried, and Joseph L. Mathew);

- Handsearching Online Journals – Do We Need New Rules?: XIV Cochrane Colloquium, October 26, 2006 in Dublin, Ireland. (Roberta Scherer of the USCC and Ann Ervin of the CEVG@US)


In addition to these training workshops, web-based distance education courses were revised or under development in 2006:

- Handsearching: Identifying and Classifying Controlled Trial Reports: This course was developed in 2003 and revised in 2004 and 2005. In 2006, the course was transferred to
the Johns Hopkins Bloomberg School of Public Health WebCT platform. Approximately 131 individuals registered for the course in 2006, representing a wide cross-section of countries (e.g., Brazil, Norway, Thailand, India and Iran) and diverse professions (e.g., clinicians, informatics, epidemiologists, nurses, librarians, lawyers, and consumers) (see Appendix C for a description of the Handsearching distance education course).

- **Translating Critical Appraisal of a Manuscript into Meaningful Peer Review**: Development of this course began in 2004 and has continued through 2006. The course includes didactic lectures and a hands-on module where participants can write and receive faculty feedback for the manuscript critiques they prepare (see Appendix D for the course overview).

- **How to Evaluate Medical Evidence: A Course for Consumers (current working title)**: In 2004, the USCC consumer coalition, CUE, formed a committee to design a web-based course for consumers and developed a draft outline of the course designed to educate consumers about ways to search for, evaluate, use and improve healthcare evidence. In 2005, the USCC engaged Musa Mayer, M.S., M.F.A., an author, breast cancer survivor, and consumer advocate to assist in developing the course modules. In 2006, the course was beta-tested and the six planned modules were drafted (see Appendix E for the course abstract). Launch is planned for 2007.

### 7.3.3 Provide ongoing support and training through individual contact, email discussion lists, and directories.

USCC staff communicate regularly with members of various Cochrane entities and provide review authors with ongoing support and training through mentoring and methodological consultation. With support from the NEI, the Center provides US-based authors working on Cochrane systematic reviews related to eyes and vision with a methodologist who prepares materials for and works with authors via email, telephone and in-person consultation. Twenty-seven review authors received technical assistance from USCC staff in 2006 (see F for a list of review topics and authors). The USCC offers a quiet space and one-on-one support for review authors who wish to spend mini-sabbaticals to work on their reviews. In 2006, one review author spent time at the USCC working with staff on his review. Two additional review authors also spent several months at the USCC offices working on their reviews as part of a “Finishing School” that is offered by the USCC. See Section 7.3.1 for additional training and support information.
7.4 Promote awareness of the Cochrane Collaboration and access to Cochrane products.

7.4.1 Plan and host the bi-annual US contributors’ conference.

In July 2006, the USCC hosted the bi-annual US contributors’ conference and invited systematic reviewers (Cochrane and non-Cochrane) from all of North America to participate in a conference that looked at the ways systematic reviews are being conducted and used across a wide variety of disciplines and organizations. The goal was to bring together the diverse groups producing and using systematic reviews to learn from each other and to stimulate thinking about our work in new ways. “Encompassing diversity in systematic reviews,” was chosen as the title of the conference to reflect the overall objectives, which were:

- To create and strengthen partnerships with others in the systematic review world as well as with policymakers, consumers, providers, educators, and others;
- To investigate ways to improve methodology and quality of systematic reviews; and
- To build a knowledge base through diversity in systematic reviews.

The conference agenda included plenary sessions, panel discussions, workshops, and poster sessions. The speakers and participants – representing the fields of healthcare, social sciences, toxicology, biostatistics, health policy, and others – hailed from the Cochrane and Campbell Collaborations, as well as other groups doing and using systematic reviews, government agencies, private foundations and organizations, advocacy organizations, journals, and educational and research institutions (see Appendix H for the conference agenda). The complete meeting report is available online at [www.cochrane.us](http://www.cochrane.us) under “Meeting & Conference Reports”.

7.4.2 Ensure that individuals (including the media and consumers) and institutions within the region served by the USCC are aware of all aspects of the Cochrane Collaboration and the USCC; highlight Cochrane activities in presentations and reports to health professionals, consumers, and others whenever relevant.

Promoting awareness of the Cochrane Collaboration is a critical USCC objective. To achieve this objective, USCC staff make presentations about the Collaboration to key audiences to provide greater understanding of and access to *The Cochrane Library* and to build stronger partnerships with the media and healthcare consumers. In 2006, USCC staff participated in programs and made presentations highlighting Cochrane activities, including evidence-based healthcare and the Cochrane Collaboration, consumer advocacy and access to online healthcare information, and the need for a global clinical trials registration system. USCC staff presentations are listed in Appendix G.
7.4.3 Work to ensure that *The Cochrane Library* is made available and accessible to regional institutions, government agencies, professional organizations and others.

Presentation of *The Cochrane Library* is a regular feature of USCC staff presentations, workshops, and meetings. Promotional materials for *The Cochrane Library* are distributed to workshop and meeting participants. To increase the availability and accessibility of *The Cochrane Library* in the US, John Wiley and Sons, Inc. continues to provide free 30-day access to all USCC-sponsored workshop participants. The USCC also encourages institutions, organizations and colleagues to expand subscriptions to Cochrane products.

An example of current access to *The Cochrane Library* includes free access for all CUE members representing advocacy organizations. Other examples include: (1) the state of Wyoming offers free access to *The Cochrane Library* to its residents; (2) the National Institute of Child Health and Human Diseases provides the complete text of Cochrane reviews produced by the Cochrane Neonatal Review Group; (3) abstracts of Cochrane systematic reviews are available on MEDLINE, and are freely available on the Cochrane Collaboration and Wiley Interscience web pages. The American Academy of Ophthalmology provides a link to *The Cochrane Library* on its website.

7.4.4 Encourage news media to use *The Cochrane Library*, provided free of charge through John Wiley and Sons, Inc.

Interactions with the media include personal contacts by telephone, email, and at meetings. Some contacts have resulted in media highlighting Cochrane reviews. For example, in 2006, Ms. Sara Rajaran, student newsletter editor at Washington University in St. Louis, Mo telephoned the USCC to discuss Cochrane vaccine trials. Ms. Rajaran subsequently wrote a report and published an article as an editorial in the student newsletter.

7.4.5 Work with physicians, consumers, government and others to identify ways in which Cochrane reviews can better meet their needs.

In 2006, USCC staff met with individuals and small groups from schools of medicine and public health, hospitals, government agencies and consumers, who requested information on how Cochrane reviews can better meet their needs.

The USCC is committed to increasing consumer involvement in Cochrane activities and increasing consumer awareness of Cochrane products. In addition to developing an online course targeted to consumer advocates, a number of other consumer-focused activities were undertaken in 2006:

- The fourth annual USCC CUE meeting was held in Alexandria, Va on September 21, 2006. The goals of the meeting were to provide critical appraisal education and training,
promote professional development, and foster collaboration among consumer organizations and the research community.

- The USCC provided funds for four members of the CUE to attend the XVI annual Cochrane Colloquium in Dublin, October 23-26, 2006.

- The USCC offered a workshop at the XVI annual Colloquium in Dublin, entitled *Critical appraisal skills for consumers: Understanding the evidence using an online course on Evidence-based Healthcare for Consumer Advocates*, which was attended by 24 individuals.

7.4.6 **Maintain and expand the USCC’s web presence.**

The USCC continues to expand its presence on the Internet. Continued maintenance and development of the USCC web presence increases visibility of the Cochrane Collaboration. In 2006, USCC staff completed a comprehensive review of the website and improvements included:

- Updated the “EBHC resources” page;
- Updated all active links on the website;
- Updated references to CENTRAL as “Archived,” where appropriate;
- Established template for a new USCC website based on the Cochrane Entity Web Builder Template;
- Created new pages for the workshop registration system using a new template;
- Updated “about the USCC” pages;
- Created a new email account;
- Created two Listservs - one for the USCC and one for CUE;
- Continuously updated the homepage for all workshops, conferences, meetings, announcements and news;
- Moved the USCC website from www.Media3.net to JHSPH web servers; and
- Posted report documents for past events.

7.5 **Perform USCC administrative functions**

7.5.1 **Perform handsearching of US medical journals and conference proceedings**

A total of 50 journal-years (from US medical journals and conference proceedings) were handsearched by the USCC in 2006 resulting in the identification of 1,016 RCTs and 400 CCTs of which 738 RCTs and 383 CCTs had not been indexed in MEDLINE with either RCT [PT] or CONTROLLED CLINICAL TRIAL (CCT) [PT].
7.5.2 Participate in annual meetings at the 2006 Cochrane Colloquium in Dublin

The USCC hosted the 24 October 2006 US Contributors’ Meeting in Dublin, Ireland. The conference was attended by approximately 40 participants. Meeting attendees introduced themselves and provided a brief report on the activities of the group they represented. Dr. Lorne Becker, co-chair of the Cochrane Collaboration Steering Group (CCSG), reported on the activities of the CCSG. Participants discussed upcoming Cochrane training activities in the US, outreach and disseminations efforts, and funding barriers and opportunities (see Appendix I for the meeting minutes).

In addition to the US Contributors’ Meeting, USCC staff participated in several other Center-related meetings at the Colloquium:

- Meet the Entities exchange;

- Cochrane Center Staff Meeting on October 25, 2006, where staff from the 12 Cochrane Centers met to exchange information and ideas. Updates were given from the CCSG meetings and Center Directors’ meetings to highlight important information. The attendees broke into small groups to discuss topics that included: training and support; support for and dissemination in developing countries; communication and dissemination; and mandatory functions.

- Cochrane Center Directors’ Meeting, held on October 23, 2006.

In addition, Kay Dickersin served as a member of the Thomas C. Chalmers Award Selection Committee. The prize is awarded to the best oral paper and poster presented at the Cochrane Colloquium which address a methodological issue related to systematic reviews that demonstrates: originality of thought, high quality science, interpretation of the relevance of the issue to advancing methodology of systematic reviews, and clarity of presentation (oral or poster).

Kay Dickersin participated in the mid-year Center Directors’ meeting and the joint meeting of the Center Directors and CCSG, in Khon Kaen, Thailand in April, 2006.

7.5.3 Perform general Center administrative functions

The USCC performed general Center administrative functions, as follows:

- Initiated a comprehensive review and update of the US Cochrane Contact Directory: USCC staff used information from workshop and meeting attendance, The Cochrane Library,
ARCHIE, and other sources to update the Directory, which includes names, postal and email addresses, and other information;

• Updated the USCC Handbook to incorporate new documentation and modify existing materials, as needed;

• Completed and submitted required documentation regarding the Center’s activities, including the Center’s module and bi-annual monitoring report. The module continues to be updated quarterly, or as needed. This Annual Report lists the USCC’s progress on 2006 targets and presents targets for 2007 (see Appendix J);

• Responded to all queries related to the Cochrane Collaboration throughout the year.

7.6 Seek and obtain funding support for USCC activities

7.6.1 Seek funding for the continuation of the MEDLINE Retagging Project to ensure that all controlled trials on MEDLINE are indexed appropriately on MEDLINE and included in CENTRAL.

The USCC used available funds to continue the MEDLINE Retagging Project through December, 2006, and did not seek additional funds.

7.6.2 Continue working with funders to support USCC activities.

The Milbank Memorial Fund provided support for the USCC Advisory Board meeting in July 2006, held in conjunction with the North American Conference on Systematic Reviews. The USCC continues to maintain close relationships with the organizations represented by the members of the Advisory Board and continuously evaluates potential funding opportunities (see Appendix K for current list of USCC Advisory Board members).

In 2006, the USCC continued to receive support from AHRQ. The continuation application for Year 05 of the JHSPH AHRQ Large Conference Grant No. R13 HS13368-05 entitled “Training for US Cochrane Contributors and Others,” was approved for its final year (September 2006-2007).

A progress report on the activities of CEVG@US was submitted to NEI in May 2006 in fulfillment of the terms of our 7-year contract. The aims of this contract are to develop a critical mass of US-based vision researchers and practitioners trained in preparing and using systematic reviews and to increase awareness of evidence-based healthcare in eyes and vision.

In October 2006, the USCC submitted a conference grant to AHRQ requesting funds to host a series of conferences related to translating research into practice and policy.
7.6.3 Work with USCC branches and US-based entities to identify sources of funding and to leverage combined efforts to obtain funding.

The USCC provided assistance to Dr. Robert Dellavalle, Denver Colorado, in his grant application seeking funds to support a Skin Group satellite. Dr. Scherer will assist with handsearching efforts should the application be approved and funded.

7.7 Conduct and disseminate research

7.7.1 Conduct methodological research on issues of importance to systematic reviews, trials registers, and evidence-based healthcare.

A core objective of the USCC is to conduct methodological research in systematic reviews, trials registers, and meta-analysis. To date, targeted research funding has not been obtained, and a modest program is ongoing. Research activities in 2006 included:

- **The “Evidence Gap” Project** was initiated to identify the unanswered research questions or “evidence gaps” in the treatment of eye disease and practice guidelines. Starting with practice guidelines available from vision related professional organizations, we have identified research questions with and without existing high-level evidence. We will use the information obtained to prioritize research questions requiring new trials and those requiring systematic reviews. This research is in the data collection stage.

- **Harms Reported in Abstracts of Trial Results from Conference Proceedings** is a project aimed at describing the frequency of reports of harms in abstracts describing results of randomized or controlled clinical trials, and presented at the Association for Research in Ophthalmology and Vision Science (ARVO) for the years 2001, 2004, and 2005. This research was presented at the 2006 Cochrane Colloquium.

7.8 Facilitate the development and growth of the USCC’s consumer coalition, Consumers United for Evidence-based healthcare (CUE)

7.8.1 Continue development of CUE infrastructure and functions.

As the scientist partner of CUE, the USCC convened regular CUE Steering Committee teleconferences, supported the CUE Annual Meeting, encouraged CUE members to develop and implement relevant projects, and facilitated a successful membership drive in 2006. CUE 2006 projects included:

- Initiative to obtain a national license to *The Cochrane Library*;
- Development of an online course on EBHC for consumer advocates; and
• Development of membership criteria and an application form for the membership drive.

Quarterly teleconferences of the CUE Steering Committee have resulted in forwarding the momentum of the group. In 2006, the CUE Steering Group teleconferences centered on planning the annual meeting, discussing the membership drive, and planning and implementing group projects. These planning activities have resulted in significant strengthening of the leadership of the Steering Committee and resulting coalition infrastructure.

The 2006 annual CUE Meeting, convened on September 21, 2006 in Alexandria, Va, aimed to provide critical appraisal education and training, promote professional development, and foster collaboration among consumer organizations and the research community. The agenda included a keynote address, plenary sessions, panel discussion, and open forum (see Appendix L). The 25 meeting participants and observers heard from the keynote speaker, Dr. Alejandro Jadad of the Centre for Global eHealth Innovation, lobbyist Dr. Ramón Castellblanch, and current CUE members. Speaker topics included: what is evidence-based healthcare (EBHC)?, practical applications of EBHC, and how consumer advocates might use EBHC in their advocacy efforts. The meeting also provided an opportunity to welcome the nine new CUE member organizations in attendance. Recurrent themes were finding ways to make systematic reviews more accessible to consumers, increasing awareness about EBHC and CUE, and securing financial support and partnerships to continue the growth and development of CUE.

In 2006, CUE launched a membership drive with the goal to increase the number of member groups to 40 before the 2006 Annual Meeting in September. CUE members compiled a list of advocacy groups in the US and identified the need for promotional materials on CUE’s activities to send to potential new members. A brochure highlighting CUE activities and a new member application form were developed.

Based on existing bylaws, the CUE Steering Committee set criteria for invitation or nomination of new organizational members by current Coalition members. CUE members agreed on procedures for final approval of potential member applications. Eligible applicant organizations must:

• Possess an interest in EBHC;
• Provide contact information;
• Provide information on constituents;
• Represent a health advocacy organization or a consumer-focused organization;
• Are not dominated by pharmaceutical companies, providers, or other vested interest in any way that could cause the organization to compromise or be viewed as possibly compromising, its commitments to consumers;
• Commit to participating in CUE projects, an annual meeting, and correspondence throughout the year; and
• Be approved by a two thirds majority of the CUE Steering Committee.
The 2006 CUE membership drive resulted in 11 new member organizations accepted for membership.

7.8.2 Continue to develop and test an online distance education course for consumer advocates.

As noted in Section 7.8.1, CUE members proposed a web-based course for consumers and developed a draft outline designed to educate consumers about ways to search for, evaluate, use and improve healthcare evidence. Musa Mayer, M.S., M.F.A., an author, breast cancer survivor, and consumer advocate worked with the USCC to implement and refine the draft design and further develop the course modules. Throughout 2006, all six planned modules of the course were drafted and beta-tested by USCC staff, CUE members, and others, who reviewed and evaluated the modules, and offered feedback. Members of the Cochrane Consumer Network (CCNet) reviewed the final modules and provided feedback at the USCC-sponsored workshop at the 2006 Cochrane Colloquium.

This free, web-based course was developed to help consumer advocates understand EBHC and to find, critically appraise, and use source information to inform health care decision making. After taking the course, participants should be able to:

- Understand what EBHC is and how they can use it to inform their own healthcare decisions;
- Find reliable sources of evidence-based information;
- Critically appraise information found in clinical guidelines, healthcare web sites, the lay news media, and journal articles (primary research and systematic reviews).

7.8.3 Strengthen the ties between CUE and the Cochrane Collaboration Consumer Network (CCNet).

With the support of the USCC, CUE members are working to strengthen the ties with CCNet by collaborating on shared goals and activities.

- Support outreach activities leading to a national subscription to The Cochrane Library: CUE members believe that consumers and consumer advocates should be educated about EBHC before taking the lead on advocating publicly for a national subscription to The Cochrane Library. Dr. Barbara Warren, PsyD, CUE member, CUE Steering Committee Co-chair, and representative of the National Coalition for Lesbian, Gay, Bisexual and Transgender Health, has built strong ties with John Wiley & Sons (the publisher of The Cochrane Library) and CCNet as part of the effort. The online course on EBHC, to be launched in 2007, provides an additional pillar of support.
• Participate in Cochrane Collaboration activities: Maryann Napoli, CUE member and representative of the Center for Medical Consumers, has participated for many years in the Cochrane Collaboration as a consumer peer reviewer. During the 2006 CUE Annual Meeting, she and USCC Consumer Coordinator Marianne Hamilton provided information to CUE members about how to serve as consumer peer reviewers and how to participate in writing plain language summaries for the published reviews. She encouraged CUE members to subscribe to Consumers’ Digest, an international e-discussion for consumers where Cochrane review groups routinely advertise for consumer reviewers and peer review of Cochrane reviews.

7.9 Work collaboratively with the CEVG@US satellite office

7.9.1 Share materials and resources related to educational projects

See Section 8.1 for details regarding the activities of the CEVG@US and Section 7.3.2 for collaborative educational projects.

7.9.2 Collaborate with CEVG@US on research projects.

See Section 8.1 for details regarding the activities of the CEVG@US and Section 7.7 for collaborative research projects.

8. US-based Cochrane Review Groups

8.1 Eyes and Vision CRG-US Satellite (CEVG@US)

The CEVG registered with the Cochrane Collaboration in April 1997. The editorial base is located at London School of Hygiene and Tropical Medicine, in London, UK; the Coordinating Editor is Richard Wormald, FRCS, FRCOphth, a consultant ophthalmologist. CEVG@US members serve as CEVG editors: Kay Dickersin has been an Editor since the group’s inception, and Roberta Scherer serves as a Methodological Editor.

On April 22, 2002, the NEI of the National Institutes of Health (NIH) funded the CEVG@US (first at Brown University and beginning October 1, 2005 at JHSPH) to develop a critical mass of US-based individuals who would contribute to the CEVG in the US (CEVG@US). The mission of the CEVG is to prepare systematic reviews of interventions used to prevent or treat eye diseases and/or visual impairment.

In 2006, the CEVG@US provided assistance to authors working on Cochrane reviews, facilitating submission of seven review titles, 10 protocols and four reviews. Seven protocols, four reviews, and one update of a review were published in 2006.
CEVG@US also oversees and coordinates handsearching training open to the Cochrane Collaboration and others as well as handsearching efforts for the CEVG. A web-based version of the handsearcher training course, originally released in 2003 to the public free of charge, was updated to Version 2 in February 2005. The online course was transferred to the JHSPH WebCT platform in July 2006. Hand searches in 2006 identified 1,016 RCTs and 400 CCTs, of which 738 RCTs and 383 CCTs had not been indexed in MEDLINE with either RCT [PT] or CCT. Unindexed trials were submitted to the CEVG for inclusion in their specialized register after MeSH indexing by a trained MEDLINE indexer. The CEVG register contained 9,507 reports as of Issue 1, 2007 of The Cochrane Library.

The CEVG@US satellite hosts the CEVG website (http://www.cochraneyes.org) and has collaborated with the editorial base in the development of short- and long-term priorities for improving site navigation and layout. The website includes links from vision-based organizations (including the Association of Vision Science Librarians, the Institute of Ophthalmology, and the American Academy of Ophthalmology), a site map for improved navigation, and a listserv to encourage interested individuals to sign up to receive email notification of newly-published Cochrane titles, protocols, updates and reviews.

### 8.2 HIV/AIDS CRG

The Cochrane HIV/AIDS CRG was officially registered in March 1997. Its editorial base is at the University of California, San Francisco, with a satellite editorial base at the South African Cochrane Centre, Cape Town. The Group's mission is to conduct systematic reviews of randomized controlled trials, and other rigorous controlled studies, on the prevention and treatment of HIV infection and AIDS. An affiliate of the International AIDS Society, the UCSF Institute for Global Health, and the UCSF AIDS Research Institute, the HIV/AIDS group is an international network of health care professionals, researchers, and consumers working to prepare, maintain, and disseminate systematic reviews on the prevention and treatment of HIV infection and AIDS.

The HIV/AIDS group produces systematic reviews in the four following areas of HIV/AIDS research: Behavioral, Social, and Policy Prevention; Biomedical Prevention; Therapeutics, Diagnostics, and Prognostics; and Health Services.

In early 2006, the HIV/AIDS Group was asked to take on the responsibilities of the STD Group, which encountered funding difficulties. The STD Group, currently based at the Centro de Estudos de AIDS/DST do Rio Grande do Sul in Porto Alegre, Brazil, is functioning as a satellite of the HIV/AIDS Group. The goal of the STD Group is to regain independent status in 2007.
8.3 Neonatal CRG

The Neonatal Group, registered in April 1993, currently is located at the University of Vermont and is funded through a contract with the National Institute of Child Health and Human Development. Funding covers major editorial as well as administrative needs. For Issues 1-4, 2006 of *The Cochrane Library*, the Neonatal Review Group submitted 17 new protocols, 17 new reviews, and 15 review updates. As of Issue 4, 2006, the Neonatal Group has completed 221 reviews. Although now US-based, the Neonatal Group has benefitted from strong support in the UK and Australia.

8.4 Prostatic Diseases and Urologic Cancers CRG

The Prostatic Diseases and Urologic Cancers CRG, registered in December 1996, is dedicated to producing reviews of the best available evidence for interventions in the prevention, treatment and rehabilitation of benign and malignant prostate conditions (benign prostatic hyperplasia, prostate cancer, prostatitis), urologic cancers (bladder, renal, testicular, penile, and urethral), and erectile dysfunction. Located at the Department of Veterans Affairs Medical Center in Minneapolis, Minnesota, the Group has 68 active members, including two consumers and seven members from developing countries. Over the course of the year, this CRG published five new protocols, 10 new reviews, and lists 13 review titles. Fifteen protocols and two reviews were in editorial process at the year’s end. To date, the Prostatic Diseases and Urologic Cancers CRG has published 26 reviews and 14 protocols. The group’s specialized register contained 3,352 studies. Information about the Prostatic Diseases and Urologic Cancers CRG can be obtained from the review group coordinator, Roderick MacDonald, at roderick.macdonald@med.va.gov.

8.5 Pain, Palliative, and Supportive Care, Pain and Headache Pain section (PaPas) CRG

PaPas was registered with the Collaboration in 1998. It focuses on reviews for the prevention and treatment of pain, end-of-life palliative care, and the support of patients, families, and caregivers. PaPas covers four main topics: acute pain, chronic pain (both related and unrelated to cancer), palliative care, and supportive care. While the editorial base is located at the Churchill Hospital in Oxford, England, two editors are based in the US. Dan Carr of the New England Medical Center in Boston, Massachusetts, is lead editor for the pain reviews, and Doug McCrory of the Duke University Center for Clinical Health Policy Research is lead editor for the headache pain reviews. By the beginning of 2007, there were 490 active members of this group, two of whom were consumers and 13 of whom were from developing countries. During 2006, the PaPas CRG published 16 new protocols, 12 new reviews, one substantive update and two minor updates to a review; 17 titles were registered. In May 2007, 14 draft protocols and nine draft reviews or updated reviews were in the editorial process. The specialized register contained 28,127 studies. More information about PaPas can be found on its website at http://www.jr2.ox.ac.uk/cochrane/.
9. **US-based Cochrane Fields**

9.1 **Complementary and Alternative Medicine (CAM) Field**

The CAM Field was established in 1996 to meet the growing need for evidence-based research in complementary and alternative medicine (CAM). The field is dedicated to producing systematic reviews of RCTs in areas such as acupuncture, massage, chiropractic, herbal medicine, and homeopathy. The field is based at the University of Maryland, School of Medicine in Baltimore, Maryland. Brian Berman is Field Coordinator and Eric Manheimer Field Administrator. The CAM Field's work is supported by a grant from the US National Institutes of Health, Center for Complementary and Alternative Medicine.

The CAM Field has been active in identifying, reviewing, and disseminating evidence on CAM therapies, and CAM Field staff dedicate much of their effort to preparing Cochrane reviews. For example, Brian Berman and Eric Manheimer have each co-authored a systematic review that has been published on *The Cochrane Library* in the past year. The CAM Field also contributes to the development of the database of CAM-related reviews by awarding a bursary each year to Cochrane reviews for which substantial progress has already been made and whose completion has been stalled due to a lack of funding. In addition, the CAM Field contributes to review preparation by hosting training workshops for CAM review authors; writing articles and book chapters about systematic reviews in CAM; and working with international research scholars at the CAM Field base, undertaking fellowships or sabbaticals with a focus on systematic reviews. Finally, the field facilitates Cochrane CAM review preparation by responding, on an *ad hoc* basis, to requests for peer-review authors from coordinators of Cochrane review groups. The field also maintains a register of CAM trials, which they submit regularly to CENTRAL. The field's NIH funding partially supports work on CAM Field-related projects that are undertaken at the Thomas Chalmers Center, based-at the Children's Hospital in Ontario.

The CAM Field dedicates extensive effort to further disseminating Cochrane reviews to the CAM research and practice communities, as well as to the general public. The Field's column in the journal *Explore*, for example, is designed to promote the awareness of the Cochrane Collaboration and to improve the understanding of randomized trial and systematic review methodology among CAM practitioners and researchers. The field works in collaboration with the Cochrane Consumer Network to effectively and efficiently communicate the message of Cochrane CAM reviews to the general public, by producing streamlined and simplified summary overviews in lay language.
9.2 Health Care of Older People Field

The Health Care of Older People Field was re-established in August 2005. Leadership is shared by David J Stott and Peter Langhorne at the University of Glasgow, Gil Ramirez at Charles R Drew University of Medicine and Science, and Shelley de la Vega at the University of the Philippines. Field coordination is provided by David J Stott at the University of Glasgow.

9.3 Primary Health Care Field

The Primary Health Care Field was registered with the Cochrane Collaboration in 1993, with the aim of improving the safety and effectiveness of care provided by primary care practitioners by disseminating relevant Cochrane information to clinicians, consumers, and other interested parties. In 2006, the field transitioned from US-based to Europe-based leadership, held jointly by Jaap van Binsbergen, Floris van de Laar (Netherlands), Tom Fahey (Ireland) and Bruce Arrol (New Zealand).

9.4 Behavioral Medicine

The Cochrane Behavioral Medicine Field was officially registered with the Cochrane Collaboration in 2006. The goal of this Cochrane field is to increase and improve the evidence-base of behavioral medicine interventions through the facilitation of collaborations between behavioral medicine society affiliates and Cochrane review group affiliates. It is based in New York, at the Columbia College of Physicians and Surgeons, and convened by Karina Davidson, PhD. Louise Falzon is the trials search coordinator. The Advisory Board is composed of 14 individuals representing seven different countries.

This field focuses on interventions that improve health outcomes through behavioral mechanisms alone or in combination with other therapies. These types of interventions are performed by many types of practitioners (e.g., physicians, psychologists, psychiatrists, nurses, nutritionists, etc.) in a variety of settings for many of the conditions covered by Cochrane review groups.

Recent field activities include the development of a website (www.cochranebehavmed.org) with a searchable database of behavioral medicine-specific citations (RCTs, systematic reviews), resources for systematic review authors and others, a survey to join the field, a survey to submit descriptions of work-in-progress for the database; the weekly Behavioral Medicine Alert, a digest of recent behavioral medicine citations; monthly Update emails (currently reaching over 160 individuals); systematic review-related workshops at Columbia University; and involvement of two volunteer hand searchers.
10. Update on US-based Methods Groups

10.1 Cochrane Screening and Diagnostic Tests Methods Group

The Cochrane Screening and Diagnostic Tests Methods Group is a fully operational group dedicated to evaluating evidence of the reliability and validity of screening and diagnostic tests. Work continued on development of the Handbook, design of software that will be incorporated into RevMan, and infrastructure of the Cochrane Diagnostic Reviews (CDR). The Cochrane Screening and Diagnostic Tests Methods Group is co-convened by Constantine Gatsonis of Brown University in Providence, RI and Jon Deeks of Oxford University.

11. Performance Targets

See Appendix J for the USCC performance targets for 2007.

12. USCC Contact Information, current

12.1 USCC, Baltimore, MD

Director, USCC: Kay Dickersin, PhD

Contact Person: Kelly S. Manos, MAS, CCRP
Coordinator, USCC
Johns Hopkins Bloomberg School of Public Health
615 N. Wolfe Street, Room E6014
Mail Room W5010
Baltimore, Maryland, USA 21205
Telephone: +1-410-502-4640
Fax: +1-410-502-4621
Email: uscc@jhsph.edu
kmanos@jhsph.edu
Web page: http://www.cochrane.us
12.2 Boston Branch

Director: Joseph Lau, MD

Contact Person: Deirdre DeVine, MLitt
Coordinator, Boston Branch of the USCC
Division of Clinical Care Research
New England Medical Center, NEMC#63
750 Washington St
Boston, Massachusetts, USA 02111
Telephone: +1-617-636-5133
Fax: +1-617-636-8023
Email: ddevine1@tufts-nemc.org

12.3 San Francisco Branch

Co-Directors: Lisa Bero, PhD
Drummond Rennie, MD

Contact Person: Erika Campbell
Administrator, San Francisco Branch of the USCC
University of California
Suite 420
3333 California Street
San Francisco, California, USA 94118
Telephone: +1-415-476-4958
Fax: +1-415-502-8227
Email: campbelle@pharmacy.uscf.edu
Web page: http://www.uscf.edu/sfcc

13. Full and part-time staff at the USCC Offices in 2006

Director: Kay Dickersin, PhD

Director, Boston Branch: Joseph Lau, MD

Co-Directors, San Francisco Branch: Lisa Bero, PhD
Drummond Rennie, MD

Associate Director: Roberta W. Scherer, PhD

Associate Director, Boston Branch: Alexia Antczak-Bouckoms, DMD, Dsc
Coordinators: Laura Coe, MPH (through 03/22/06)
Kelly S. Manos, MAS (from 03/08/06 to present)
Deirdre DeVine (Boston Branch)
Erika Campbell (San Francisco Branch)

Coordinator, CENTRAL-Related Activities: Elena Glatman, MA (through 12/31/06)

Consumer Coalition Coordinator: Marianne Hamilton, MPA

Systematic Review authors: Stephen Gichuhi, MD, MBA, MSc (from 08/02/06)
Tianjing Li, MD
Satyanarayana Vedula, MD (through 06/19/06)

Handsearchers: Sylvia Shi
Janice Son

Master List Processor: Arisha Ashraf (from 11/29/06 to present)

14. Sources of funding and support

14.1 Contracts and grants

14.1.1 USCC - National Eye Institute (NEI)

Source: National Eye Institute
Title: Support for US Activities of the CEVG within The Cochrane Collaboration
PI: Kay Dickersin, PhD
Dates: April 22, 2002 - April 3, 2009
Funding: $5,381,920
Specific Aims: To develop a critical mass of US-based vision researchers and practitioners who are trained in preparing and using systematic reviews
14.1.2  **USCC - Agency for Healthcare Research and Quality (AHRQ)**

Source:  Agency for Healthcare Research and Quality  
Title:  Training for US Cochrane Contributors and Others  
PI:  Kay Dickersin, PhD  
Dates:  September 30, 2002 - September 29, 2007  
Funding:  $2,383,838  
Specific Aims: To conduct a series of educational conferences to increase involvement in The Cochrane Collaboration

14.2  **USCC - Milbank Memorial Fund**

Source:  Milbank Memorial Fund  
Title:  North American Conference on Systematic Reviews: Encompassing Diversity in Systematic Reviews  
PI:  Kay Dickersin, PhD  
Dates:  July 13-14, 2007  
Funding:  USCC Advisory Board travel support  
Specific Aims: To support travel of USCC Advisory Board members to attend the North American Conference on Systematic Reviews: Encompassing Diversity in Systematic Reviews and the 2006 Advisory Board meeting.

14.3  **USCC San Francisco Branch - None**

14.4  **USCC Boston Branch - None**

15.  **Acknowledgments**

The USCC staff thanks everyone who has contributed to the success of the Center. Funders have provided support to allow the Center to carry out the activities reported for 2006. Special thanks go to individuals who have contributed their time and expertise as a member of the Advisory Group, faculty for one of our training programs, investigator on a project, or as a consumer advocate involved in CUE. Each contribution is recognized and very much appreciated.
Appendix A

United States Cochrane Center
Performance Targets for January 1 - December 31, 2006

1. Target: Coordinate activities for the Cochrane Central Register of Controlled Trials (CENTRAL) for *The Cochrane Library, Issue 1 2006*

1.1 Objective: Perform and compile results of literature searches (MEDLINE search, handsearch results, and specialized register submissions).

1.2 Objective: Coordinate, maintain, and regularly update the Master List of Journals Being Searched (Master List).

2. Target: Work with National Library of Medicine (NLM) to ensure that controlled trials included on MEDLINE are appropriately indexed as publication type CONTROLLED CLINICAL TRIAL (CCT) or RANDOMIZED CONTROLLED TRIAL (RCT) (MEDLINE Retagging Project).

2.1 Objective: Receive, process, and quality check submissions of handsearch results from Cochrane entities, perform electronic search on MEDLINE, and submit the results to NLM.

3. Target: Provide training and support for reviewers, review group coordinators (RGCs), trial search coordinators (TSCs), editors, handsearchers, consumers and others responsible for Cochrane training activities.

3.1 Objective: Make available on the worldwide web and elsewhere guides for Cochrane procedures.

3.2 Objective: Develop and facilitate Cochrane training workshops and courses.

3.3 Objective: Provide ongoing support and training through individual contact, email discussion lists, and directories.

4. Target: Promote awareness of the Cochrane Collaboration and access to Cochrane products.

4.1 Objective: Plan and host the bi-annual US contributors’ conference.

4.2 Objective: Ensure that individuals (including the media and consumers) and institutions within the region served by USCC are aware of all aspects of the Cochrane Collaboration and the USCC; highlight Cochrane activities in presentations and reports to health professionals, consumers, and others whenever relevant.
4.3 Objective: Work to ensure that *The Cochrane Library* is made available and accessible to regional institutions, government agencies, professional organizations, and others.

4.4 Objective: Encourage news media to use *The Cochrane Library*, provided free of charge through John Wiley and Sons, Inc.

4.5 Objective: Work with physicians, consumers, government, and others to identify ways in which Cochrane reviews can better meet their needs.

4.6 Objective: Maintain and expand the USCC’s web presence.

5. Target: Perform USCC administrative functions.

5.1 Objective: Perform handsearching of US medical journals and conference proceedings.

5.3 Objective: Participate in annual meetings at the 2006 Cochrane Colloquium.

5.4 Objective: Perform general Center administrative functions.

6. Target: Seek and obtain funding support for USCC activities.

6.1 Objective: Seek funding for continuation of the MEDLINE Retagging Project to ensure that all controlled trials on MEDLINE are indexed appropriately on MEDLINE and included in CENTRAL.

6.2 Objective: Continue working with funders to support USCC activities.

6.3 Objective: Work with USCC branches and US-based entities to identify sources of funding and to leverage combined efforts to obtain funding.

7. Target: Conduct and disseminate research.

7.1 Objective: Conduct methodologic research on issues of importance to systematic reviews, trials registers, and evidence-based healthcare.

8. Target: Facilitate the development and growth of the USCC’s consumer coalition, Consumers United for Evidence-based healthcare (CUE).

8.1 Objective: Continue development of CUE infrastructure and functions.

8.2 Objective: Continue to develop and test an online distance education course for consumer advocates (see Section 3.2).

8.3 Objective: Strengthen the ties between CUE and the Cochrane Collaboration Consumer Network (CCNet).

9. Target: Work collaboratively with the CEVG@US satellite office.
9.1 Objective: Share materials and resources related to educational projects.

9.2 Objective: Collaborate with CEVG@US on research projects.
Appendix B
1994–2006 MEDLINE Retagging Submissions to The National Library of Medicine (NLM)

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¹ Includes citations identified through searches received in the first round of submissions January 1 - December 31, 2006.
² RCT = RANDOMIZED CONTROLLED TRIAL [Publication Type]
³ CCT = CONTROLLED CLINICAL TRIAL [Publication Type]
⁴ USCC = United States Cochrane Center
Appendix C

Description of Web-based Course
Handsearching - Identifying and Classifying Controlled Trial Reports

A. Team Members:

- Faculty (Kay Dickersin, Roberta Scherer)
- Project Manager (Suzanne Brodney Folse (to September 2005), Roberta Scherer (from October 2005 to present))
- Instructional Designer (Bryce Myers, Dan Schwartz)
- Web Developer (Maggie Friedfeld (to September 2004), Sue Baumes, Christine Costantino)
- Administrator/Coordinator (Joyce Coutu)
- Administrative Assistant (Darlene Wood, Heidi Kelleher)
- Handsearching Experts (Susan Wieland, Elena Glatman, Swaroop Vedula, Roberta Scherer)
- Research/Content Assistant (Arisha Ashraf)
- Student/Staff Reviewers for Pilot Study

B. Syllabus

This course is divided into modules. The approximate time it will take to complete each part of the course is noted after the module title.

B.1. Module 1: Why is Handsearching Important? (15 minutes)
Describes the rationale for the creation of the Cochrane Collaboration and the development of the Cochrane CENTRAL Register of Controlled Trials ("CENTRAL" for short), the Cochrane Collaboration's source of trial reports, and introduces the Cochrane Collaboration classifications of trials eligible for inclusion in CENTRAL.

B.2. Module 2: Steps to Successful Handsearching (1 hour total. Each step with corresponding quiz, 10 minutes each)
Describes where in journal articles the information needed for identification and classification of trial reports may be found, and outlines the step-by-step decision making necessary in identification and classification for trial reports eligible for CENTRAL.

B.3. Assessments
Assessments are intended for users who have read through both course modules and have successfully completed the quizzes within them.

Self-Assessment with Abstract Examples (90 minutes)
Provides a self-assessment exercise in identifying and classifying trial reports eligible for CENTRAL from abstracts.
B.3.1 Self-Assessment with Journal Article Examples (2 hours)
Provides a self-assessment exercise in identifying and classifying trial reports eligible for CENTRAL from full-text examples.

B.3.2 Handsearching Test (6-12 hours)
Tests the trainees ability to identify and classify trial reports eligible for CENTRAL by handsearching a full issue of a journal.

B.4. Glossary & Resources
Defines terms relevant to the course modules and includes references to websites for additional information and study. Entries derived from:


http://www.cochrane.org/resources/handbook/index.htm
Description of Web-based Course
Translating Critical Appraisal of a Manuscript into Meaningful Peer Review

A web-based version of the Cochrane Eyes and Vision Group’s review course is under development and will be launched for pilot testing in Spring 2007. The web-based course will replace the in-person workshop we offered through 2005. We would like to test the effectiveness of the course in the context of a randomized trial and will consider seeking funding, after the web-based course has been pilot-tested and revised. The target audience for the course includes ophthalmologists, optometrists, and other vision practitioners who wish to learn more about serving as a peer reviewer for biomedical journals. The course learning objectives include increasing participants’ understanding of available evidence regarding the effectiveness and utility of the peer review process, different types of clinical research questions and appropriate designs for studying them, strengths and limitations of various study designs, measures used to test association between exposures and outcomes, how to apply critical appraisal to manuscripts submitted for peer review, and how to provide meaningful feedback to authors and editors that they can use to improve manuscript quality.

The activities proposed for the web-based course are similar to those used for the in-person workshop. Both require the participant to read the original submission of the two manuscripts, write the manuscript critiques with comments for the editor and author, and discuss the critiques and recommendations in a small group setting. The course will also incorporate material to assist students using online learning for the first time. Students will be provided with instructions to configure their computers, navigate within the Training Management System (TRAMS) platform, obtain and submit assignments online, and participate in online discussions.

The web-based course includes three modules: two didactic modules comprising approximately 12 lectures, and one hands-on module, comprising development of two manuscript critiques by the participants, group discussion, and feedback from faculty.
Appendix E

Critical appraisal skills for consumers: understanding the evidence using an online course on Evidence-based Healthcare for Consumer Advocates

Facilitator(s): Kay Dickersin, Maryann Napoli, Musa Mayer, and Marianne Hamilton

Consumers are bombarded with healthcare information from the print media, TV, radio, Internet and from their doctors. Interpreting the accuracy and validity of information is often difficult, as reports can be conflicting and evidence may seem to change over time. The United States Cochrane Center (USCC) and Consumers United for Evidence-based Healthcare (CUE) have developed a web-based course on evidence-based healthcare and critical appraisal skills for consumer advocates.

The course will introduce a web-based course for consumer advocates on evidence-based healthcare and critical appraisal skills that will be offered free-of-charge. The workshop will be an opportunity for the USCC and CUE to obtain feedback from Cochrane contributors.

Consumers are bombarded with healthcare information from the print media, TV, radio, internet and from their doctors. Interpreting the accuracy and validity of information is often difficult, as reports can be conflicting and evidence may seem to change over time. The United States Cochrane Center (USCC) and Consumers United for Evidence-based Healthcare (CUE) have developed a web-based course on evidence-based healthcare and critical appraisal skills for consumer advocates. At the conclusion of the online course, participants will be able to:

1. Understand what evidence-based healthcare is and how they can use it to inform their own healthcare decisions;

2. Find reliable sources of evidence-based information;

3. Critically appraise information found in clinical guidelines, healthcare web sites, the lay news media, and journal articles (primary research and systematic reviews).
## Methodological Support Provided to Review Authors by the US Cochrane Center, 2006

<table>
<thead>
<tr>
<th>Reviewer</th>
<th>Review Title</th>
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<tr>
<td>Heather Casparis, MD</td>
<td>Surgery for cataract in patients with age-related macular degeneration</td>
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<td>Peter Gehlbach, MD, PhD</td>
<td>Statins for age-related macular degeneration</td>
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<td>Robert Wojciechowski, OD, Msc</td>
<td>Punctal occlusion for dry eyes</td>
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<td>Aravind Reddy</td>
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<td><em>University of California, Los Angeles</em></td>
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<tr>
<td>Kate Shotton</td>
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<td>Gina Sleilati, MD</td>
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<td>Arthur Geltzer, MD</td>
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<td>Eric Manheimer, MS</td>
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<td>Kirk Wilhelmus, MD</td>
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### Reviewer mini sabbaticals, 2005

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<tr>
<td>Donald Grover, MD</td>
<td>Intravitreal steroids for macular edema in diabetes</td>
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<td><em>University of Rochester Eye Institute</em></td>
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<tr>
<td>Christina Heukaefer, MD</td>
<td>Pancreaticoduodenectomy (classic Whipple) versus pylorus-preserving pancreaticoduodenectomy (pp Whipple) for surgical treatment of periampullary and pancreatic carcinoma</td>
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<td>Karsten Jørgensen, MD</td>
<td>Mammography Screening - Evidence and Informed Consent</td>
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<td>Copenhagen, Denmark</td>
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Appendix G
USCC Staff Presentations 2006

Kay Dickersin’s presentations

Roberta Scherer’s presentations
1. Applying Cochrane Systematic Review Methodology to Improve Evidence-based Clinical Practice and Practice Guidelines, Special Interest Group, Association for Research in Vision and Ophthalmology, Fort Lauderdale, Fl, May 1, 2006
3. Conduct and ethics of randomized controlled trials, at the University of Maryland School of Medicine Certificate Program in Research Ethics for Egyptian Professional Staff, University of Maryland School of Medicine, Department of Epidemiology and Preventive Medicine, June 8, 2006.
Posters

Appendix H

Agenda
North American Conference on Systematic Reviews:
Encompassing Diversity in Systematic Reviews

Thursday, July 13, 2006

7:00 - 8:00 am  Registration and continental breakfast

8:00 - 9:30 am  Pre-conference workshop: *Introduction to systematic reviews*
                 Hannah Rothstein, PhD

9:30 - 9:45 am  Welcoming remarks
                 Kay Dickersin, PhD
                 Mike Busch, State of Maryland, Speaker of House of Delegates

9:45 - 10:30 am  Keynote address: *The state of systematic reviewing in North America*
                  Cynthia Mulrow, MD, MSc

10:30 - 10:45 am  Break

10:45 - 11:30 am  Plenary: *Mapping the landscape of what’s happening in systematic reviews*
                  Chair: Lorne Becker, MD
                  Government supported systematic reviews
                  Jeffrey Lerner, PhD
                  Non-government supported systematic reviews
                  Jesse Berlin, ScD
                  Open discussion

11:30 am - 12:30 pm  Panel: *Different topics, different data, different audiences: What methods are appropriate?*
                  Chair: Sally Morton, PhD
                  Panel members:
                  Randy Elder, PhD
                  Michael Borenstein, PhD
                  Hannah Rothstein, PhD
                  Tracey Woodruff, PhD, MPH
                  Open discussion

12:30 - 1:30 pm  Lunch and concurrent poster session

1:30 - 2:15 pm  Post-lunch think tank: *Is there a common starting point for doing a systematic review?*
                  Chair: Dan Fox, PhD
                  Is there a standard framework?  Opinion
                  Mark Helfand, MD, MS, MPH
                  Is there a standard framework?  Opinion
                  Julia Littell, PhD
                  Open discussion
2:15 - 3:00 pm  **Plenary:** *Incorporation of systematic reviews into medical education*

**Chair:** Luis Gabriel Cuervo, MD  
*Graduate medical education*  
Scott Richardson, MD  
*Undergraduate medical education*  
Frank Domino, MD  
*Open discussion*

3:00 - 3:20 pm  **Break**

3:20 - 5:00 pm  **Panel Discussion:** *Ethical dimensions and consequences of systematic reviews: A case study of aprotonin*

**Chair and speaker:** Steve Goodman, MD, PhD  
*The (potential) role of systematic reviews in IRB oversight*  
Jeremy Sugarman, MD, MPH, MA  
*View of journals and journal editors*  
Trish Groves, MBBS, MRCPsych  
*View of funding agencies*  
Jean Slutsky, PA, MSPH  
*View of policy makers*  
Sean Tunis, MD, MSc  
*Open discussion*

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**Friday, July 14, 2006**

7:30 - 8:30 am  **Continental breakfast**

8:30 - 10:00 am  **Plenary:** *Everybody’s problem: Ensuring quality and defending systematic reviews*

**Chair:** Karen Robinson, MSc  
*Academic recognition*  
Kirby Lee, PharmD, MA  
*Conflicts of interest & outcomes of reviews*  
Joel Lexchin, MD  
*Heterogeneity of the evidence*  
Jeff Valentine, PhD  
*Quality of systematic reviews: what will it take to get a clinician to pay attention?*  
Richard Roberts, MD, JD, FAAFP, FCLM  
*Open discussion*

10:00 - 10:30 am  **Break**
10:30 - 12:00 noon  **Plenary:** Everybody’s problem, continued: Ensuring quality and defending systematic reviews, cont’d  
**Chair:** Eric Bass, MD, MPH  
Assuring quality training: is there a gold standard and if so, how do we ensure it?  
Kay Dickersin, PhD  
Expanding capacity: How do we get more people well-trained?  
Virginia A. Moyer, MD, MPH  
The elephant in the room - When important reviews are not well done  
Susan Norris, MD, MPH, MSc  
Attacks on systematic reviews  
Mark Gibson  
Open discussion

12:00 - 1:00 pm  **Lunch**

12:00 - 3:00 pm  **Concurrent poster session**

1:00 - 2:30 pm  **Simultaneous Workshops**

**Workshop 1.** Improving the quality of reviews submitted for publication  
Facilitators: Steve Goodman, MD, PhD  
Cynthia Mulrow, MD, MSc

**Workshop 2.** Updating reviews  
Facilitators: Lorne Becker, MD  
Roberta Scherer, PhD

**Workshop 3.** Drug Evaluation Review Project  
Facilitator: Mark Gibson  
Speakers: Marian McDonagh, PharmD.  
Anthony V. Merola, RPh, MBA  
Duane Thurman

2:30 - 2:45 pm  **Break**

2:45 - 4:15 pm  **Panel discussion:** Policy and practice based on best available evidence: The role of systematic reviews: A case study of implantable defibrillators and cost  
**Chair:** Gil Ramirez, DrPH  
**Panel members:**  
Steve Phurrough, MD, MPA  
Naomi Aronson, PhD  
Barbara Warren, PsyD  
Gillian Sanders, PhD  
Open discussion

4:15 - 4:30 pm  **Close and evaluation**
Appendix I
Minutes
US Contributors’ Meeting
XIV Cochrane Colloquium, Dublin
Tuesday, 24 October 2006, 15:30 – 17:00
Pembroke Room

Attendees:

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<tr>
<th>Name</th>
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<tbody>
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<tr>
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<td>William Hood</td>
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<tr>
<td>Mary J. Rotheram</td>
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<tr>
<td>David J. Stott</td>
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<td>Stacie Jones</td>
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<tr>
<td>Ron Koretz</td>
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<tr>
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<td>Musa Mayer</td>
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<tr>
<td>Roger Soll</td>
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<td>Danette Somers</td>
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<tr>
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<tr>
<td>David Witsell</td>
<td><a href="mailto:witsell.aaohnsf@mac.com">witsell.aaohnsf@mac.com</a></td>
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1. Welcome and introductions:

Kay Dickersin, US Cochrane Center Director, welcomed everyone to the meeting. The attendees introduced themselves briefly.

2. What’s happening in the US:

- **USCC Consumer Coalition - Marianne Hamilton**, USCC Consumer Coordinator, reported that the USCC-sponsored coalition of consumer advocacy groups, Consumers United for Evidence-based Healthcare (CUE), expanded membership from 16 to 27 organizations during the past year and held a successful annual meeting in September 2006. The group is completing a distance education course on evidence-based healthcare and critical appraisal for consumer advocates and one member group has completed a 3 part video on EBHC (available for reviewing at the Colloquium). CUE continues to work on building scientific partnerships as well as relationships with journalists and others.

- **The Cochrane Eyes and Vision Group, US Satellite (CEVG@US) - Ann Ervin**, Project Director of the CEVG@US, explained that the group is funded by the National Eye Institute (NEI) to develop a critical mass of US-based vision researchers and practitioners who are trained in preparing and using systematic reviews as part of the CEVG. The CEVG@US group aims to accomplish four main goals: expand awareness of evidence-based health care in general and in eyes and vision specifically; develop a critical mass of vision researchers who are able to perform and interpret systematic reviews, and train others to do the same; develop a critical mass of clinicians who use the results of systematic reviews as an evidence base to guide their practice, and to train others to do the same; and generate an increased number of systematic reviews in priority vision research areas, published in *The Cochrane Library* and in the traditional vision research literature.

- **HIV/AIDS - Lisa Bero** reported that the group recently received 3 years of (non-government) funding to conduct Cochrane activities, including support for the HIV/AIDS satellite in South Africa.

- **Prostatic Diseases and Urologic Cancers Group - Tim Wilt** reported that the group has been based in Minnesota for 10 years and has a satellite in Cardiff, Wales that has received funding from the UK-based National Institute for Clinical Excellence (NICE). The editorial base has received a National Institutes of Health (NIH) grant to conduct systematic reviews that are cancer-related. He discussed the difficulty with obtaining funding unless are in the “right” area; identifying members for an active editorial board; and the challenges of working over long distances with people with limited experience.

- **Pain, Palliative, and Supportive Care Group, Pain Section - No representative present.**

- **Behavioral Medicine Field - Kimberlee Trudeau** reported that the Field was registered in
February 2006. The National Heart, Lung and Blood Institute (NHLBI) funded their start-up activities only; additional funding is needed for ongoing work. More than 50 members have been recruited to date, approximately 50% of whom are interested in conducting systematic reviews. Field staff created a website and people are finding them through the Internet. Karina Davidson (Convener, Behavioral Medicine Field) noted that many individuals in the field are still in a “pre-Cochrane” era mind-set; however, staff are trying to build capacity and bring the Cochrane Collaboration to their field.

Health Care of Older People Field - Gil Ramirez noted that the group was without leadership for a while and he now is working with 2 others to reinvigorate the Field. With new leadership in place, they have made some progress this year. Leadership is shared by David J Stott and Peter Langhorne (University of Glasgow), Gil Ramirez (Charles R Drew University of Medicine and Science) and Shelley de la Vega (University of the Philippines). Field coordination is provided by David Stott, who currently is examining Cochrane reviews to identify those that are related to older people.

Primary Health Care Field - No representative present.

Screening and Diagnostic Test Methods Group - No representative present.

Skin Group - Bob Dellavalle reported that he had submitted an application to the NIH to set up a Skin Group satellite. He and his group have created an advisory board that will include leading journal editors among others. Approximately one third of the Cochrane Skin authors are trying to co-publish but so far, either have not or cannot. Bob opined that this is a very fertile field with great interest in using systematic reviews and evidence-based healthcare. He is interested in using video clips as an educational and marketing tool for Cochrane. For example, a 2-minute video clip could be created for every Cochrane review and released via a variety of media sources (e.g., news, “youtube,” etc.).

Neonatal Group - Roger Soll reported that they are an “old group with a new editorial base,” currently located at the University of Vermont. The Neonatal group is funded through a contract with the National Institute of Child Health and Human Development (NICHD), which covers major editorial as well as administrative needs. Two-hundred reviews have been completed and the group is committed to updating and dissemination. The Neonatal Group has benefitted from strong support in the UK and Australia.

US Cochrane Center - Bobbi Scherer reported that the North American Conference on Systematic Reviews held in July was a well-attended gathering of systematic reviewers and others from the Cochrane and Campbell Collaborations, Agency for Healthcare Research and Quality’s Evidence-based Practice Centers (EPCs), the Blue Cross Blue Shield Technology Assessment Group, Centers for Medicare and Medicaid Services (CMS), policy makers, and methodologists. The conference attendees focused on the different ways people do reviews.
3. **North American training opportunities**

Bobbi Scherer reported that the USCC currently hosts an online training course, “Handsearching”, with two others (peer review and evidence-based healthcare and critical appraisal) in development. Ann Ervin noted that a workshop on “how to conduct a systematic review” will be held in Sarasota, Florida on 26-28 January 2007. Ophthalmologists and optometrists will be preferentially registered, but others are welcome, pending space available.

Ron Koretz reported that for the past three years (and planned again in 2007), he has conducted a successful Cochrane Symposium at the annual Digestive Diseases Week meeting. He conducted a one-evening satellite Cochrane symposium at the Association of Liver Diseases which was less successful. Kay Dickersin suggested increasing partnerships with professional societies and consumer advocacy groups to promote the work of The Cochrane Collaboration.

4. **Outreach and dissemination**

Christine Costantino, web developer for the USCC and CEVG@US, reported that she will be updating the USCC and CEVG@US websites to implement the new Cochrane template, as all Cochrane centers have been encouraged to do. Currently, all Cochrane workshops are posted on the homepage of the USCC website. Christine asked for submission of news/events items for posting on the USCC website.

Lorne Becker reported that using the professional support provided by Wiley, the publisher of *The Cochrane Library*, can make a “phenomenal” difference in presenting Cochrane to the world. Wiley representatives have offered to present demonstrations and workshops on how to use *The Cochrane Library* and the company also offers online training sessions. Wiley must be contacted in advance to set up in-person or online training.

5. **Funding**

Kay Dickersin reported that the current funding of the USCC will end in 2007. The Center has submitted a large conference grant application to the Agency for Healthcare Research and Quality (AHRQ) to conduct workshops and host an annual conference. CEVG@US is in Year 5 of a 7-year contract from the National Eye Institute which supports systematic reviews and workshops on systematic reviews and evidence-based healthcare in vision science.

The Agency is unable to support the Cochrane Collaboration directly given current funding mechanisms. David Atkins reported that AHRQ supports 13 EPCs that are contracted to do specific systematic reviews. David raised concerns as to whether Cochrane groups could conduct reviews in the role of EPCs, given AHRQ’s challenging time lines for review production. AHRQ has supported some activities within the EPOC review group and provided a small conference grant for the Screening and Diagnosis Methods Group. He encouraged people to apply for small conference grants (maximum amount $50,000), which
can be used in a variety of ways, and offered to be the “contact person” within AHRQ. Dr. Atkins explained that large and small conference grants are reviewed separately at AHRQ. Small grant applications are usually reviewed “in house” while large conference grants are reviewed using standard peer review procedures.

Karina Davidson suggested that US-based Cochraneites prepare an interdisciplinary cross-institutional proposal requesting funding support for all US-based Cochrane groups, similar to what was done in Canada. David Atkins agreed to talk to others at AHRQ and NIH about such a proposal. He emphasized AHRQ cannot handle Cochrane support on its own. The AHRQ budget represents about 1% of the total NIH budget and there is pressure to pay for concrete products and not infrastructure.

Further discussion ensued regarding ways to successfully obtain funding, including NIH training, the Centers for Disease Control and Prevention (CDC), and grants obtained directly from the Cochrane Collaboration.

6. Cochrane Steering Group news

Lorne Becker reported that two funding initiatives have been approved by the Steering Group. First, £100,000 will be offered to support a number of projects related to the Cochrane Collaboration’s Strategic Plan (Cochrane Opportunities Fund) and another £100,000 will be offered for work leading to development of processes on how to prioritize systematic reviews. Lorne also reported that Alessandro Liberati’s review of the Steering Group would be presented at the Annual General Meeting and will subsequently be made publicly available. The request for proposals from the Cochrane Collaboration will be released in January 2007.

Diagnostic methods reviews are soon going to be added to The Cochrane Library. A notice of assistance will be disseminated to the review groups and methodologists will be available to help.

7. Other

The Cochrane Library is included on Science Citation Index and in one year will be assigned a Journal Impact Factor. Journals with a “Cochrane Corner” should be reminded to properly cite the reviews on which they are based.
Appendix J

United States Cochrane Center
Performance Targets for January 1 - December 31, 2007

1. Target: Coordinate, maintain, and update the Master List of Journals Being Searched (Master List).

1.1 Objective Coordinate, maintain, and regularly update the Master List.

2. Target: Work with National Library of Medicine (NLM) to ensure that randomized trials included on MEDLINE are appropriately indexed as publication type [PT] RANDOMIZED CONTROLLED TRIAL (RCT) (MEDLINE Retagging Project), pending receipt of funding.

2.1 Objective: Perform electronic search for randomized controlled trials (RCTs) on MEDLINE, and submit the results to NLM.

3. Target: Provide training and support for reviewers, review group coordinators (RGCs), trial search coordinators (TSCs), editors, handsearchers, consumers, and others responsible for training activities.

3.1 Objective: Make available on the worldwide web and elsewhere guides for Cochrane procedures.

3.2 Objective: Develop and facilitate Cochrane training workshops and courses.

3.3 Objective: Provide ongoing support and training through individual contact, email discussion lists, and directories.

4. Target: Promote awareness of the Cochrane Collaboration and access to Cochrane products.

4.1 Objective: Ensure that individuals (including the media and consumers) and institutions within the region served by USCC are aware of all aspects of the Cochrane Collaboration and the USCC; highlight Cochrane activities in presentations and reports to health professionals, consumers, and others whenever relevant.

4.2 Objective: Work to ensure that The Cochrane Library is made available and accessible to regional institutions, government agencies, professional organizations, and others.

4.3 Objective: Encourage the news media to use The Cochrane Library, provided free of charge through John Wiley and Sons, Inc.

4.4 Objective: Work with physicians, consumers, government, and others to identify ways in which Cochrane reviews can better meet their needs.
USCC 2007 Performance Targets (cont’d)

4.5 Objective: Maintain and expand the USCC’s web presence.

5. Target: Perform USCC administrative functions.

5.1 Objective Perform handsearching of US medical journals and conference proceedings.

5.3 Objective: Participate in annual Collaboration meetings at the 2007 Cochrane Colloquium and midyear meetings.

5.4 Objective: Perform general Center administrative functions.

6. Target: Seek and obtain funding support for USCC activities

6.1 Objective: Seek funding for continuation of the MEDLINE Retagging project to ensure that all controlled trials on MEDLINE are indexed appropriately on MEDLINE and included in CENTRAL.

6.2 Objective: Continue working with funders to support USCC activities.

6.3 Objective: Work with USCC branches and US-based entities to identify sources of funding and to leverage combined efforts to obtain funding.

7. Target: Conduct and disseminate research

7.1 Objective: Conduct methodological research on issues of importance to systematic reviews, trials registers, and evidence-based healthcare.

8. Target: Facilitate the development and growth of the USCC’s consumer coalition, Consumers United for Evidence-based healthcare (CUE).

8.1 Objective: Continue development of CUE infrastructure and functions.

8.3 Objective: Continue to develop and test an online distance education course for consumer advocates.

8.4 Objective: Strengthen the ties between CUE and the Cochrane Collaboration Consumer Network (CCNet).

9. Target: Work collaboratively with the CEVG@US satellite office

9.1 Objective: Share materials and resources related to educational projects.

9.2 Objective: Collaborate with CEVG@US on research projects.
Appendix K

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Appendix L

Consumers United for Evidence-based Healthcare (CUE)

2006 Annual Meeting

Agenda

September 21, 2006

Hilton Alexandria Mark Center Hotel
Alexandria, Va

9:00 AM - 5:00 PM (EST)

7:30 am - 9:00 am  Registration and continental breakfast

9:00 am - 9:15 am  Welcoming remarks and general announcements

         Joy Simha

9:15 am - 9:45 am  Introduction of new and current member organizations

         We ask all members to introduce themselves and their organizations.

9:45 am - 10:30 am Introduction to CUE: A historical perspective

         Kay Dickersin

         Cochrane and CUE Videos

         Barbara Warren

10:30 am-11:30 am  Keynote: Consumers, evidence and the health system: a view from the age of the Internet and Web 2.0

         Alejandro Jadad

             Open Discussion

11:30 am - 11:45 am  Break

11:45 am - 12:30 pm  Plenary: Developing evidenced-based health care in the California legislature: The chapter of Assembly Bill 71 (Chan and Frommer)

         Ramón Castellblanch

             Open Discussion

12:30 pm -1:30 pm  Lunch
1:30 pm - 2:30 pm  **Panel discussion: How to incorporate evidence into your organization’s advocacy efforts**

**Chair:** Barbara Warren  
**Panel Members:**  
Merrill Goozner  
Zobeida Bonilla  
Annette Bar-Cohen  
Open Discussion

2:30 pm - 3:00 pm  **Plenary: The past, present, and future: an overview of CUE committees and projects**

**Chair:** Marianne Hamilton

2:30 pm - 2:40 pm  *Supporting outreach activities and a national subscription to The Cochrane Library*

Barbara Warren

2:40 pm - 2:50 pm  *Participating in developing Cochrane plain language summaries*

Maryann Napoli

2:50 pm - 3:00 pm  *Proposal for new projects and discussion*

3:00 pm - 3:30 pm  **Break (Refreshments served)**

Committee Breakout

3:30 pm - 3:45 pm  **Plenary: The past, present, and future: an overview of CUE committees and projects (cont’d)**

*Distance education online course on evidence-based healthcare for consumer advocates*

Kay Dickersin

3:45 pm - 5:00 pm  **Open forum: Looking ahead**

**Chair:** Joy Simha

5:00 pm  **Adjourn**