DPhil International Programme in Evidence-based Health Care

- INTERVENTIONS INCREASING UPTAKE OF SYSTEMATIC REVIEWS AND META-ANALYSES

- John Wallace
Evidence is not necessarily used, especially systematic reviews
Colleagues are ‘quick, cheap and easy to use’ and provide affirmation that a computer cannot
AIM

- TO TRANSLATE KNOWLEDGE FROM SYSTEMATIC REVIEWS
KNOWLEDGE TRANSLATION
TWO PREVIOUS SYSTEMATIC REVIEWS:

- BARRIERS
- FACILITATORS
INTERVENTIONS

- 1,564 citations
- 10 intervention studies
- 19 databases
- 3 search engines
INTERVENTIONS

- **RISK OF BIAS (EPOC)**: 8 LOW-MODERATE
- **DESIGN**: 5 RCTs
- **LOCATION**: 11 COUNTRIES
- **PARTICIPANTS**: DRs, NURSES, PATIENTS, MANAGERS
- **TAILORED INTERVENTIONS**: 0
- **THEORETICAL UNDERPINNING**: 8
- **OUTCOMES**: 6 AWARENESS, ATTITUDES
- **EFFECTIVE**: 3 INTERVENTIONS
INTERVENTIONS

Educational visits
Brief summaries
Multi-faceted educational intervention
Manual of Cochrane reviews
Clinically integrated e-learning course
Tailored, targeted messaging, knowledge broker
Registry of systematic reviews
Computer-based (CD-ROM) session
RESULTS

- Educational visits
- Summaries
- Targeted messaging

Significant impact
- SIMPLE INTERVENTIONS ARE BEST
- DELIVER RIGHT AMOUNT OF INFORMATION
- INCREASING AWARENESS IS EASY (RELATIVELY)
There are promising interventions to improve systematic review uptake

**FOUND IN TRANSLATION**

- John Wallace, Ireland