Cochrane Skin: prioritisation
Robert Boyle, Laura Prescott, Helen Scott, Emma Axon, Hywel Williams, Laurence Le Cleach, Gloria Sanclemente, Robert Dellavalle. Cochrane Skin, United Kingdom

Cochrane have led the development of systematic reviews in healthcare since 1993
> 8000 systematic reviews are now published each year
> 85% of systematic reviews are not Cochrane reviews
~ 40% of non-Cochrane reviews have misleading conclusions
Cochrane reviews are of higher methodological quality
Cochrane require lead authors to be non-conflicted
Cochrane must focus limited editorial resources on high-impact systematic reviews where advanced methodological support is needed
We do this by PRIORITISATION

NEED FOR PRIORITISATION AT COCHRANE SKIN

PRIORITISATION METHODS

Priority Setting Partnerships
Consideration of the leading causes of skin disease burden from the GBD survey 2017
Priority setting partnerships between clinicians and patients led by the James Lind Alliance
Comprehensive prioritisation undertaken in 2017, with contributions from:
- guideline development groups
- patient groups
- international dermatology community
- Cochrane skin editors

COCHRANE SKIN PRIORITY REVIEWS FOR 2018-2020

PROTOCOLS PUBLISHED 2018; REVIEWS DUE 2019-2020
- Network meta-analysis of topical eczema treatments
- Network meta-analysis of systemic eczema treatments
- Systemic interventions for SJS and TEN
- Interventions for pruritus of unknown cause
- Interventions for bacterial folliculitis and boils
- Interventions for basal cell carcinoma of the skin

PROTOCOLS IN PROGRESS
- Network meta-analysis of alopecia areata treatments

KEY MESSAGES

- Cochrane Skin aims to deliver high-priority, rigorous, independent systematic reviews within 18 months
- Priority titles can be suggested by anybody – our next comprehensive prioritisation will be undertaken in 2020
- Review teams are identified through a competitive application process
- Contact us early if you wish to include undertaking a Cochrane Skin review within a grant application