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An introduction to the
Cochrane Collaboration & the
Cochrane Skin Group

Rationale for Cochrane Collaboration

- Collective ignorance about effects of healthcare
- Overwhelming amount of clinical information
- A systematic approach needed to organising and evaluating clinical trial data
- The Cochrane systematic review

What is the Cochrane Collaboration?

- An international organisation 23 years old
- It prepares and maintains the Cochrane Library which is published online
- The principle source of *up-to-date* high quality evidence on the effects of healthcare interventions

Cochrane Centres



Why the 'Cochrane' Collaboration?



- Archie Cochrane, a British epidemiologist, pointed out the deficiencies of current reviews of the medical literature in Cochrane AL (1972). 'Effectiveness and Efficiency: random reflections on health services'.
- Iain Chalmers - an obstetrician. The first 'Cochrane Centre' opened in Oxford 1992.

What makes a Cochrane review?

- Structured process involving several steps
 - Well formulated question
 - Team effort
 - Comprehensive data search
 - Unbiased selection and abstraction process
 - Critical appraisal of data
 - Synthesis of data

Why is a Cochrane review different from any other review?

- Rigorous, open, published research methods
- More exhaustive search for trials than a conventional review
- Two stages - protocol and full review - both peer reviewed
- Highlights both implications for practice and for research
- Only systematic review to be updated regularly.

Stages of a Cochrane Review

- Submit a **title**-the idea
- Write the **protocol**-the plan
- Write the **review**-the product

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- Currently we have published **71 reviews** - we aim to update every 2 years
- Currently we have published **47 protocols** - under development to reviews
- Currently **25 registered titles** under development to published protocols

Some of the intervention reviews
The Cochrane Skin Group published in
The Cochrane Library
(www.cochranelibrary.com)
in 2014



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Highlighted Reviews

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Therapist-supported Internet cognitive behavioural therapy for anxiety disorders in adults

Janine V Olthuis, Margo C Watt, Kristen Bailey, Jill A Hayden, Sherry H Stewart

5 March 2015

Chlorhexidine skin or cord care for prevention of mortality and infections in neonates

Anju Sinha, Sunil Sazawal, Alok Pradhan, Siddarth Ramji, Newton Opiyo

5 March 2015

Personalised care planning for adults with chronic or long-term health conditions

Angela Coulter, Vikki A Entwistle, Abi Eccles, Sara Ryan, Sasha Shepperd, Rafael Perera

3 March 2015

Adjuvant chemotherapy for resected early-stage non-small cell lung cancer

Sarah Burdett, Jean Pierre Pignon, Jayne Tierney, Helene Tribodet, Lesley Stewart, Cecile Le Pechoux, Anne Aupérin, Thierry Le Chevalier, Richard J Stephens, Rodrigo Arriagada, Julian PT Higgins, David H Johnson, Jan Van Meerbeeck, Mahesh KB Parmar, Robert L Souhami,



Tell us what you think. We welcome your comments on Cochrane Reviews.

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- **Topical antifungal treatments for tinea cruris and tinea corporis** by El-Gohary M, van Zuuren E, Fedorowicz Z, Burgess H, Doney L, Stuart B, Moore M, Little P (Rev #140)

This large review included 129 studies with 18,086 participants and 92 comparisons. The pooled data suggested that the individual treatments terbinafine and naftifine are effective.

The primary outcomes of the review: mycological cure (disappearance of fungal infection), and clinical cure (absence of symptoms such as redness and itchiness), were assessed in the majority of studies.

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H1-antihistamines for chronic spontaneous urticaria by Sharma M, Bennett C, Cohen S, Carter B (Rev #97)

73 studies (9759 participants)

34 studies provided data for 23 comparisons of which most reported the primary outcome measure of the review which was 'proportion of participants with complete suppression of urticaria'.

20 studies were judged at high risk of bias from incomplete reporting of outcome data.

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- **Interventions for melanoma in situ, including lentigo maligna** by Tzellos T, Kyrgidis A, Mocellin S, Chan A-W, Pilati P, Apalla Z. (#86)

1 study eligible for inclusion (and 1 ongoing study in active recruitment stage), which was a single centre, open label, parallel group, 2-arm RCT with 90 participants, who had 91 histologically proven LM lesions

Only one of the primary outcomes was addressed –and not most of the secondary outcomes.

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Some of the protocols we published in
The Cochrane Library in 2014

Interventions for the treatment of pityriasis versicolor by Bamford J, Flores-Genuino R, Ray S, Bigby M, Morales-Sánchez M, Arkoncel M, Realubit-Serrano M, Tang K, Aligam K, Wolz M (Rev #70)

Interventions for congenital ichthyosis by Danielsen P, Palanivelu V, Mukhtar A, Duke J, Mocellin S (Rev #104)

Interventions for morphea by Ravelli F, Andriolo B, Vasconcellos M, Lyddiatt A, Trevisani V (Rev #54)

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Diagnostic Test Accuracy

A suite of more than 20 reviews on
the 'Diagnosis and staging of skin cancer'

The protocols to be published in 2015

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- Tests for the diagnosis of cutaneous melanoma in adults: a generic protocol
- Tests for the diagnosis of keratinocyte skin cancers in adults: a generic protocol

Impact of Skin Group reviews used in guidelines in UK, USA, Canada & by WHO

- Interventions for bullous pemphigoid
- Topical treatments for chronic plaque psoriasis
- Interventions for alopecia areata
- Topical antifungal treatments for tinea cruris and tinea corporis
- Interventions to reduce *Staphylococcus aureus* in the management of atopic eczema
- Surgical excision margins for primary cutaneous melanoma.

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www.skin.cochrane.org

