1. Dissemination

In order to ensure that we all get the maximum value out of our reviews, we are now requesting that teams complete a dissemination strategy for their review before we press publish.

When a review is getting near to being signed off for publication, we will send authoring teams a strategy document (just 2 pages in length) to complete. We hope that teams will identify at least 5 stakeholders who they wish to reach with their review, the key messages they hope to give, the channels they will use, and the contacts they will approach.

As it is now a requirement of the Skin Group’s funders to have a well-thought out dissemination plan for each Cochrane review, we will not be able to publish your review until you have completed and returned the strategy.

We will also write to teams a few months after publication for feedback on the success of their dissemination strategy.

2. Welcome to Esther and Ben!

We would like to announce and welcome 2 new editors to the Cochrane Skin Group editorial board.

Dr Esther van Zuuren joined as Clinical Dermatology Editor, (another) Methodology Editor, and CSG ‘Summary of findings’ table expert in August 2013. Esther is a clinical dermatologist, based at Leiden University Medical Center, Netherlands.

Dr Ben Carter joined us as (another) Statistical Editor in January 2014. Ben is a Lecturer in medical statistics, based at the Institute of Primary Care & Public Health, Cardiff University School of Medicine, UK.

3. Clinical trial data

A recent BMJ editorial suggests that access to the European Medicines Agency’s (EMA) archives may only be available for a short time. The issue is discussed in the context of the wider debate on third-party access to clinical trial data. The following text is taken from the paper (“Clinical trial data: get them while you can” (BMJ 2014, 348:g63, doi: http://dx.doi.org/10.1136/bmj.g63)): 
“The EMA is responsible for the scientific evaluation of medicines developed by pharmaceutical companies for use in the European Union. When the EMA launched its policy on access to documents on request in November 2010, it opened a window into the regulatory decision making process that had never been opened before. Then, in mid-2013, as a result of two well known legal cases, semi-paralysis set in at the EMA, after an EU judge prevented the EMA from releasing clinical trial data requested for drugs marketed by AbbVie and InterMune. As a result of this injunction, the EMA soon began denying requests for types of trial data it had previously released. Now the access to data window is possibly wide open again—or at least as open as it could be—after the superior EU Court of Justice struck down the lower court’s injunction late last November.

Requests for data may be submitted via the EMA’s website.”

— Similarly, LEO Pharma recently announced their commitment to making their trial data available. From January 1st 2014, the company will gradually begin to upload clinical trials data and accept requests for patient-level data. Please see the following webpage for detailed information: http://www.leo-pharma.com/Home/Research-and-Development/Clinical-trial-disclosure/LEO-Pharmas-position-on-transparency.aspx.