



The Nordic Cochrane Centre and Network

Report 1995-1996 and Strategic plan for 1997

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SUMMARY

Reports of original medical research are far too numerous and dispersed to be of practical value to clinicians and other decision makers in health care. Reviews of research thus occupy a key position in the chain which links research with clinical practice. However, because scientific principles have not generally guided reviews of research evidence, useless and even harmful forms of health care have not been distinguished efficiently from useful forms of care. Further, proposals for appropriate research have not been distinguished efficiently from proposals for inappropriate, or redundant, research. The Cochrane Collaboration was formally launched in October 1993 to meet this challenge. The aim of the Collaboration is to help people make well-informed decisions about health care by preparing, maintaining, and promoting the accessibility of systematic reviews of the effect of health care interventions. The reviews are published in *The Cochrane Database of Systematic Reviews* which is part of *The Cochrane Library*.

The Cochrane Collaboration is growing very rapidly. At present, 13 Cochrane Centres are coordinating the Collaboration's activities. The Nordic Cochrane Centre at Rigshospitalet in Copenhagen opened on 13 October 1993. The principle aims of the Nordic Centre and Network are to organize workshops and provide advice to collaborative review groups; to coordinate hand searches of RCTs in health care journals; to develop software to facilitate the assembly of Cochrane Reviews; to coordinate software development within the Collaboration; to promote the science of reviewing research; to promote awareness and use of *The Cochrane Library*, by relating to governments, scientific societies and other professional bodies, research ethics committees, medical research councils and other funding agencies, drug agencies, and consumer groups.

The Cochrane Library provides information of worldwide relevance and support from a variety of organizations is therefore to be expected. The National Health Service Research and Development Programme in the UK has taken the lead through its decision to fund the first Cochrane centre. Other agencies, for example, the Swedish Council for Technology Assessment in Health Care and the European Union have contributed funds to support international coordination of the Collaboration's work.

The work of the Nordic Cochrane Centre and Network is expected to lead to considerable benefits for the Nordic societies. Clinical practice will, to a much larger extent than today, become evidence-based, leading to more rational use of health care resources. Clinical research will also become more efficient, not only by avoiding redundant trials but also by using improved methods, since the process of reviewing the literature systematically often leads to important suggestions of better designs for future research.

THE COCHRANE COLLABORATION

Background

Reports of original medical research are far too numerous and dispersed to be of practical value to clinicians and other decision makers in health care. Reviews of research thus occupy a key position in the chain which links research with clinical practice.

The science of reviewing research should be performed with great care. It is surprisingly difficult, for example, to retrieve original research results. Literature searches, e.g. on MEDLINE, often identifies only half the relevant trials. Unfortunately, however, those preparing reviews have only rarely worked systematically (1). Usually, they have not written formal protocols or have searched systematically for all studies likely to provide unbiased information - in particular, randomised clinical trials (RCTs). Because scientific principles have not generally guided reviews of research evidence, useless and even harmful forms of health care have not been distinguished efficiently from useful forms of care. A review of treatment recommendations in medical textbooks and review articles showed that advice on some life-saving therapies had been delayed for up to fifteen years, while other treatments continued to be recommended long after controlled trials had demonstrated them to be either ineffective or actually harmful (2). Further, proposals for appropriate research have not been distinguished efficiently from proposals for inappropriate, or redundant, research. For example, numerous trials of antibiotic prophylaxis for caesarian sections have been conducted with an untreated control group during the twenty years in which it has been known that prophylaxis effectively prevents serious wound infections.

Fifteen years ago, this unfortunate state of affairs made Archie Cochrane, a distinguished epidemiologist, write (3):

"It is surely a great criticism of our profession that we have not organised a critical summary, by specialty or subspecialty, adapted periodically, of all relevant randomised controlled trials."

The first specialty to which Cochrane's approach was applied was care during pregnancy and childbirth - an area which was exceptionally poorly grounded in good evidence. Several hundred systematic reviews of primary studies were prepared through an international collaborative effort coordinated by Dr Iain Chalmers in Oxford. As new evidence became available, these reviews were kept up to date and published electronically. The reviews were very well received by professionals, managers, purchasers and - perhaps most importantly of all - people using the health services.

In 1987, the year before he died, Cochrane suggested that other specialties should copy the methods used. Cochrane reviews are now published in *The Cochrane Database of Systematic Reviews* which is part of *The Cochrane Library* (4).

Aims and principles

The Cochrane Collaboration was formally launched in October 1993 in response to Cochrane's criticism. The aim of the Collaboration is to help people make well-informed decisions about health care by preparing, maintaining, and promoting the accessibility of systematic reviews of the effect of health care interventions. The Collaboration is guided by eight principles: collaboration, building on the enthusiasm of individuals; avoiding duplication; minimising bias; keeping up to date; striving for relevance; promoting access; and ensuring quality.

Collaboration

The shared will to collaborate is essential for two main reasons. First, no single country has sufficient resources to sift through the accumulated evidence about the effects of health care which await synthesis in systematic reviews. Individuals with the necessary skills and commitment are in short supply. Efficient international coordination is therefore important. Currently, scarce resources are being wasted because agencies are commissioning reviews of the same evidence, without first assessing whether a relevant systematic review is already available or has been commissioned. Second, collaboration is essential, since any attempt by individuals, institutions, or nations to dominate the activities of the Collaboration would have the very serious practical consequence of alienating people who could make important contributions.

The key to the success of the Collaboration is to harness the enthusiasm and energy that researchers already devote to keeping up to date in their particular areas of interest, and to provide the support they need to prepare and maintain systematic reviews. The time required to prepare valid reviews is usually grossly underestimated and lack of experience and time often forces good scientists to produce scientifically inadequate reviews. It is therefore the policy of the Collaboration not to try and recruit potential reviewers; rather, such persons should present themselves.

Organization

The Cochrane Collaboration is evolving rapidly; the estimated doubling time for number of reviews is only about 11 months. The challenge of coordinating the Collaboration is therefore substantial and its structures and working arrangements are under continued review, in particular, at the annual Cochrane Colloquia.

Collaborative review groups

The front line contributors to the Collaboration are the *reviewers*. Each reviewer is a member of a *collaborative review group*, which consists of individuals sharing an interest in a particular topic, e.g. stroke or breast cancer (4). Each collaborative review group is coordinated by an *editorial team* which is responsible for assembling an edited module of the reviews for incorporation in *The Cochrane Database of Systematic Reviews*. There are currently more than 40 established or planned review groups, covering most aspects of health care (4).

Handsearchers

Handsearchers search medical journals systematically back to 1950 for clinical trials. This important work has already contributed more than 100.000 citations to *The Cochrane Controlled Trials Register* (4). Further, through collaboration with The US National Library of Medicine, this work has increased the number of easily identifiable trials on MEDLINE from about 20.000 to more than 80.000.

Fields

The Collaboration addresses interests that may involve several review groups through field coordination. A *field* may refer to a category of health service consumers, e.g. the elderly, a

group of health professionals, e.g. nurses, a setting for health care, e.g. primary health care, or a class of interventions, e.g. vaccination (4). The Consumer Network and The Cancer Network also serve more general purposes (4).

Cochrane Centres

Cochrane centres help to coordinate and support the Cochrane Collaboration. There are currently 13 centres. Each centre is obliged to provide some service of general importance to further the aims of the Collaboration. The Nordic Centre is responsible for coordination of software development, development of *Review Manager*, which is the software used to produce Cochrane Reviews, and for editing *The Cochrane Collaboration Handbook* (4). Among the shared responsibilities of the centres are:

- helping to establish collaborative review groups
- organising training workshops for reviewers, editors and handsearchers
- organising seminars and Colloquia to support and guide the development of the Collaboration
- coordinating the Collaboration's contributions to the creation and maintenance of an international register of completed and ongoing trials
- promoting and undertaking research to improve the quality of systematic reviews
- developing policies and setting standards to maximize the reliability of the reviews
- exploring ways of helping the public, health service providers and purchasers, policy makers and the press to make full use of Cochrane Reviews

Methods working groups

Cochrane methods working groups of scientists address the demand for better methods for selection, appraisal, synthesis and dissemination of health care information. For example, methods groups deal with coding and classification of RCTs and statistical methods for synthesizing the results of RCTs.

Steering Group

The Cochrane Collaboration Steering Group governs the Collaboration. It has 13 members and is comprised of representatives of review groups, Cochrane centres, fields, methods working groups, and consumers. The Nordic Centre has been represented on the Steering Group since its inception.

The Steering Group concentrates on principles and strategies. It carries out the following key functions:

- assessment and formal registration of Cochrane entities, for example review groups and centres

- periodic evaluation of Cochrane entities and their renewal or deregistration
- negotiation of relationships with organizations that can further the Cochrane objectives
- holding of periodic business meetings for members of the Collaboration

Financial support

The Cochrane Collaboration is registered as a charity; it is the responsibility of all contributors to the organisation to secure their own funding. Since Cochrane Reviews provide information of worldwide relevance, support from a variety of organizations is to be expected. The National Health Service (NHS) Research and Development Programme in the UK has taken the lead through its decision to fund the first Cochrane centre. The Danish Ministry of Health and the US National Institutes of Health have provided support for the Nordic and Baltimore Cochrane centres, respectively. Other agencies, for example, the Swedish Council for Technology Assessment in Health Care and the European Union have contributed funds to support international coordination of the Collaboration's work.

The Cochrane Library

Because of the obvious advantages of electronic publication for systematic reviews, which require maintenance as new evidence emerges and as mistakes are discovered, *The Cochrane Database of Systematic Reviews* is disseminated online via Internet, on CD-ROM and on floppy disk (4). Searches are possible both as free text and as indexed terms (MeSH). Cochrane Reviews have a standard format consisting of:

- a cover sheet, with addresses of the reviewer(s) and the sources of support
- a structured report of the review, with background, objectives, selection criteria, search strategy, methods, description of studies, methodological quality, results, discussion, and conclusions about implications for practice and research
- full citations of reports of studies incorporated in the review, and of reports that were excluded
- tabulation of the characteristics of the trials, including methodological quality
- tabulation of the results of the review, with statistical syntheses (meta-analyses) and graphs when appropriate

In addition to *The Cochrane Database of Systematic Reviews*, *The Cochrane Library* contains *The Cochrane Controlled Trials Register* with more than 100.000 citations to clinical trials (CD-ROM version only), *The Database of Abstracts of Reviews of Effectiveness*, *The Cochrane Review Methodology Database*, and information about the Cochrane Collaboration, including *The Cochrane Collaboration Handbook* which is a guide to preparing systematic reviews.

Derivative publications

Reviewers are free to publish shortened or elaborated versions of their reviews in paper journals, provided that the publication explains the relationship to the original Cochrane Review. Concurrent electronic and paper publication has been made possible by agreements between the Cochrane Collaboration and, for example, the *British Medical Journal* and the *Lancet*. The Cochrane Collaboration holds a non-exclusive copyright for each review, on behalf of and jointly with the reviewer(s) and the collaborative review group concerned. Those wishing to publish abridged or expanded versions of a Cochrane Review need to get permission from the collaborative review group responsible for it.

THE NORDIC COCHRANE CENTRE AND NETWORK

The Nordic Cochrane Centre opened on 13 October 1993. It services Denmark, Finland, Iceland, Norway, Sweden, Estonia, Latvia, Lithuania, Poland, Belarus, Russia, Ukraine, and Mongolia. A network with collaborators in the five Nordic countries has been established and contacts have also been made with researchers in Lithuania and Russia.

Aims

The specific aims of the Nordic Cochrane Centre and Network are:

- to identify and assist people willing to participate in collaborative review groups as reviewers, editors or handsearchers
- to organize workshops and seminars and provide advice and support to collaborative review groups
- to coordinate or conduct full-text searches (handsearching each issue) of RCTs in general health care journals
- to promote methodological research, especially on bias and on non-specific (placebo) effects of health care
- to promote awareness and use of the information contained in *The Cochrane Database of Systematic Reviews*
- to coordinate software development within the Collaboration
- to develop the Information Management System, in particular *Review Manager*
- to coordinate the methods working groups
- to edit *The Cochrane Collaboration Handbook*

Current Staff at The Nordic Cochrane Centre

Peter C. Gøtzsche (50%)	Director
Andy Oxman (50%)	Deputy Director (located in Oslo)
Kirsten Lone Jensen	Administrator/Secretary
Cecilia Hammarquist	Epidemiologist
Monica Fischer	Software Development Coordinator
Rasmus Moustgaard	Information Technology Manager
Ole Olsen	Statistician

Nordic Cochrane Network

The contact persons in the Nordic Cochrane Network are:

Mona Britton	Swedish Council for Technology Assessment in Health Care
Arne Jakobsson	Swedish Institute for Health Services Development
Arild Bjørndal	National Institute of Public Health, Oslo
Marjukka Mäkelä	National R & D Centre (STAKES), Helsinki
Ari Johannesson	Akranes Hospital, Iceland

The following individuals have participated as handsearchers:

Ulrik Becker	Denmark
Flemming Bendtsen	Denmark
Peter C. Gøtzsche	Denmark
Cecilia Hammarquist	Denmark
Kirsten Lone Jensen	Denmark
Torben Jørgensen	Denmark
Finn Børllum Kristensen	Denmark
Kim Krogsgaard	Denmark
Maxim Cheine	Finland
Vesa Jormanainen	Finland
Kati Juva	Finland
Eero Lehtinen	Finland
Marjukka Mäkelä	Finland
Iris Pasternack	Finland
Osmo Saarelma	Finland
Yrjo Saarikoski	Finland
Sirpa Sairanen	Finland
Helena Varonen	Finland
Kristian Wahlbeck	Finland
Johann Sigurdsson	Iceland
Arild Bjørndal	Norway
Charlotte Haug	Norway
Jahn Nesland	Norway
Magne Nylenna	Norway
Kaare Solheim	Norway
Sergei Varshavsky	Russia

Vasily V. Vlassov	Russia
Ylva Bergman	Sweden
Margaretha Brissman	Sweden
Arne Jakobsson	Sweden
Desmond O'Gorman	Sweden
Lisbeth Rudin	Sweden

Advisory Board

The Advisory Board of the Nordic Cochrane Centre provides overall guidance in all matters related to the work of the Centre to accomplish, as efficiently as possible, the goals of the Cochrane Collaboration within the countries for which the Nordic centre is the reference centre. In addition to the Advisory Board, the Steering Group of the Cochrane Collaboration monitors the work of the Centre on an annual basis.

The current members are:

Professor Henrik R. Wulff, University of Copenhagen (chairman) (since Oct 93)

Dr Marjukka Mäkelä, the National R & D Centre, Helsinki (Oct 93)

Dr Ari Johannesson, Akranes Hospital, Iceland (Jan 97)

Dr Arild Bjørndal, National Institute of Public Health, Oslo (Oct 93)

Vacant, Swedish Council for Technology Assessment in Health Care (Jan 97)

Ms Ellen-Margrethe Skou, Central Ethics Committee, Copenhagen (March 95)

Sources of funding support

Copenhagen Hospital Corporation

Danish Ministry of Health

European Union

Fonden til Lægevidenskabens Fremme

National Institute of Public Health in Oslo

Nordic Council of Ministers

Rigshospitalet

Swedish Council for Technology Assessment in Health Care

Ugeskrift for Læger

ACTIVITIES 1995-1996

Third annual Cochrane Colloquium

The third annual Cochrane Colloquium was convened in October 1995 by the Health Services Research Unit at the National Institute of Public Health in Oslo in collaboration with the Nordic Cochrane Centre.

Handsearching of randomised trials

Handsearching of general medical journals, in some cases back to 1948, is near completion in the Nordic countries and has started in Russia. More than 800 studies have so far been identified of which many are not indexed in MEDLINE. Translation of the titles into English has begun.

Review groups

The following review groups with Nordic leadership have been formed:

- Back Sub-Group (Alf Nachemson, Sweden, coordinating editor)
- Depression, Anxiety and Neurosis (Per Bech, Denmark, editor)
- Effective Professional Practice (Andy Oxman, Norway, editor)
- Hepato-Biliary (Christian Gluud, Denmark, coordinating editor)
- Hepato-Biliary (Torben Jørgensen, Denmark, editor)
- Inflammatory Bowel Disease (Jørgen Rask Madsen, Denmark, editor)
- Peripheral Vascular Diseases (Lars Janzon, Sweden, editor)
- Rheumatoid Arthritis Subgroup (Peter Gøtzsche, Denmark, facilitator)
- Wounds (Christina Lindholm, Sweden, editor)

The following groups are under consideration:

- Colorectal cancer (Per Wille-Jørgensen, Denmark, coordinating editor)
- Orphan trials (Peter Gøtzsche, Denmark, editor)

In addition, Nordic reviewers participate in many of the review groups and fields:

- Acute Respiratory Infections
- Airways
- Breast Cancer
- Dementia & Cognitive Impairment
- Depression, Anxiety and Neurosis
- Diabetes
- Effective Professional Practice
- Hepato-Biliary
- Inflammatory Bowel Disease
- Incontinence
- Infectious Diseases
- Musculoskeletal
- Pregnancy and Childbirth
- Primary health care
- Schizophrenia
- Stroke

Staff at the centre have completed 3 Cochrane Reviews during 1996 (see appendix).

Methods working groups

Andy Oxman is convenor of the methods working groups. Groups with Nordic leadership are:

Empirical Methodological Studies (Andy Oxman)
Placebo (Peter Gøtzsche)

In addition, the following groups have Nordic participation:

Coding and Classification
Complex Interventions
Individual Patient Data
Reporting and Quality Assessment of RCTs
Statistical Methods
Informatics

Cochrane Workshops

Workshop for handsearchers. Copenhagen, 16 April 1996.
Protocol development. Copenhagen, 17 April 1996.
Protocol development. Copenhagen, 12 Sept 1996.
Protocol development. Oslo, 11 Dec 1996.
Getting a review into Review Manager. Copenhagen, 13 Sept 1996.
Getting a review into Review Manager. Amsterdam, 27 Sept 1996.
Getting a review into Review Manager. Oslo, 12 Dec 1996.

Courses on systematic reviews

Course on systematic reviews. Swedish Council for Technology Assessment in Health Care, Copenhagen, 27-29 March 1995.

Post conference course in evidence-based health care: critical appraisal of evidence. International Society of Technology Assessment in Health Care, Dalarna, Sweden, 7-10 June 1995.

Course on systematic reviews. Swedish Council for Technology Assessment in Health Care, Stockholm, 29-31 Oct 1995.

Course on systematic reviews. Panum Institute, Copenhagen, 14-15 Dec 1995.

Course on systematic reviews. Swedish Council for Technology Assessment in Health Care, Stockholm, 12-14 May 1996.

Course on systematic reviews. Swedish Council for Technology Assessment in Health Care, Stockholm, 4-6 Dec 1996.

Exploratory and other meetings for review groups

Hepato-Biliary Group, Copenhagen, 19 Aug 1995
 Tuberculosis, Paris, 9 Sept 1995
 Neurosis/depression, Oslo, 9 Oct 1995
 Hepato-Biliary Group, Geneve, 25 Aug 1996
 Dyspepsia, Copenhagen, 16 Oct 1996

Advisory Board meetings

27 March 1995 in Helsinki
 11 Dec 1995 in Copenhagen

Software development

Coordination of the development of the Information Management System (RevMan, ModMan, Parent Database), ongoing process.

Development of Review Manager, ongoing process.

EMRO: electronic MEDLINE Reference Organiser, 1995 (DOS).

RCTfilter: program for running the Cochrane search strategy on downloaded MEDLINE files, 1996 (DOS and Windows).

WBSS: program for weighing studies by sample size, 1996 (DOS).

Dissemination

The Cochrane Collaboration and the principle of evidence-based medicine are both new. To facilitate widespread information on these issues, a number of publications and meetings have addressed the Collaboration in general, the Nordic centre in particular, and the problems with traditional, narrative literature reviews (see Appendices 1 and 2). The visitors received at the Centre are listed in Appendix 3.

The Centre collaborates with the Department of Obstetrics at Rigshospitalet in Copenhagen about establishing a Centre for Evidence-based Obstetrics and writing evidence-based guidelines for doctors and midwives.

The Centre has written to 52 medical libraries in Denmark and suggested that they subscribe to the database; a number of libraries have acted on this suggestion. Collaborators in the Nordic Network have been urged to do the same in their countries.

Ugeskrift for Læger has agreed to publish important findings from Cochrane Reviews in a series of status articles as identified and prepared by centre staff and content experts. In addition, more pragmatic articles will describe how to find information in *The Cochrane Library*.

A publication written on request of the Ethical Council in Denmark about the scientific basis of technology assessment in health care has received wide political interest and has played a role for the proposal in parliament that technology assessment activities be supported with 25 mio kr annually (see Appendix 1).

Leaflets describing the Cochrane Collaboration and The Nordic Cochrane Centre and Network have been prepared in Danish, Finnish, Norwegian and Swedish.

References

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3. Cochrane AL. 1931-1971: a critical review, with particular reference to the medical profession. In: *Medicine for the year 2000*. London: Office of Health Economics, 1979: 1-11.
4. The Cochrane Library [database on disk and CDROM]. The Cochrane Collaboration; Issue 3. Oxford: Update Software; 1996. Updated quarterly. Available from: BMJ Publishing Group, London.

Acknowledgements

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STRATEGIC PLAN FOR 1997

The Nordic Cochrane Centre and Network will continue to collaborate with others, in the countries serviced by the Centre and elsewhere, to facilitate preparation, maintenance, and dissemination of systematic up-to-date reviews of the effects of health care. This is expected to lead to considerable benefits for the societies. Clinical practice will, to a much larger extent than today, become evidence-based, leading to more rational use of health care resources. Clinical research will also become more efficient, not only by avoiding unnecessary trials but also by using improved methods, since the process of reviewing the literature systematically often leads to important suggestions of better designs and more relevant outcome variables for future research.

The Cochrane Collaboration is only 3 years old. Its basic idea of producing and updating high-quality systematic reviews of the effects of health care has been readily accepted throughout the world. In contrast, the principle of evidence-based medicine, which should be a natural consequence of having updated reviews available, has been perceived as a threat to the liberty of choosing whichever therapy a clinician considers relevant by some practitioners and professional societies.

Whatever their rationale and potential benefit to society, new ideas need considerable marketing to become successfully implemented. The Nordic Cochrane Centre and Network has therefore published a considerable number of papers and given many talks during the previous two years. In addition, meta-analyses in important areas have been carried out to serve as examples of the usefulness of this activity and to educate new collaborators. Meta-analysis will also be an important activity in future, since individuals with the necessary skills and commitment to do systematic reviews are still in short supply.

Principal objectives

- to continue to disseminate widely the aims of the Cochrane Collaboration and the principles of evidence-based medicine
- to help the reviewers to prepare high-quality reviews
- to educate researchers in methodology and statistics related to the science of reviewing research
- to continue to develop *Review Manager* so that it becomes as user-friendly as possible and incorporates necessary new statistical methods
- to try to secure a more permanent economic basis for the Nordic Cochrane Centre
- to involve consumers in the work of the Cochrane Collaboration to ensure that reviews are understandable and relevant
- to secure that Cochrane Reviews are used as widely as possible

Other tasks will be carefully considered in light of these overriding objectives.

Targets

- inform ethical review committees, drug agencies and medical research councils in the Nordic countries of the necessity of making it obligatory to include a systematic review in proposals for new clinical trials to avoid redundant and unethical clinical research (in the UK, the Medical Research Council has made reviews obligatory in applications for funding for trials)
- inform universities and other institutions in the Nordic countries of the *The Cochrane Library* and suggest it be used in curricula of problem-based learning
- offer two workshops during 1996 to support members of registered review groups to develop protocols and use the Review Manager software
- offer one training workshop for hand searchers
- conduct a week-long course on systematic reviews for a non-Cochrane audience
- try to identify possible new reviewers and editors of new and existing review groups, filling the gaps in the current coverage of the scope of review groups
- establish an orphan trials review group in collaboration with the UK Cochrane Centre which may provide a temporary home for reviewers with an interest not yet covered by existing groups
- release a completely revised edition of *The Cochrane Collaboration Handbook*
- update and release a new version of Review Manager in collaboration with Update Software
- establish a support system for users of Cochrane software
- establish a searchable catalogue of examples of data extraction and other important methodological issues for reviewers in collaboration with other Cochrane centres
- establish a searchable register of important papers on non-specific effects of interventions (placebo effects) in collaboration with the Dutch Cochrane Centre
- establish a register of software projects within the Cochrane Collaboration
- establish a change control system for the Cochrane Collaboration Information Management System (RevMan, ModMan and the Parent Database) and for MetaView in collaboration with Update Software
- publish 4th edition of: Wulff HR, Gøtzsche PC. *Rationel klinik*. København: Munksgaard. This book is obligatory reading for medical students in Copenhagen; the revised edition will describe systematic reviews and the Cochrane Collaboration

- publish at least one paper which summarises an important Cochrane review in one of the Nordic medical associations' journals other than *Ugeskrift for Læger* where the process was started in 1996
- translate information brochures on the Cochrane Collaboration, especially directed at policy makers, funders, and patients, into the Nordic languages
- handsearch the remaining Norwegian general journals
- translate titles of all trials identified by handsearching which are not on MEDLINE into English
- update prospective handsearches and send citations for all new trials to The Baltimore Cochrane Center for inclusion on MEDLINE and *The Cochrane Controlled Trials Register*
- hold a meeting with people serviced by the Nordic Centre listed in the Cochrane Directory to find out how they can best be served from The Nordic Cochrane Centre and Network and how they can best contribute to the Cochrane Collaboration, e.g. by becoming reviewers, doing handsearches, obtaining funds, liaising with policy makers, patient organisations, and medical editors and journalists
- complete section on methods working groups for inclusion in *The Cochrane Library*
- publish Cochrane reviews on antifungal agents, somatostatin, and house dust mites
- revise Cochrane reviews on antifungal agents, somatostatin, and house dust mites
- prepare Cochrane review on the short-term effect of steroids in arthritis
- prepare Cochrane review on the safety of home birth
- prepare a reanalysis of the data on routine ultrasound scanning in early pregnancy
- promote the idea that home birth vs hospital birth should be subjected to a randomised trial
- prepare a Cochrane protocol comparing various places of birth and referral guidelines
- convene a meeting of the Observational Data Methods Working Group at the 1997 Colloquium in Amsterdam
- prepare a list of reviews/trials/outcomes which consumers want
- convene a Danish consumers meeting

APPENDIX 1. Relevant publications 1995-1996

(by staff at the Centre and collaborators in the Network)

1995

Bjørndal A. Førsteudgaven av Cochrane-databasen er publisert. Tidsskr Nor Lægeforen 1995;115:2159.

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Mäkelä M. Herra Cochranen jalanjäljillä. Toukokuu 1995;1:7-8.

Mäkelä M. Suomalaiset mukaan Cochrane-yhteistyöhön. Suomeen Hammaslääkärilehti 1995;21:1208-9.

Outinen M. Fysioterapia mukaan Cochrane-yhteistyöhön (Physiotherapy joins The Cochrane Collaboration). Fysioterapia 1995;6:53.

Sigurdsson JA. Vísindin í vinnulagið (Evidence based medicine). Læknablaðið 1995;81:842-4.

Varonen H, Mäkelä M. Vaikuttavien hoitojen metsästäjät Cochrane-kokous Osllossa (The hunt for effective interventions. Cochrane Colloquium in Oslo). Finnish Medical Journal 1995;36:3998-4000.

1996

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APPENDIX 2. Meetings and courses addressed 1995-1996 (by staff at the Centre)1995

EU Application Meeting, Danish Hospital Institute, 12 Jan
 Course in biological psychiatric research, Copenhagen, 17 Jan
 BIOMED 1 meeting, Oxford, 20 Jan
 Danish Society for Good Clinical Practice, Copenhagen, 2 Feb
 University Hospitals Centre for Nursing Research, Copenhagen, 23 Feb
 Meeting with Danish Minister of Health, Copenhagen, 27 Feb
 3rd Advisory Board Meeting, Nordic Cochrane Centre, Helsinki, 27 March
 Workshop on Systematic Reviews, Copenhagen, 27-29 March
 Cochrane Centre Directors' meeting, Copenhagen, 30 March
 Dansk Selskab for Medicinsk Prioritering, Svendborg, 28 April
 Dutch Cochrane Centre, exploratory meeting on placebo, Amsterdam, 31 May
 Danish Society for Epidemiology, 2 June
 Reviews and Syntheses. 11th Meeting, International Society of Technology Assessment in Health Care, Stockholm, 6 June
 Danish Council of Nurses, Contact Net of Technology, 8 June
 4th Conference of the Hungarian Society for Quality Assurance in Health Care, Hungary, 9-10 June
 Anvendelse af forskningsresultater. Rigshospitalet's course in quality development, 15 June
 BIOMED 2 meeting, Amsterdam, 19 June
 4th Nordic Conference for Medical Libraries, Copenhagen, 24 Aug
 Nordisk medicinaldirektørmøde, Hornbæk, 1 Sept
 Priority Setting in Health Care, Ringkøbing amt, Herning, 27 Sept
 3rd Annual Cochrane Colloquium, Oslo, 4-8 Oct
 Steering Group Meeting, Oslo, 9 Oct
 BIOMED meeting, Oslo, 10 Oct
 Scandinavian Breast Cancer Group, Hindsgavl, 13 Oct
 Sundhedsstyrelsens MTV-udvalg, København, 18 Oct
 Dansk Reumatologisk Selskab, Albertslund, 20 Oct
 Priority Setting in Health Care, Nordjyllands amt, Rebild, 1 Nov
 Rigshospitalet's course in quality development, 13 Dec
 Swedish Nursing Association, Stockholm, 20 Dec

1996

Medicine 96, Finnish Medical Association (Duodecim), Helsinki, 10 Jan
 Medicine 96, Finnish Office for Health Care Technology Assessment, Helsinki, 11 Jan
 Dansk Selskab for Medicinsk Onkologi, Helsingør, 19 Jan
 Staff-meeting, Sundby Hospital, 23 Jan
 Research Council of Copenhagen Hospital Corporation, Copenhagen, 12 March
 Dansk Selskab for Intern Medicins tværfaglige kursus. Sundby Hospital, 27 March
 Staff-meeting, Sankt Elisabeths Hospital, 9 April
 1st Annual Meeting for the Nordic Cochrane Centre, Copenhagen, 19 April
 International Confederation of Midwives, 24th Triennial Congress, Oslo, 26-31 May
 Temadag om tværfaglige specialeråd, Rigshospitalet, 2 May

Seminar, IHCAR, Karolinska Institutet, Stockholm, 13 May
Hospital administrators from Barcelona visiting Rigshospitalet, 14 June
WENR (Workgroup of European Nurse Researchers), Stockholm, 25 June
Steering Group, Strategic planning meeting, Oslo, 17-19 Aug
MEDIF's direktørseminarium, Hornbæk, 4 Sept
Staff-meeting, Hvidovre Hospital, 17 Sept
BIOMED2 meeting, Milano, 21-22 Sept
Det Medicinske Selskab i København, Copenhagen, 24 Sept
4th Annual Cochrane Colloquium, Adelaide, 21-24 Oct
Dansk Selskab for Klinisk Mikrobiologi, Kolding, 8 Nov
Foreningen af Sygehusadministratorer, Kolding, 28 Nov
Danish Institute for the Health Services, Snekkersten, 28-29 Nov

APPENDIX 3. Visitors received at the Centre since 1993 (apology for any omissions)**Canada**

Brian Haynes, Canadian Cochrane Centre, McMaster University
 John McDonald, University Hospital, London, Ontario
 Arne Ohlsson, University of Toronto
 Andy Oxman, McMaster University

Denmark

Lars Ole Andersen, Museum of Medical History
 Susanne Andersen, School of Midwifery, Copenhagen
 Yrsa Andersen, Copenhagen
 Peter Bartram, Odense University Hospital
 Gabriella Bech, Hillerød Hospital
 Per Bech, Hillerød Hospital
 Susanne Blom, Copenhagen Hospital Corporation
 Gudrun Boysen, Hvidovre Hospital
 Palle Christensen, Odense University Hospital
 Anne Frølich, Copenhagen
 Arne Gam, Bispebjerg Hospital
 Christian Gluud, Copenhagen Trial Unit
 Anne Hee, Copenhagen Trial Unit
 Peter Hornnes, Dept. of Obstetrics, Rigshospitalet
 Susanne Houd, Danmarks Sygeplejehøjskole
 Asbjørn Hrobjartsson, University of Copenhagen
 Torben Jørgensen, Danish Hospital Institute
 Niels Keiding, University of Copenhagen
 Peter Kjær, University Library, Copenhagen
 Jannie Lehman Knudsen, Copenhagen Hospital Corporation
 Finn Børlum Kristensen, Danish Hospital Institute
 Marianne Kristensen, Nordic Council of Ministers
 Kim Krogsgaard, Copenhagen Trial Unit
 Lotte Kure, Copenhagen Hospital Corporation
 Eva Kvist, Danmarks Journalisthøjskole
 Birgit Lange, University Library, Copenhagen
 Jens Langhoff-Ross, Danish Hospital Institute
 Jørgen Lous, University of Aarhus
 Hans Lund, Herlev Hospital
 Benny Lyholm, NOVO Nordisk
 Trine Løvenrose, School of Midwifery, Copenhagen
 Lisbeth Moustgard, University Library, Copenhagen
 Henrik Møller, Center for Registerforskning
 Marianne Nord-Hansen, Copenhagen
 Ole Olsen, University of Copenhagen
 Jens Piero Quartarolo, Kalundborg Sygehus
 Gunnar Sandholt, Nordic Council of Ministers
 Kirsten Sølvsteen, University Library, Copenhagen
 Jean Pierre Sørensen, NOVO Nordisk
 Tea Krogh Sørensen, Danmarks Journalisthøjskole
 Thorkild IA Sørensen, Institute of Disease Prevention

Erik Vrå, Rigshospitalet
Henrik R Wulff, University of Copenhagen

Finland

Maxim Cheine
Marjukka Mäkelä, the National R & D Centre, Helsinki
Minna-Kaisa Auvinen
Kristian Wahlbeck

Holland

Jos Kleijnen, Dutch Cochrane Centre

Iceland

Ari Johannesson, Akranes Hospital
Jóhann Sigurðsson, Hafnarfjörður

Italy

Alessandro Liberati, Italian Cochrane Centre

Lithuania

Jolanta Dadoniene, Vilnius

Norway

Arild Bjørndal, National Institute of Public Health

Sweden

Ingegerd Agenäs, Apoteksbolaget AB
Harry Boström, Professor emeritus
Arne Jacobsson, Swedish Institute for Health Services Development
Egon Jonsson, Swedish Council on Technology Assessment in Health Care
Ulf Malm, Sahlgrenska Hospital, Göteborg
Deborah Marshall, Swedish Council on Technology Assessment in Health Care
Martin Olsson, Huddinge Hospital
Sten Thelander, Swedish Council on Technology Assessment in Health Care
Lars Werkö, Swedish Council on Technology Assessment in Health Care

UK

Iain Chalmers, UK Cochrane Centre
Monica Fischer, UK Cochrane Centre
Jini Hetherington, UK Cochrane Centre
George Davy Smith, Bristol
Mark Starr, Oxford
David Thompson, University of Manchester

USA

Thomas C Chalmers, Harvard University
Joseph Lau, New England Medical Center