



Cochrane Crowd

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On behalf of the Project Transform

Trusted evidence.
Informed decisions.
Better health.



Information overload



“Global scientific output doubles every nine years”

[Nature News Blog, May 2014]

Cochrane Crowd



You can make a difference

Become a Cochrane citizen scientist. Anyone can join our collaborative volunteer effort to help categorise and summarise healthcare evidence so that we can make better healthcare decisions.

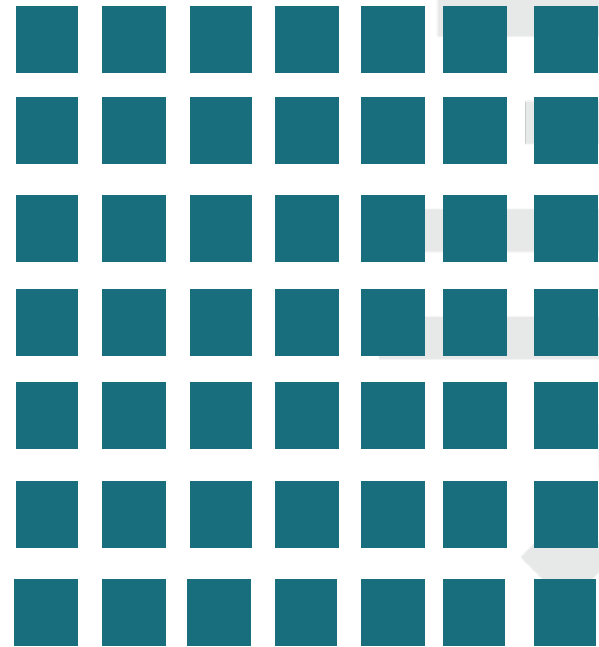
Give it a try

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The task: making it doable



Reviews are complex but they are made up of a number of rule-driven, systematic tasks. These kinds of tasks can be re-formed as ‘microtasks’

The task: is it an RCT?

Restricted versus continued standard caloric intake during the management of refeeding syndrome in critically ill adults: A **randomised**, parallel-group, multicentre, **single-blind controlled trial**. [2015522581]

Background: Equipoise exists regarding the benefits of restricting caloric intake during electrolyte replacement for refeeding syndrome, with half of intensive care specialists choosing to continue normal caloric intake. We aimed to assess whether energy restriction affects the duration of critical illness, and other measures of morbidity, **compared with** standard care. **Methods:** We did a **randomised**, multicentre, **single-blind** clinical **trial** in 13 hospital intensive care units (ICUs) in Australia (11 sites) and New Zealand (two sites). Adult critically ill patients who developed refeeding syndrome within 72 h of commencing nutritional support in the ICU were enrolled and allocated to receive continued standard nutritional support or protocolised caloric restriction. 1:1 computer-based randomisation was done in blocks of variable size, stratified by enrolment serum phosphate concentration (>0.32 mmol/L vs <0.32 mmol/L) and body-mass index (BMI; >18 kg/m² vs <18 kg/m²). The primary outcome was the number of days alive after ICU discharge, with



RCT/CCT

Reject


Unsure

[Help me decide](#)

[Add a note](#)

Cochrane Citizen Scientists can see a title and an abstract and have to decide whether they think the record is describing a randomised trial

The task: is it an RCT?

RCT 

Reject

Unsure

3 possible choices



Why do people sign up?



To help



To learn and
develop skills

A decorative graphic on the right side of the slide, consisting of a vertical grey line with several horizontal grey bars of varying lengths extending to the left, resembling a stylized staircase or a list of items.

Interactive (and brief!) training

Improved Survival with Ursodeoxycholic Acid Prophylaxis in Allogeneic Stem Cell Transplantation: Long-Term Follow-Up of a **Randomized** Study. [2013818057]

We report the long-term results of a prospective **randomized** study on the use of ursodeoxycholic acid (UDCA) for prevention of hepatic complications after allogeneic stem cell transplantation. Two hundred forty-two patients, 232 with malignant disease, were **randomized** to receive (n= 123) or not to receive (n=119) UDCA from the beginning of the conditioning until 90 days post-transplantation. The results were reported after 1-year follow-up. UDCA administration reduced significantly the proportion of patients developing high serum bilirubin levels as well as the incidence of severe acute graft-versus-host disease (GVHD), liver GVHD, and intestinal GVHD. In the UDCA prophylaxis group, nonrelapse mortality (NRM) was lower and overall survival better than in the control group. After a 10-year follow-up, the difference in the survival and NRM in favor of the UDCA-treated group, seen at 1 year, was maintained (survival 48% versus 38%, $P = .037$; NRM 28% versus 41%, $P = .01$). A landmark analysis in patients surviving at 1 year post-transplantation showed no significant differences between the study groups in the long-term follow-up in chronic GVHD, relapse rate, NRM, disease-free survival, or overall survival. These long-term results continue to support the useful role of UDCA in the prevention of transplant-related complications in allogeneic transplantation. © 2014 American



We agree!

We said RCT/CCT. This record describes the follow-up results of a randomised trial. Even if the follow-up extended beyond the initially conceived trial period, the record is eligible if it reports on the outcomes believed to be connected to the intervention or treatment. A follow-up study that looked at something not related to the intervention (such as years of education) would not be eligible.

RCT/CCT

Anyone can sign up; everyone has to do the training: 20 practice records
The training is aimed at the complete beginner

Quick Reference guide

Record describes a:	More details	Decision
Randomised controlled trial in human subjects	Sometimes this kind of trial is called a randomised trial or an RCT.	RCT or CCT
A quasi-randomised trial in human subjects	Sometimes the form of randomisation used is not truly random. For example, treatment may have been allocated by date of birth or day of the week. These are what we think of as CCTs but you could also call them quasi-randomised controlled trials.	RCT or CCT
Randomised controlled trial in non-human subjects	Animal studies are out.	Reject
Randomised controlled trial in cadavers	Randomised studies performed on dead bodies are out and this includes studies on specific parts of cadavers.	Reject
Randomised controlled trial on extracted human parts	Extracted parts are not eligible. A randomised trial on teeth not extracted is eligible. If the teeth are removed and then randomised, it's out.	Reject
Randomised controlled trial in parts of a human	For example eyes randomised to receive the intervention or the control.	RCT or CCT

**A reminder
of what
we're
looking for
and what
we're not
looking for**

Helpful highlights

Mind-wandering, cognition, and performance: a theory-driven **meta-analysis** of attention regulation. [25089941]

The current **meta-analysis** accumulates empirical findings on the phenomenon of mind-wandering, integrating and interpreting findings in light of psychological theories of cognitive resource allocation. Cognitive resource theory emphasizes both individual differences in attentional resources and task demands together to predict variance in task performance. This theory motivated our conceptual and **meta-analysis** framework by introducing moderators indicative of task-demand to predict who is more likely to mind-wander under what conditions, and to predict when mind-wandering and task-related thought are more (or less) predictive of task performance. Predictions were tested via a random-effects **meta-analysis** of correlations obtained from normal adult samples (k = 88) based on measurement of specified episodes of off-task and/or on-task thought frequency and task performance. Results demonstrated that people with fewer cognitive resources tend to engage in more mind-wandering, whereas those with more cognitive resources are more likely to engage in task-related thought. Addressing predictions of resource theory, we found that greater time-on-task-although not greater task complexity-tended to strengthen the negative relation

The red highlights act as 'warning' highlights to indicate the record might be one to Reject

Helpful highlights

Effects of low-fat or full-fat fermented and non-fermented dairy foods on selected cardiovascular biomarkers in overweight adults. [2013769292]

The association between consumption of full-fat dairy foods and CVD may depend partly on the nature of products and may not apply to low-fat dairy foods. Increased circulating levels of inflammatory biomarkers after consumption of dairy product-rich meals suggest an association with CVD. In the present study, we tested the effects of low-fat and full-fat dairy diets on biomarkers associated with inflammation, oxidative stress or atherogenesis and on plasma lipid classes. Within full-fat dairy diets, we also compared fermented v. non-fermented products. In a **randomised cross-over** study, twelve overweight/obese subjects consumed during two 3-week periods two full-fat dairy diets containing either yogurt plus cheese (fermented) or butter, cream and ice cream (non-fermented) or a low-fat milk plus yogurt diet, with the latter being consumed between and at the end of the full-fat dairy dietary periods. The concentrations of six inflammatory and two atherogenic biomarkers known to be raised in CVD were measured as well as those of plasma F2-isoprostanes and lipid classes. The concentrations of six of the eight biomarkers tended to be higher on consumption of

The Yellow highlights are for words and phrases frequently found in records we are looking for (RCTs)

Help me decide

Intermittent hormone therapy versus continuous hormone therapy for locally advanced prostate cancer: A **meta-analysis**. [2015249574]

Few **randomized** studies have compared intermittent hormone therapy (IHT) with continuous hormone therapy (CHT) for the treatment of locally advanced prostate cancer (PCa). Here, we report the results of a **meta-analysis** of a **randomized controlled trial**, evaluating the effectiveness of IHT versus CHT for patients with locally advanced PCa. Types of intervention were IHT versus CHT. The primary endpoint of this study is overall mortality and the secondary endpoints are any progression of disease, quality of life (QOL) and adverse effects between two groups. Six **randomized controlled trials** totaling 2996 patients were included. Results are as follows: after hormone therapy, patients undergoing IHT demonstrated no significant difference from those undergoing CHT in terms of the overall mortality (OR = 1.0, 95% CI [0.86, 1.17]) and disease progression (OR = 1.16, 95% CI [0.86, 1.57]). Men treated with IHT also reported better QOL, fewer adverse effects and considerable economic benefit for the individual and the community. With no difference in overall mortality and incidence of progression, current clinical studies confirm that both therapeutic **methods** were safe and effective. However, our study also takes into account QOL. When these secondary measures are considered, IHT may be a better option over CHT as patients report a more affordable treatment with improved QOL and fewer adverse effects.

Help me decide

Are the participants in the study living human beings?

- Yes
- No
- Impossible to tell
- Unsure

Next

The Help me decide feature takes a screener through a series of questions to help reach a decision

Screen records of interest

Prioritise the records I receive

The records that you receive to screen are chosen by the system. If you would prefer to see records that are of particular interest to you then enter below words or short phrases that identify them and we will prioritise records with those terms in the title or abstract for you. If none are available that match your terms we will just send unprioritised records as normal.



You can choose to work on records in areas of interest to you.

I'm interested in dementia so the records I get contain the word dementia or Alzheimer's...

Screen records of interest

37 years of body mass index and **dementia**: Effect modification by the APOE genotype: Observations from the prospective population study of women in Gothenburg, Sweden. [2015491824]

Background: Overweight and obesity in mid- and late-life may increase risk for **dementia**, whereas a decline in body weight or body mass index (BMI) and underweight in years preceding a clinical **dementia** diagnosis are also associated with **dementia**. Little is known about the modifying effect of the APOE genotype, a major susceptibility gene for **Alzheimer's** disease (AD), on the BMI-**dementia** adult life course trajectory. Objective: We evaluated the exposure, BMI, in relationship to the outcome, clinical **dementia**, over 37 years, considering the effect modification of the APOE epsilon4 allele. Methods: The Prospective Population Study of Women (PPSW) in Sweden is a systematic sample of 1462 women born 1908, 1914, 1918, 1922, and 1930 and aged 38-60 years at baseline. Examinations occurred in 1968, 1974, 1980, 1992, 2000, and 2005; 559 women had information on **dementia**, BMI, and APOE epsilon4 allele status, in addition to covariates. Statistical analyses were conducted using mixed effects regression models. Results: Trajectories of BMI over 37 years differed by APOE epsilon4 allele status. While women gained BMI similarly from mid-life to age 70 years, women with at least one APOE epsilon4 allele experienced BMI decline more quickly after age 70 years compared to women without an APOE epsilon4 allele. However, upon stratifying the sample by **dementia** occurrence, it appeared that **dementia** drove the overall BMI-trajectory. There was a main



A great way to keep up with the latest research being published in my area of interest

Add my own highlights

No Effect of Different Stimulation Conditions on Verbal Fluency and Visuospatial Orientation in Patients with Subthalamic Nucleus Deep Brain Stimulation.

[2015369408]

Background: Subthalamic nucleus deep brain stimulation is an effective treatment for the symptomatic treatment of Parkinson's disease. Apart from the obvious motor benefits, some cognitive side effects have been reported, particularly in verbal fluency. Objectives: Our aim was to evaluate the effects of the stimulation on verbal fluency and visuospatial orientation with changing stimulation conditions in 35 patients with Parkinson's disease. **Methods:** Patients were randomized for their stimulation conditions as 'both on', 'both off', 'right on', and 'left on' and underwent verbal fluency and visuospatial orientation tasks during their drug-on periods. Letter and categorical fluency tasks and Benton's Judgment of Line Orientation Test were used for assessment. **Results:** Overall, 6 patients were excluded due to dementia or depression. For verbal fluency, the number of words they produced in 1 min was similar in four stimulation conditions ($p > 0.05$). No significant difference was found between stimulation conditions in the spatial orientation task. Conclusions: We were unable to find any significant changes in verbal fluency and visuospatial orientation task scores with different stimulation conditions. This result suggests that either stimulation has no effect on given domains or the effect is so small that more detailed batteries are required to detect the difference.

I've added some 'directional' highlights to help direct me to certain parts of a structured abstract

And I can colour code them!

No Effect of Different Stimulation Conditions on Verbal Fluency and Visuospatial Orientation in Patients with Subthalamic Nucleus Deep Brain Stimulation.

[2015369408]

Background: Subthalamic nucleus deep brain stimulation is an effective treatment for the symptomatic treatment of Parkinson's disease. Apart from the obvious motor benefits, some cognitive side effects have been reported, particularly in verbal fluency. Objectives: Our aim was to evaluate the effects of the stimulation on verbal fluency and visuospatial orientation with changing stimulation conditions in 35 patients with Parkinson's disease. **Methods:** Patients were randomized for their stimulation conditions as 'both on', 'both off', 'right on', and 'left on' and underwent verbal fluency and visuospatial orientation tasks during their drug-on periods. Letter and categorical fluency tasks and Benton's Judgment of Line Orientation Test were used for assessment. **Results:** Overall, 6 patients were excluded due to dementia or depression. For verbal fluency, the number of words they produced in 1 min was similar in four stimulation conditions ($p > 0.05$). No significant difference was found between stimulation conditions in the spatial orientation task. Conclusions: We were unable to find any significant changes in verbal fluency and visuospatial orientation task scores with different stimulation conditions. This result suggests that either stimulation has no effect on given domains or the effect is so small that more detailed batteries are required to detect the difference.

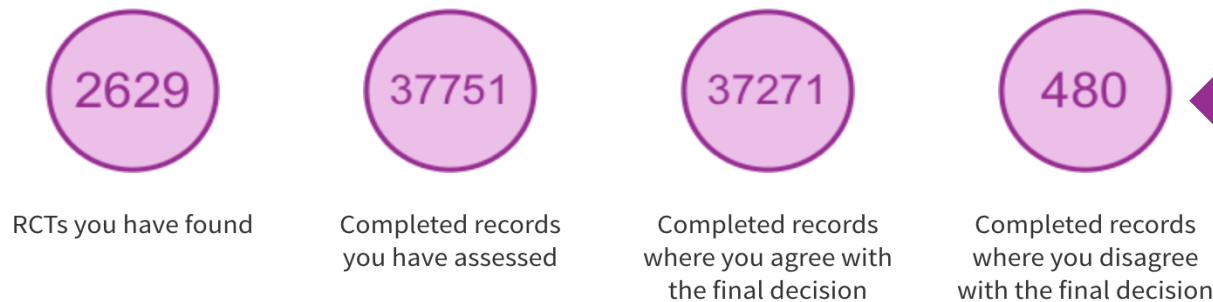
I've made
Background
and Results the
same colour but
left Methods
blue

View my performance

Summary

You have assessed **38609** records. Note that some records may still be being assessed by other people.

Below is a summary of your activity on this task to date. The figures are for records that have been assessed by more than one person and completed their assessments so they may not match up to the total number of records you have assessed.

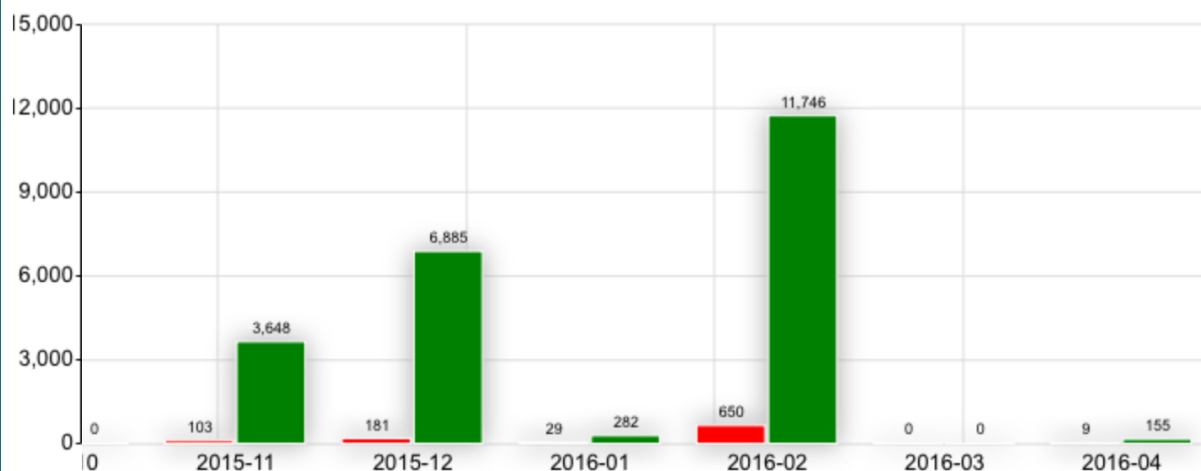


An area we plan to develop quite a bit but still very useful – especially the number on the right

View my performance

Accuracy

The green bars in the histogram below show the number of records you screened in any particular month where your decision matched the final decision. Red bars show the number of records where your decision did not match the final decision.



This shows how many records I screen and when, and also how many of those records were in agreement or disagreement with the final decision

View my performance

Feb 16, 2015

The role of empathic concern, internalized moral principle, and anticipated guilt in college students' intentions to send or read text messages while driving. [2014748316]

Although a growing amount of research has examined the consequences and prevalence of texting while driving, little research has examined the psychological factors that predict intentions to text while driving. Because texting while driving can potentially cause property damages and injure or kill people, it is particularly relevant to the moral aspect of a mobile communication and health behavior. Study 1 was based on a cross-sectional survey of 513 college students who responded to a battery of questions. Results revealed that participants' empathic concern predicted their feelings of anticipated guilt and internalized moral principle of care, which in turn negatively predicted intentions to text while driving. Study 2 was based on an experimental design where participants were randomly assigned to one of the three imagined conditions (i.e., severe car crash with no injuries, severe injuries with no deaths, and control). Results revealed that participants anticipated more guilt feelings in the two experimental conditions than in the control condition. However, there was no difference between the experimental conditions in arousing anticipated guilt. Both theoretical and practical implications related to the psychology of mobile communication and anti-texting while driving are discussed.

Disagree

You said **Reject**, we said **RCT or CCT**

Here I can see that a record I rejected ended up with a final decision of RCT or CCT. Looking at it, I can see that I did indeed make a mistake in rejecting it.

Results

900,000
classifications

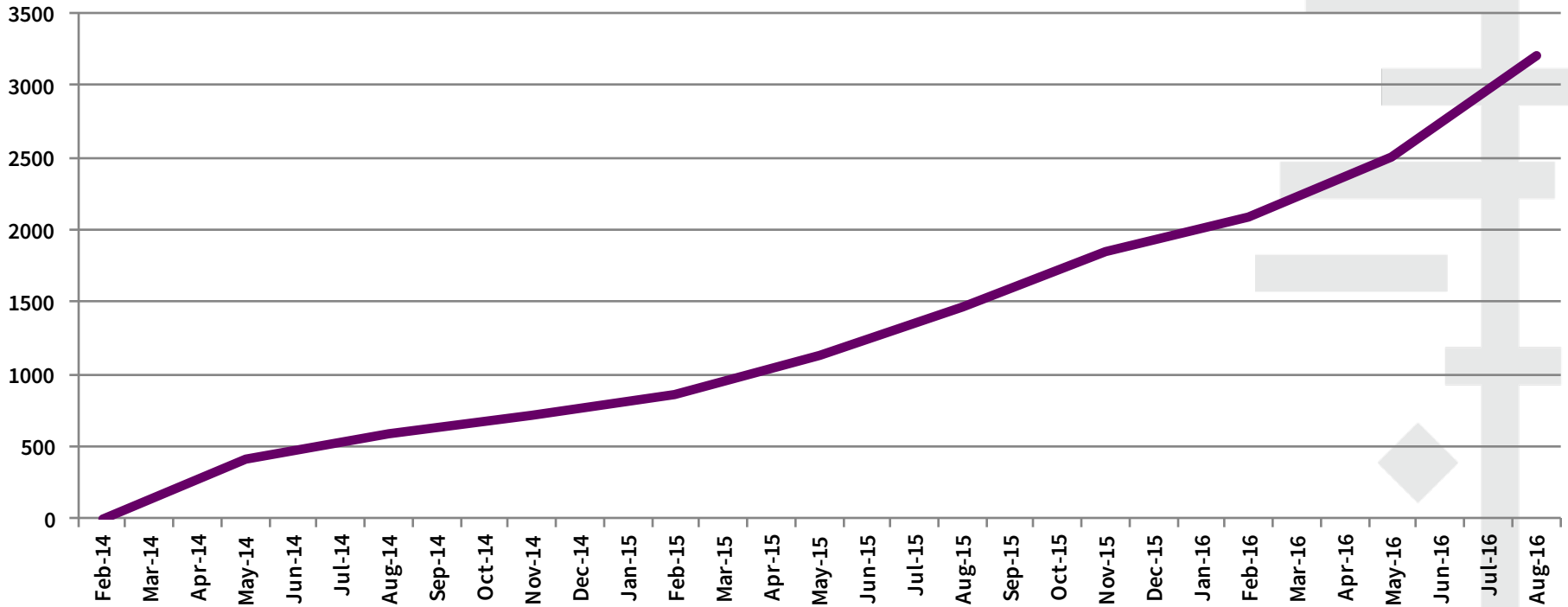
300,000
citations

30,000
RCTs



Recruitment and Engagement

Cochrane Citizen Scientists

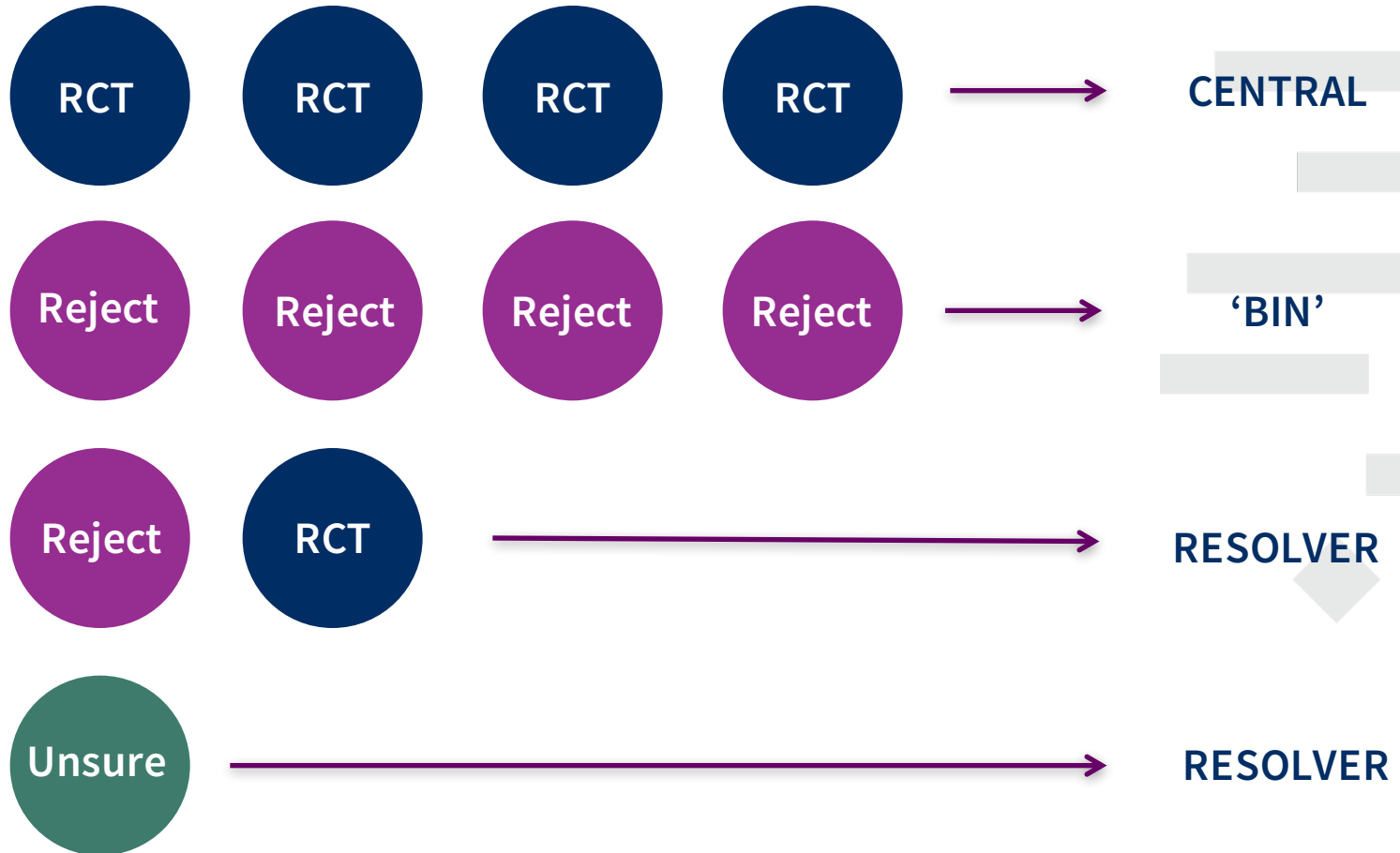


Recruitment and Engagement



In the last three months we've had **contributors from 85 countries** sign-up

Quality

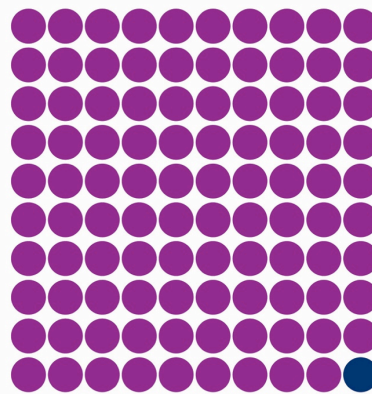


Quality



Sensitivity = 99.1%

Crowd correctly identifies
99 out of 100 RCTs



Specificity = 99.0%

Crowd correctly identifies
99 out of 100 non-RCTs



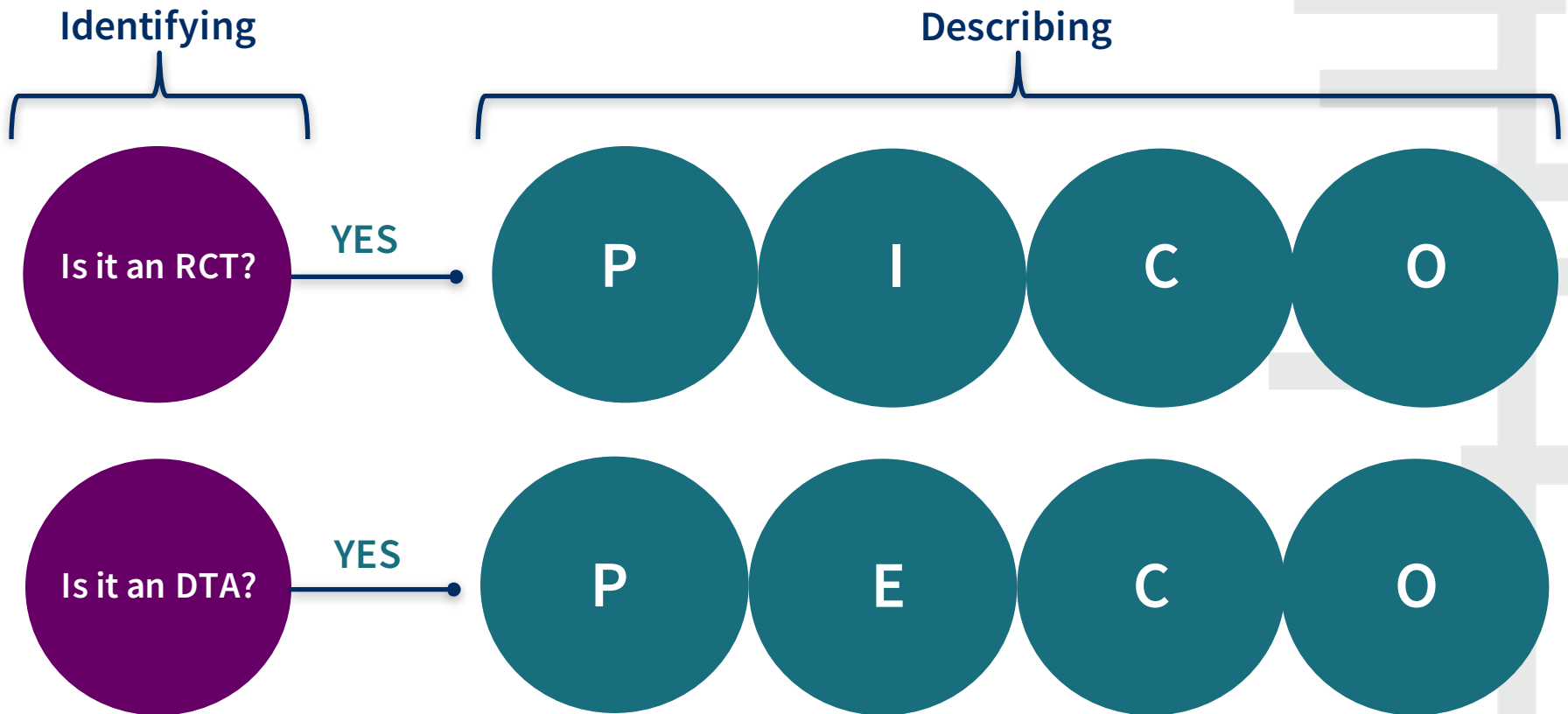
Cochrane Crowd: next steps



- More tasks
- Cochrane Classmate
- Crowd service

<http://crowd.cochrane.org>

More tasks



Cochrane Classmate

“Can I use the task for my students?”

Yes, Please!

Crowd services



Show me all known
assessments



Help me screen for
my review!



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