

# Cochrane Knowledge Translation Taiwan experience

Cliff Chen; Joyce Chen

2019/11/06

Director: Dr. Cliff Chen  
Associate Director: Dr. Kelvin Tam  
CEO: Dr. Joyce Chen  
Advisory: Prof. Ken N. Kuo

# Outlines





# Evidence Based Research Competition

- Time: 2019/10/9 (三)
- Promoting Evidence-Based Medicine and Disseminating Technology Knowledge, Establishing Health and Welfare Biotechnology Electronic Database Sharing Platform in Taiwan
- Evidence Based Medical Competition Award - Between Hospitals which belong to Ministry of Health and Welfare



## 實證總動員

科技知識及共享資源成果發表會





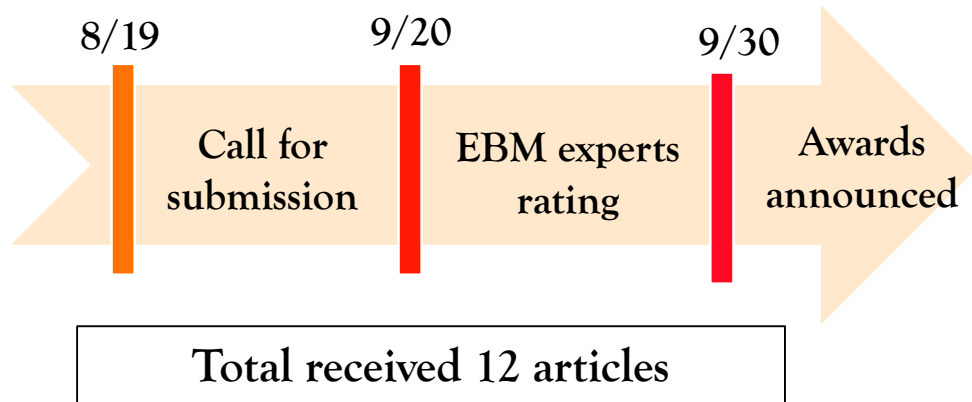
**主辦單位：**臺北醫學大學 考科藍臺灣研究中心 (Cochrane Taiwan)  
**指導單位：**衛生福利部  
**計畫名稱：**衛生福利部「108推動全國實證醫學普及科技知識及建置醫療衛生福利生技期刊共享資源計畫」  
**活動日期：**108年10月9日(星期三) 14:00~17:00  
**活動地點：**臺北醫學大學 醫學綜合大樓後棟8樓 徐千田廳 (台北市信義區吳興街250號)



時間	內容	講者
14:00 ~ 14:10	報到	
14:10 ~ 14:15	歡迎致詞	陳杰峰 主任
14:15 ~ 14:20	計劃指導單位致詞	衛生福利部科技發展組 陳惠娟 科長
14:20 ~ 14:30	「108年推動全國實證醫學普及科技知識及建置醫療衛生福利生技期刊共享資源計畫」-計畫簡介	陳杰峰 主任
14:30 ~ 14:40	無GRADE不通的臨床指引	譚家偉 主任
14:40 ~ 14:45	活動合照	
14:45 ~ 15:00	部立醫院實證醫學競賽經驗分享 (臨床應用組)	冠軍隊伍
15:00 ~ 15:15	部立醫院實證醫學競賽經驗分享 (文獻查證組)	冠軍隊伍
15:15 ~ 15:30	「Cochrane Library到院服務」機構心得分享	
15:30 ~ 15:40	Tea Break	
15:40 ~ 16:10	【考科藍證據改變我生活的故事】徵文比賽	得獎團隊
16:10 ~ 16:40	【考科藍資料庫之一日網紅PK賽】短片比賽	得獎團隊
16:40 ~ 17:00	綜合討論	陳杰峰 主任

(活動議程以當日公告為主)

# Internet Celebrity competition for Cochrane Library



Contestants choose at least one  
Cochrane Review from  
Cochrane Database of Systematic  
Review (CDSR) and make a video



Cochrane  
Taiwan

## 考科藍資料庫之 一日網紅PK賽

計畫名稱  
108年「推動全國實證醫學普及科技知識及建置醫療衛生福利生技期刊共享資源計畫」

活動獎項

金獎一名	銀獎一名	銅獎一名
 SONY PS4 1TB 特仕機 (乙臺)	 GARMIN VIVOLIFE 悠遊卡智慧腕錶 (乙隻)	 Fujifilm instax mini9 拍立得 (乙臺)

活動詳情請上實證醫學知識網  
[imohw.tmu.edu.tw](http://imohw.tmu.edu.tw)

手刀報名



主辦單位：臺北醫學大學考科藍臺灣研究中心 (Cochrane Taiwan)  
協辦單位：碩睿資訊有限公司  
指導單位：衛生福利部



## Electronic cigarettes for smoking cessation

Hartmann-Boyce J, McRobbie H, Bullen C, Begh R, Stead LF, Hajek P. Cochrane Database Syst Rev. 2016 Sep 14;9:CD010216. doi: 10.1002/14651858.CD010216.pub3.



## Music therapy for depression

Aalbers S, Fusar-Poli L, Freeman RE, Spreen M, Ket JC, Vink AC, Maratos A, Crawford M, Chen XJ, Gold C. Cochrane Database Syst Rev. 2017 Nov 16;11:CD004517. doi: 10.1002/14651858.CD004517.pub3.



## Psychosocial interventions for erectile dysfunction

Melnik T, Soares BG, Nasselo AG. Cochrane Database Syst Rev. 2007 Jul 18;(3):CD004825.



# International Forum by BMJ

## 2 posters submission

Time: 2019/09/18-09/20

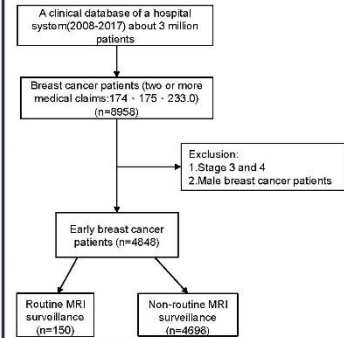



### The Real World Data of Using MRI for Routine Post-treatment Surveillance in Early Breast Cancer: A Multicenter Evidence

Chieh-feng Chen<sup>1,2</sup>, Tzu-Hao Chang<sup>3</sup>, Jin-Hua Chen<sup>4</sup>, Yu Ko<sup>5,6</sup>, Sih-Shan Ke<sup>2</sup>  
 1 Division of Plastic Surgery, Department of Surgery, Evidence-Based Medicine Center, Wan Fang Hospital, Taipei Medical University, Taipei, Taiwan  
 2 Department of Public Health, School of Medicine, College of Medicine, Cochrane Taiwan, Taipei Medical University, Taipei, Taiwan  
 3 Graduate Institute of Biomedical Informatics, College of Medical Science and Technology, Taipei Medical University, Taipei, Taiwan  
 4 Biostatistics Center and Masters Program in Big Data Technology and Management, College of Management, Taipei Medical University, Taipei, Taiwan  
 5 Department of Pharmacy, College of Pharmacy, Taipei Medical University, Taipei, Taiwan  
 6 Research Center for Pharmacoeconomics, College of Pharmacy, Taipei Medical University, Taipei, Taiwan

BACKGROUND	RESULTS AND DISCUSSION																														
<p>At present, the problem of overuse of medical resources still exists, and many countries are concerned about this issue. When providing unnecessary medical treatment, it will not only increase the expenditure of medical cost but also affect the health of patients. This study is aimed to evaluate the consumption of medical resources from "Do not do" list, especially the field of breast cancer. We selected an item from the NICE guidelines "Patients who have had early invasive breast cancer or breast ductal carcinoma in situ are not recommended for routine monitoring with magnetic resonance imaging (MRI)" [1, 2]. The research was to examine the use of MRI in patients who have been treated for early breast cancer.</p>	<p>A total of 4,848 early breast cancer patients were enrolled in this study and 504 early breast cancer patients used MRI. We calculated the number of times using MRI. A total of 354 patients used MRI once, but 17 patients used MRI more than 6 times (Table1). The average expenditure of using MRI for these patients was 6,000 NT dollars. According to our data, more than 400 MRI exams in the 150 patient cost about 3 million NT dollars which were possible overuse of medical resources.</p>																														
<p><b>METHODS</b></p> <p>Data were obtained from a clinical database of a hospital system in northern Taiwan. This clinical database contained electronic health records of more than 3 million patients. The breast cancer patient was defined as those who had two or more medical claims (I74 - I75 - 233.0) between 2008 and 2017. Early invasive breast cancer or ductal carcinoma in situ (DCIS) was defined as stage 0 - 2. MRI was defined as ICD-9-CM claim code 33064A, 33064B, 33085A, 33085B. Routine surveillance was defined as MRI used not less than twice within five years after receiving cancer treatment (Figure1). Descriptive statistics used number and percentage to present category data and used mean and standard deviation to present continuous data. Statistical significance was defined as a 2-sided <math>p &lt; 0.05</math>. All of data analyses were performed using SAS Enterprise Guide software, version 7.1.</p>	<p><b>Table 1: The frequency of using MRI</b></p> <table border="1"> <thead> <tr> <th>MRI (times)</th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>&gt;=6</th> </tr> </thead> <tbody> <tr> <td>patients</td> <td>354</td> <td>83</td> <td>30</td> <td>14</td> <td>6</td> <td>17</td> </tr> </tbody> </table> <p>A total of 150 patients (3%) received routine MRI surveillance among 4,848 early breast cancer subjects. The average age of patients with routine surveillance was 57.5 years, which is significantly higher than patients with non-routine surveillance. In addition, the MRI group had higher CCI Score and longer follow up days comparing to the non-routine surveillance group (Table2).</p> <p><b>Table 2: Demographic data of early breast cancer patients</b></p> <table border="1"> <thead> <tr> <th></th> <th>Routine MRI surveillance (n=150)</th> <th>Non-routine MRI surveillance (n=4,698)</th> <th>p-value</th> </tr> </thead> <tbody> <tr> <td>Age</td> <td>57.5±11.7</td> <td>54.8±12</td> <td>0.004</td> </tr> <tr> <td>CCI Score</td> <td>0.7±1.1</td> <td>0.5±1.0</td> <td>0.038</td> </tr> <tr> <td>*Follow up days</td> <td>1532.3±774.8</td> <td>1064.1±862</td> <td>&lt;0.001</td> </tr> </tbody> </table> <p>*Follow up days: since the day of diagnosis to the last medical record in the database</p> <p><b>Study limitations:</b>                      The data from the clinical database may have a diagnostic bias or a coding error.</p>	MRI (times)	1	2	3	4	5	>=6	patients	354	83	30	14	6	17		Routine MRI surveillance (n=150)	Non-routine MRI surveillance (n=4,698)	p-value	Age	57.5±11.7	54.8±12	0.004	CCI Score	0.7±1.1	0.5±1.0	0.038	*Follow up days	1532.3±774.8	1064.1±862	<0.001
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<p><b>CONCLUSION</b></p> <p>In this study, near 3% of early breast cancer patients routinely used MRI for surveillance. Totally about 3 million NT dollars was possible overuse in medical resources.</p>	<p><b>CONCLUSION</b></p> <p>In this study, near 3% of early breast cancer patients routinely used MRI for surveillance. Totally about 3 million NT dollars was possible overuse in medical resources.</p>																														
<p><b>REFERENCES</b></p> <p>Bonfill, X., Osorio, D., Sola, I., Pijuan, J. I., Balasso, V., Quintana, M. J., ... Ferreris-Gonzalez, I. (2016). DianaHealth.com, an On-Line Database Containing Appraisals of the Clinical Value and Appropriateness of Healthcare Interventions: Database Development and Retrospective Analysis. <i>PLoS One</i>, 11(2), e0147943. doi:10.1371/journal.pone.0147943                      National Institute for Health and Care Excellence (2009). Early and locally advanced breast cancer: diagnosis and treatment. Retrieved from <a href="https://associationofbreastsurgery.org.uk/media/54135/early-and-locally-advanced-breast-cancer-diagnosis-and-treatment-575682170565.pdf">https://associationofbreastsurgery.org.uk/media/54135/early-and-locally-advanced-breast-cancer-diagnosis-and-treatment-575682170565.pdf</a></p>	<p><b>REFERENCES</b></p> <p>Bonfill, X., Osorio, D., Sola, I., Pijuan, J. I., Balasso, V., Quintana, M. J., ... Ferreris-Gonzalez, I. (2016). DianaHealth.com, an On-Line Database Containing Appraisals of the Clinical Value and Appropriateness of Healthcare Interventions: Database Development and Retrospective Analysis. <i>PLoS One</i>, 11(2), e0147943. doi:10.1371/journal.pone.0147943                      National Institute for Health and Care Excellence (2009). Early and locally advanced breast cancer: diagnosis and treatment. Retrieved from <a href="https://associationofbreastsurgery.org.uk/media/54135/early-and-locally-advanced-breast-cancer-diagnosis-and-treatment-575682170565.pdf">https://associationofbreastsurgery.org.uk/media/54135/early-and-locally-advanced-breast-cancer-diagnosis-and-treatment-575682170565.pdf</a></p>																														

Figure 1: Study design flow chart





Effectiveness and Safety of Convex stoma appliance for ostomy patients: A systemic review

Ting-Kuang Wang, RN<sup>1</sup>, Kee-Hsin Chen, RN, PhD<sup>2</sup>, Chien-hsin Chen, MD<sup>2</sup>

Nurse practitioner, Division of Colorectal surgery, Department of Nursing, Wan Fang Hospital, Taiwan, Taipei Medical University, Taiwan<sup>1</sup>; Assistant Professor, Post-Baccalaureate Program in Nursing, College of Nursing, Taipei Medical University, Taiwan, Chief Executive Officer, Cochrane Taiwan, Taiwan, Adjunct Deputy Director, Department of Nursing, Wan Fang Hospital, Taiwan, Director, Evidence-based Knowledge Translation Center, Wan Fang Hospital, Taiwan<sup>2</sup>; Division of Colorectal Surgery, Wan Fang Hospital, Taiwan, Taipei Medical University, Taiwan<sup>2</sup>

**Background :**

Among these ostomy patients, experiencing leakage and lead to peristomal skin irritation (Fig 1) are common complications. It is also a serious burden on the quality of life. A convex stoma appliance, has been widely used to clinical practice to reduce the risk of leakage. However, the effects of this device in clinical setting are still controversial. The purpose of this study was to evaluate the effectiveness and safety of convex stoma appliance in leakage, security as well as side effects.



(Fig 1) Peristomal skin irritation

**Methods :**

An electronic search of Cochrane, PubMed, EMBASE, CINAHL, and Airtiti Library up to April, 2019 was performed to identify randomized clinical trials that compare convex or flat stoma appliance among adult population in leakage, security and



# 2019 Cochrane Colloquium

## 4 poster submission, 7 participants

Time: 2019/10/22-10/25



**With Cochrane Croatia , Poland Group meeting**



# G-I-N & JBI 2019

- Time: 2019/10/30-11/02
- Adelaide Convention Centre, North Terrace, Adelaide South Australia
- 400 participants



# 【Recruitment】 Volunteer translators



**Cochrane Taiwan**  
Trusted evidence.  
Informed decisions.  
Better health.

**讓全世界看到你!**  
~招募~  
考科藍摘要翻譯志工

Cochrane Taiwan volunteer translators : 78

- ◎增加考科藍繁體中文資料的數量及品質，拓展台灣能見度！
- ◎翻譯文稿將呈現譯者大名以表彰貢獻，讓全世界看到你！



資訊 報名

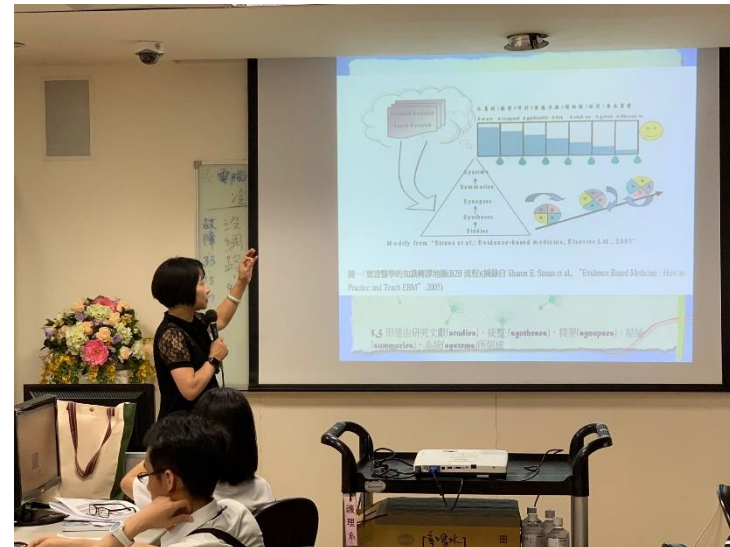
聯絡人：曾小姐  
cochranetaiwan@tmu.edu.tw  
02-27361661#3633





# Advanced EBM workshop (SR/GRADE)

- Time: 2019/07/10
- Open to the public
- 37 Participant
- Satisfaction: 4.92(mean)



# Evidence Based Medical Seminar- Shared Decision Making

- Time: 2019/08/08
- Open to the public
- 33 Participant
- Satisfaction: 4.98(mean)






## Shared Decision Making (SDM)

### 「以病人為中心的 實證健康照護與共同決策」

SDM是實證健康照護的徹底實踐與終極目標，共同決策必須以“病人”為中心，了解病人的照護需求同理心地與病人溝通，讓病人可以明智地選擇照護模式，共創更好的醫療品質。



- ▶ 活動日期 2019年8月8日(四) 12:10~13:10
- ▶ 活動地點 北醫醫學綜合大樓前棟3樓 第一會議室
- ▶ 報名網頁 <http://t.cn/AiWYAoFf>
- ▶ 主辦單位 臺北醫學大學考科藍臺灣研究中心、考科藍系統性文獻回顧教學研究社群
- ▶ 指導單位 衛生福利部



本次活動為**免費參加**，並提供午餐以及認列本校教職員教育訓練時數

時間	主題	講者
12:10 ~ 12:15	長官致詞	
12:15 ~ 13:05	醫病溝通：SDM	侯文萱 教授
13:05 ~ 13:10	綜合討論	侯文萱 教授

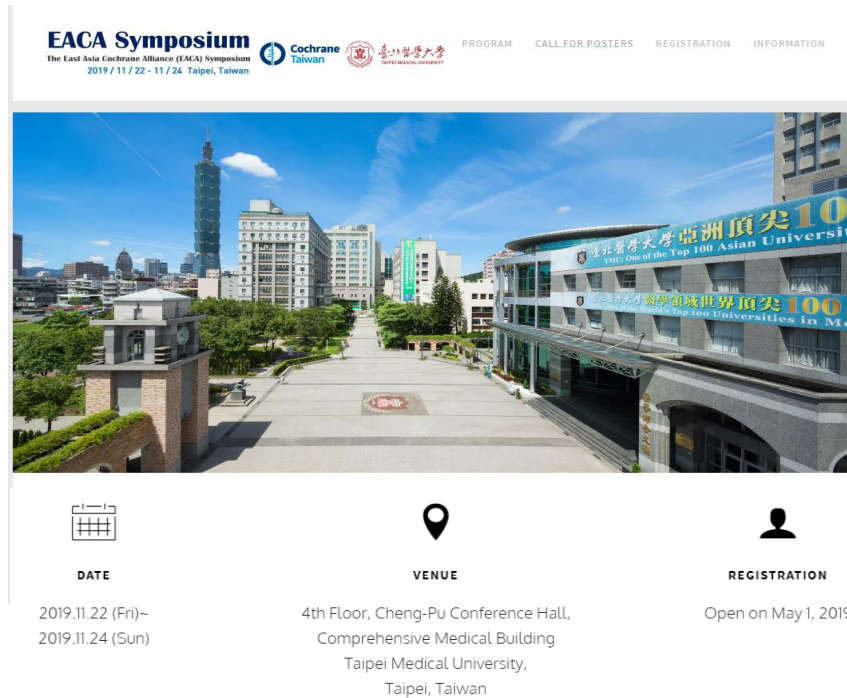
諮詢窗口：楊哲維 先生 02-2736-1661 轉7335

臺北醫學大學考科藍臺灣研究中心  
考科藍系統性文獻回顧教學研究社群 敬邀



# Future Events

1. [2019/11/22-24 EACA Advanced EBM workshop](http://www.2019eaca.com)  
<http://www.2019eaca.com>



**EACA Symposium**  
The East Asia Cochrane Alliance (EACA) Symposium  
2019/11/22 - 11/24 Taipei, Taiwan

PROGRAM CALL FOR POSTERS REGISTRATION INFORMATION

**DATE**  
2019.11.22 (Fri)~  
2019.11.24 (Sun)

**VENUE**  
4th Floor, Cheng-Pu Conference Hall,  
Comprehensive Medical Building  
Taipei Medical University,  
Taipei, Taiwan

**REGISTRATION**  
Open on May 1, 2019

November 22, 2019

Frontiers of Systematic Reviewing – latest updates to Cochrane Review methodology

November 23-24, 2019

Network Meta-analyses (NMA) Workshop



2019/11/22~11/24

## EACA SYMPOSIUM

on EBHC & Systematic Review

The East Asia Cochrane Alliance (EACA) Symposium  
on Evidence-based Healthcare & Systematic Review Workshop

11/22 *Frontiers of Systematic Review*  
11/23~11/24 *Network Meta-analysis Workshop*  
\*Poster sessions

**Poster submission**  
2019/05/01~07/31

**Date**  
2019/11/22~11/24

**Venue**  
4<sup>th</sup> floor, Cheng-Pu Conference Hall,  
Comprehensive Medical Building  
Taipei Medical University,  
Taipei, Taiwan

Trusted evidence.  
Informed decisions.  
Better health.

Tel: +886-2-2731-1661\*7212  
Email: [cochranetaiwan@tmu.edu.tw](mailto:cochranetaiwan@tmu.edu.tw)  
Website: [www.2019eaca.com](http://www.2019eaca.com)



# 2020 Future Events

Date	conference
2020/01/08	Choosing Wisely Conference
2020/02/26	A New Vision of Evidence-Based Medicine Conference
2020/3	The Reform of writing and teaching workshop
2020/4	Appraisal tool (RoB 2.0, ROBINS-I) workshop
2020/5	How to search for systematic review workshop
2020/6	Advanced EBM workshop (Systematic Review/ GRADE)
2020/06/09-06/13	Shared Decision Making (Prof. Glyn Elwyn)

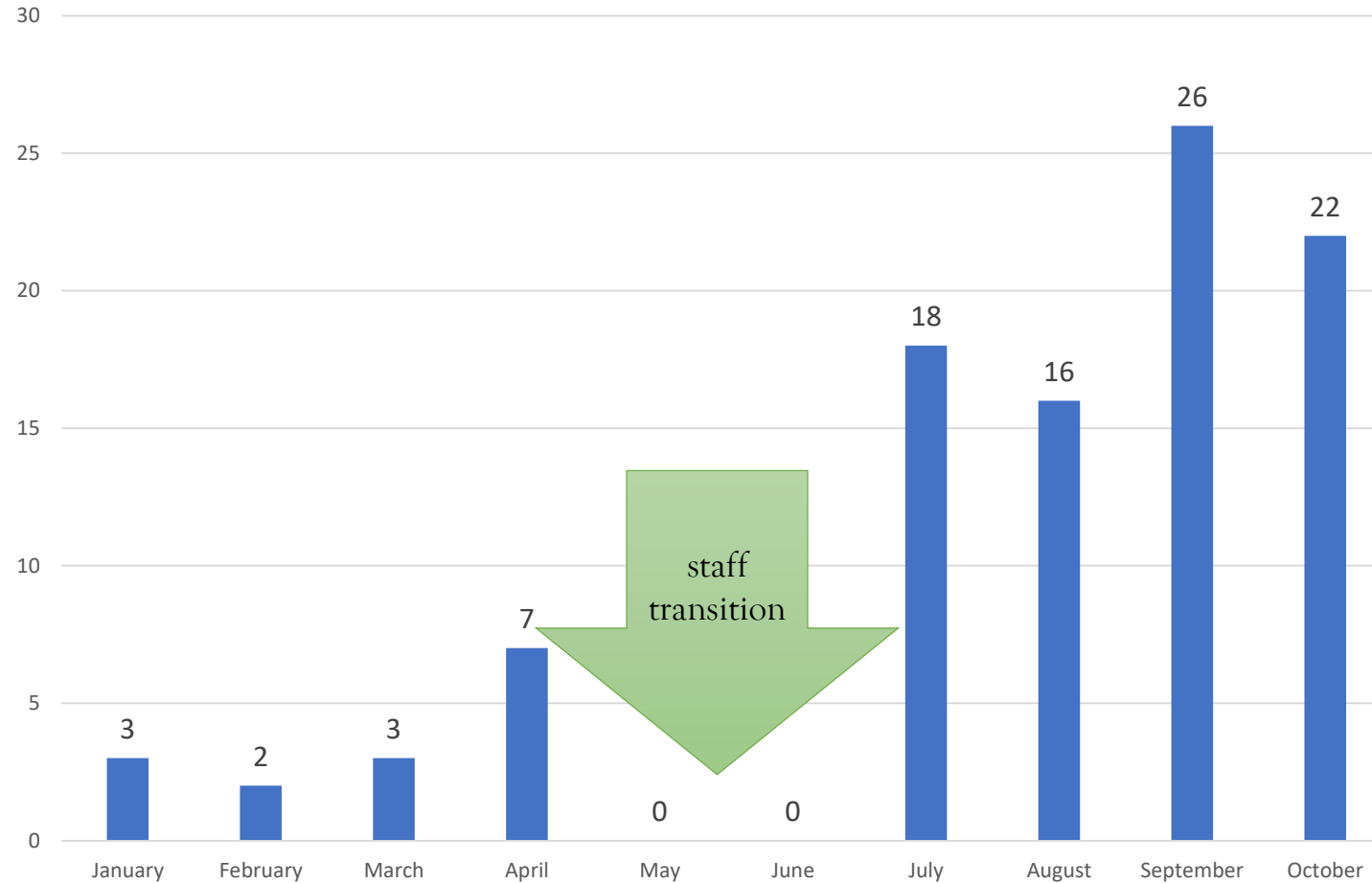
International Meetings	
2020/09/29-10/02	G-IN (Toronto)
2020/10/04-10/07	Cochrane Colloquium (Toronto)
2020/10/31-11/3	JBI (Shanghai)
2020/11/19-11/20	ICCH 2020 (Paris)





# 2019 Translation activity

- CDSR PLS translations produced and disseminated : 9.7/month(mean)

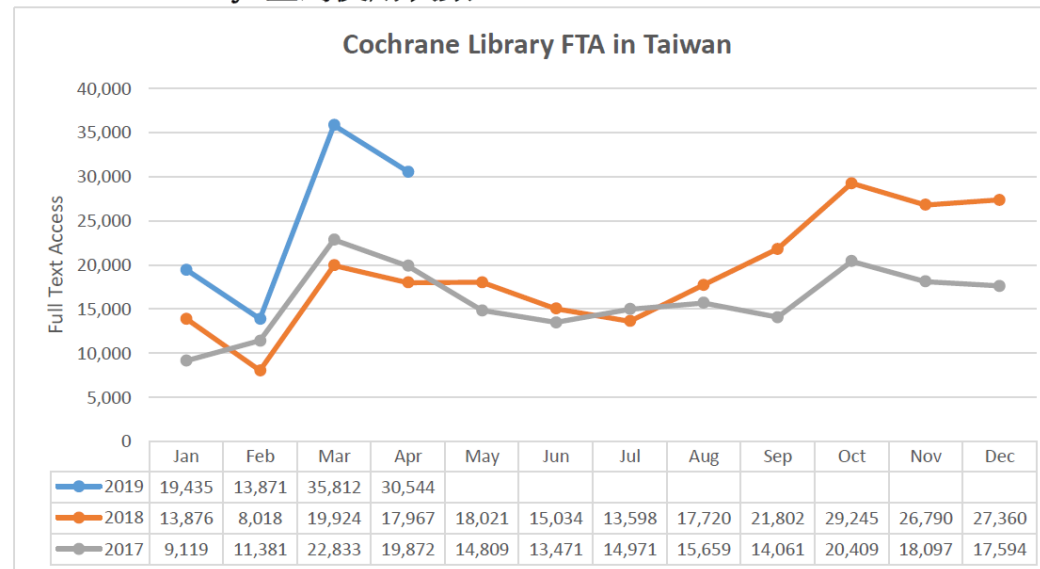


# Cochrane Library Usage Report

Rank	Country	Jan-Aug 2018	Jan-Aug 2019	Change
1	Spain*	90,099	530,217	+488.5%
2	Brazil*	186,992	426,231	+127.9%
3	Taiwan	109,075	215,909	+97.9%
4	Germany	120,603	198,309	+64.4%
5	India	233,596	382,239	+63.6%
6	Canada*	213,032	344,907	+61.9%
7	China	149,900	231,354	+54.3%
8	United Kingdom*	971,672	1,473,803	+51.7%
9	Australia*	580,263	875,882	+50.9%
10	United States	1,285,319	1,719,048	+33.7%

\*Regions with funded provision

Cochrane Library 臺灣使用次數



# 2019 Media dissemination

- Local social media dissemination : 2019/07/01 ~ 2019/10/31

110 Post、2, 971 Click、54,072 Review、4,035 Like & Comment



**考科藍臺灣 - Cochrane Taiwan**  
 由 cebm.tmu@gmail.com 發佈 · 9月4日 ·  
 【好康活動】  
 只要拍攝120秒內短片，就有機會獲得PS4、GARMIN智慧手錶、FUJIFILM拍立得相機等好禮！  
 活動連結：https://reurl.cc/M77xpp...更多

**考科藍臺灣 - Cochrane Taiwan**  
 由 cebm.tmu@gmail.com 發佈 · 10月10日 ·  
 【考科藍文獻翻譯】  
 標題：長期使用...更多

**考科藍臺灣 - Cochrane Taiwan**  
 由 cebm.tmu@gmail.com 發佈 · 10月10日 ·  
 【考科藍文獻翻譯】  
 標題：長期使用...更多

**東亞考科藍聯盟(EACA) 實證健康照護暨系統性文獻回顧**  
 THE East Asia Cochrane Alliance (EACA)  
 2019/11/22-11/24 Taipei, Taiwan

**杜裕康(YU-KANG TU)**  
 英國里茲大學統計流行病學博士，現職衛生學院流行病學與預防醫學研究所。杜老師擁有豐富的統合分析教學經驗，析和網絡統合分析於國際期刊，同職於 Clinical Periodontology 和 Journal of Dental Research 編輯委員。  
 註冊日期：即日起至10/31  
 聯絡窗口：(02)2736-1661 ext.3633 曾小姐

**考科藍臺灣 - Cochrane Taiwan**  
 由 cebm.tmu@gmail.com 發佈 · 9月4日 ·  
 【得獎作品分享】銅獎-千呼萬喚始出來，第三名出爐了~欣賞完影片後繼續期待前兩名囉！- 作品名稱：《家庭幸福與證計畫》- 作者：臺北醫學大學 學生 張文儀 (著作權屬投稿作者) #考科藍臺灣

**考科藍臺灣 - Cochrane Taiwan**  
 由 cebm.tmu@gmail.com 發佈 · 9月4日 ·  
 【得獎作品分享】銅獎-千呼萬喚始出來，第三名出爐了~欣賞完影片後繼續期待前兩名囉！- 作品名稱：《家庭幸福與證計畫》- 作者：臺北醫學大學 學生 張文儀 (著作權屬投稿作者) #考科藍臺灣

# Summary

- ◆ Language translation is an essential element in knowledge translation.
- ◆ Multimedia is the future of the presentation of knowledge translation.

Thanks for your attention.