COVID-19 Rapid Reviews: Cochrane’s response so far

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What is your main role?
Why now?

- The world is facing a large-scale public health crisis
- Large gaps in knowledge but health experts and clinicians have to make decisions on a daily basis
- Rapid proliferation of research creates an urgent need for evidence syntheses
- Cochrane is well placed to respond due to its international collaborative groups, reputation, and ability to update quickly
- Groups and Fields were receiving a large number of requests – had to act quickly to coordinate efforts and prevent duplication
- Huge number of offers from Cochrane Groups and author teams to donate their time – needed central coordination
11/12 Feb
WHO Forum to define research priorities

21 Feb
Discussions begin between Cochrane and the WHO

17 Mar
EMD starts to collect priority questions from stakeholders

8 Apr
First rapid review published

26 Mar
COVID Rapid Reviews site launched – work begins on first priority reviews

21 Apr
Second rapid review published

31 Dec – 31 Jan
Cluster of cases in Wuhan spread to a variety of countries

30 Jan
Public Health Emergency of International Concern declared

11 Mar
WHO declares pandemic. Widespread lockdowns begin.
What are we trying to achieve?

Provide rapid, high-quality evidence syntheses to inform the important decisions being made by clinicians, policy makers, and the public during the coronavirus pandemic.

And how:

1. Coordinate efforts within Cochrane and with our partners to prevent duplication of effort
2. Compile a list of priority questions to show what work is underway and direct resources wisely
3. Provide clear methods guidance and offer fast-track editorial support for the highest priority questions
Evolution of the question bank

- Originally sought questions from stakeholders and partners including the WHO, UK NIHR and the Brazilian Ministry of Health
  - Early prioritization allowed work to begin on the most urgent reviews
- Further questions submitted by Cochrane Groups, researchers, consumers and frontline staff
- Quickly grew from 10...to 60...to over 250 in 3 weeks
- Submissions currently closed to allow for time for refinement and prioritization to take place
Prioritization

- We want to focus resources on questions which are most important to stakeholders, particularly healthcare workers and those in low- and middle-income countries.

- …however, we need to make sure the questions:
  - Are formatted in a way that can be answered by rapid reviews
  - Don’t overlap with questions already in the question bank or in progress
  - Aren’t already being undertaken by other organisations

- Currently using a process of working with stakeholders within each ‘topic’ area to identify the key questions.
Production

• Author registers in PROSPERO or Open Science Framework
• Authors complete the Standard Workflow to plan team composition, refine the review question, and plan timelines
• Prespecify methods using the Protocol template to maximise efficiency without compromising on quality
  – Not published in advance but dated and published as an appendix to the full review
  – Designed to meet conduct and reporting standards and highlight RRMG-recommended methods
  – May require adaptation for some questions (e.g. qualitative, diagnostic)
• Review can be written up in the Word template and converted to a RevMan file by the editorial team
Editorial process (1/2)

1. Fast-track for questions identified as high priority
   - Discussion with CRG to refine question and agree capacity
   - On-hand methodological support (MSU and CIS)
   - Parallel processes for quality-assurance, peer review, consumer review, and copy editing
   - Aim to publish in 2-weeks
   - Prioritized for updating as new evidence emerges

2. EMD/CRG collaboration for CRG-identified priorities
   - Led or supported by the CRG
   - EMD provides process and methods guidance
   - CRG-defined timelines in discussion with author team
3. All other questions (not yet refined or prioritized)
   - Marked as ‘In development’ on Question Bank
   - Title not registered and cannot provide central support
   - Can be submitted for consideration if:
     • Prospectively registered (e.g. PROSPERO, Open Science)
     • Prepared in the protocol and full review templates
     • Conducted in accordance with RRMG interim guidance
   - Central team can provide high-level protocol feedback only
   - May be rejected or major revisions requested depending on topic and methodological rigor
   - Editorial decision made upon submission with support of CRG
Published so far

1. **Quarantine alone or in combination with other public health measures to control COVID-19**
   - Submitted 24th March – published 8th April (15 days)

2. **PPE for preventing highly infectious diseases due to exposure to contaminated body fluids in healthcare staff (rapid update)**
   - Submitted 30th March – published 15th April (16 days)

3. **Barriers and facilitators to healthcare workers’ adherence with infection prevention and control (IPC) guidelines for respiratory infectious diseases: a rapid qualitative evidence synthesis**
   - Submitted – published 21st April (11 days)
Examples in the pipeline

1. Hand cleaning with ash versus soap or other materials for interrupting or reducing the spread of viral and bacterial infections: a rapid review
2. Information and communication technology for reducing social isolation in older people
3. Laboratory based molecular tests for diagnosis of SARS-CoV-2 infection
4. Rapid point-of-care tests for diagnosis of SARS-CoV-2 infection
5. Antibody tests for identification of current and past infection with SARS-CoV-2.
Key messages to prospective authors

- The rapid process requires a range of on-hand specialist methodological and content expertise, access to resources, and dedicated time.
- Not all questions on the bank are suitable for development as a rapid review.
  - Need to check for overlap with existing Cochrane reviews, conduct scoping searches to inform suitable study designs and eligibility, and refine the question with content experts.
- Submitting a question does not act as title registration.
- Methods support and the speed of the editorial process will depend on whether the question has been identified as a priority.
Key messages to Cochrane Groups

• Email covidrapidreviews@Cochrane.org if you are receiving proposals relevant to COVID-19 including:
  – whether it is from the Question Bank or a new question
  – the intention to pursue as a standard or rapid review
  – CRG capacity to support the review and/or editorial process

• Each CRG should decide their own balance between usual workload and COVID-19 work. The impact of COVID-19 will be different for each group.

• Let us know if:
  – you have capacity and want to help the central team move reviews forward
  – your usual workload is affected by reduced capacity or staff on the front line
Key message to anyone wanting to get involved

Please be patient

We have received a lot of requests and offers and are working on the best way to coordinate efforts to get the most important reviews done quickly and to a high standard.

- Individuals or teams not seeking to conduct a priority review can use Cochrane TaskExchange which now has a filter for COVID-19

More details about all the ways to get involved:
https://www.cochrane.org/cochrane-work-rapid-reviews-response-covid-19
Useful websites and resources

- Templates and methods guidance for rapid reviews
- Updates about the wider Cochrane response to COVID-19
- Updates about Rapid Review development
- Overview of COVID-19 resources on the Cochrane Library
- Cochrane Rapid Reviews Methods Group website
- Cochrane COVID-19 Study Register
- Cochrane TaskExchange which now has a filter for COVID-19
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