



Cochrane

Project Transform

Cochrane Classmate

A trainers toolkit

Trusted evidence.
Informed decisions.
Better health.





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Cochrane Crowd

A background image showing a group of people, including a woman in the foreground wearing a name tag that says "HMC", smiling and looking towards the right. The image is overlaid with a semi-transparent purple filter.

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.

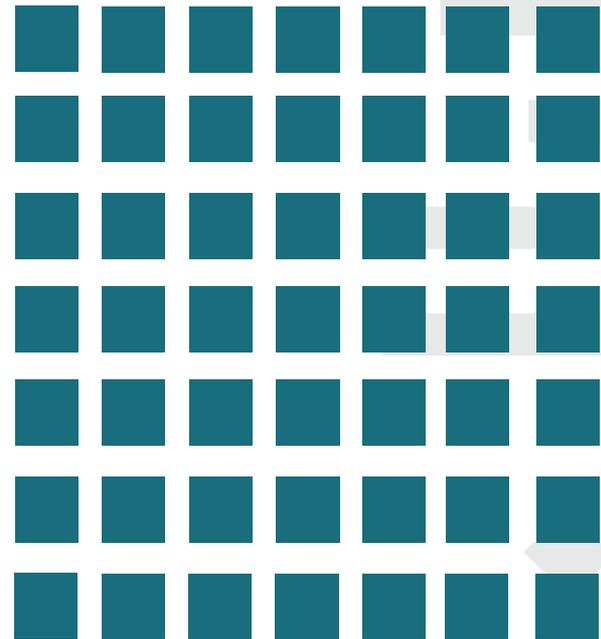
Give it a try

crowd.cochrane.org | [@cochrane_crowd](https://twitter.com/cochrane_crowd)



Project Transform

The micro-task



It's about offering needed and doable micro-tasks aimed at identifying and describing the evidence we need to produce our reviews

The microtask: is it an RCT?

The efficacy of internet-based cognitive behavioral therapy for insomnia. [Chinese]
[609918800]

Objective To evaluate the effectiveness of internet-based cognitive behavioral therapy (ICBT) for the treatment of insomnia by comparison of sleep parameters, degrees of anxiety and depression of the ICBT, with traditional face-to-face cognitive behavioral therapy (CBT) and pharmacotherapy for insomnia. **Methods** Seventy-nine cases meeting proposed DSM-5 criteria for insomnia disorder were **randomly assigned to** ICBT (n=27), CBT (n=26), and pharmacotherapy (n=26) group, and treated accordingly for 8 consecutive weeks. The sleep parameters, the levels of anxiety and depression in the 3 groups were compared and analyzed before, 4 weeks after and the termination of treatment. Results Comparing to that of pre-treatment, the sleep parameters were significantly improved, anxiety and depression levels obviously decreased after treatment for 4 and 8 consecutive weeks, the differences were statistically significant ($P<0.05$). After treatment for 4 consecutive weeks, the sleep latency, total asleep time and wake time after sleep were significantly different ($P<0.05$) when **compared with** pharmacotherapy group with ICBT and CBT groups. After the treatment, the sleep latency, anxiety and depression levels were lower in ICBT and CBT groups than those in pharmacotherapy group, and the difference was statistically significant ($P<0.05$). In addition, no significant difference ($P>0.05$) was found in sleep parameters and anxiety level between ICBT group and CBT group. Conclusion ICBT may display a slower effect on improving speed in falling asleep than the pharmacotherapy does, but the efficacy of ICBT is better than that of pharmacotherapy after



RCT/CCT

Reject

Unsure

[Help me decide](#)

[Add a note](#)

Is it an RCT?



Project Transform

The story so far

2013 - 2016

The
Embase
project

2016 - onwards

Cochrane
Crowd

To identify reports of trials
To provide people with a way to contribute



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Early feedback

“In a country where hardly anyone is taught how to search medical literature, my colleagues at our Foundation, and I work hard at this. I try to learn anything that I can, to not only improve my searching and teaching skills in searching, but also anything about information resources. This exercise will not only help me, but I will slowly rope in more medical students to take this on. I love the fact that there is so much flexibility, H no deadlines, and yet H a "learn at your pace" approach. I also realized that for first timers, H checking records that have been already decided upon, is a great thing H it helps us too!”

Vasumati Sriganesh, February 2014



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Recruitment and Engagement



We have **6000+** contributors from **118** countries



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Progress to date: quantity

Over 1.2 million
classifications

440,000+
citations

33,000+
RCTs



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Cochrane Crowd and learning

“Can I use Cochrane Crowd for my students?”

Throughout the Embase Project and since the launch of Cochrane Crowd we’ve been contacted at fairly regular intervals by people wanting to use the tasks as part of their teaching about health evidence



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How does Crowd support learning?

**My
History**

**My
Statistics**

**Brief
Training**

Cochrane Crowd does already support learning through providing brief training modules for each task and through enabling contributors to see their decisions against final decisions in the History and Statistics tabs



Early experience

- Difficult to manage at a 'group' level
- Quality was tricky to monitor – didn't make enough use of known records
- Not as fun as it could be



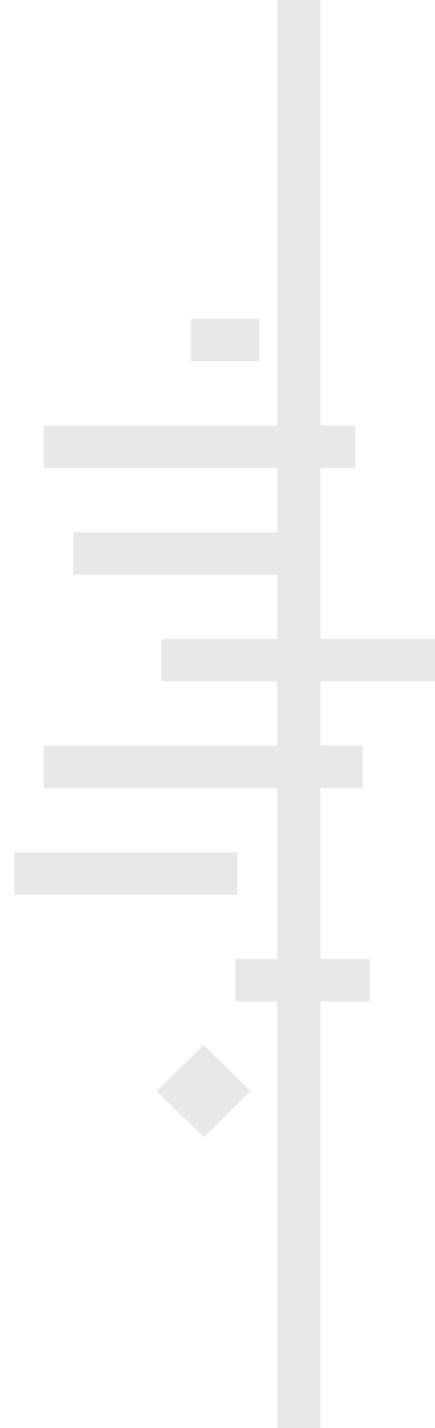


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Cochrane
Crowd

Classmate





Cochrane

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Cochrane Classmate: What is it?

An extension of Cochrane Crowd, that enables trainers, and others, to use the micro-tasks, or the micro-task format, in thier own teaching environments*

* I've used the word trainers throughout but it could be anyone who wants to manage a group doing Classmate activities



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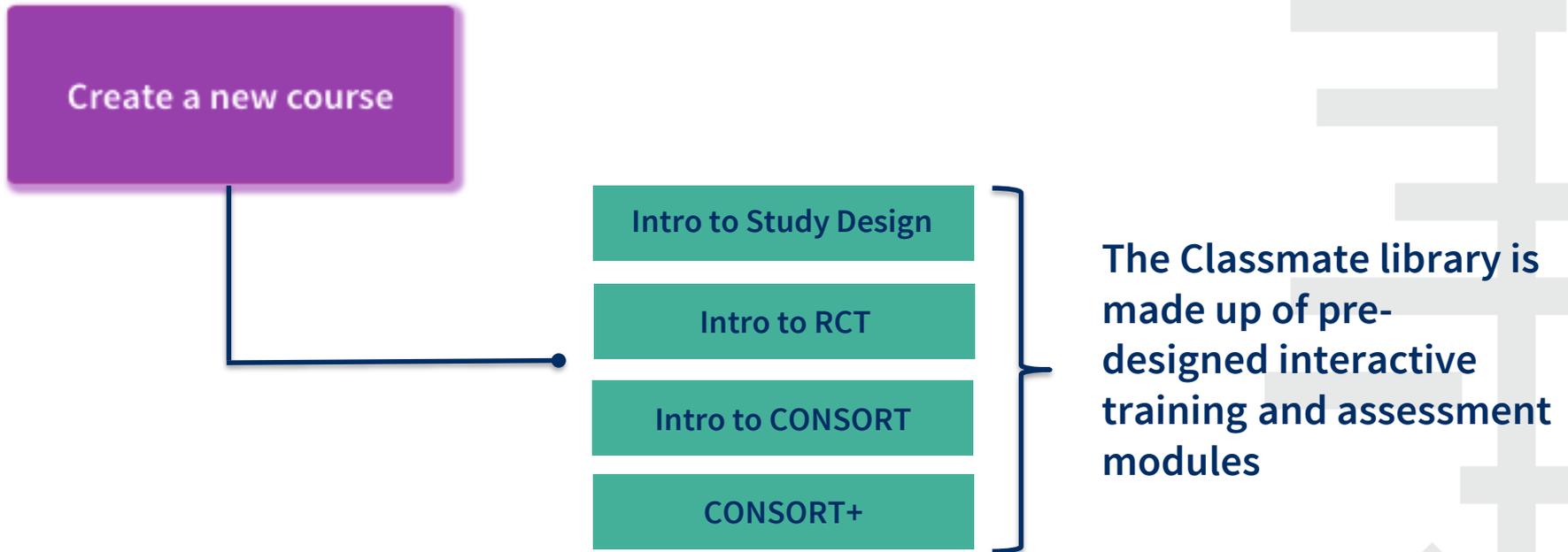
How does it work:



Within Classmate, there are two main types of learning activities a trainer can create: a new course, or a new challenge



How does it work:



Creating a new course refers to choosing a module from the Classmate library



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How does it work?



Each Classmate module is made up of two main sections:
a training section and an assessment section

Both parts are interactive and all the modules are based on citations



How does it work?

Training records: Study design

The effects of long-term medication on growth in children and adolescents with ADHD. [201552]

Background: Children and adolescents with ADHD treated with central stimulants (CS) often have growth deficits, but the implications of such treatment for final height and stature remain unclear. Methods: **Weight and height were assessed multiple times in 410 children and adolescents during long-term treatment with CS, which lasted between 0.9 and 16.1 years.** Weight and height measures were converted to z-scores based on age- and sex-adjusted population tables. Results: CS treatment was associated with (1) a relative reduction in body weight and a temporary halt in growth, (2) a weight and height lag after 72 months compared with relative baseline values. No relation to early start of medication (<6 years), gender, comorbid ODD/CD or emotional disorders was observed. Conclusions: Treatment with central stimulants for ADHD impacts growth in children and adolescents, and growth should be continuously monitored in patients on chronic treatment with these medications. Copyright © 2015 Powell et al.



Have a look at this abstract from a scientific journal. Do you think it is reporting an observational study or an experimental study?

We agree!

This is an observational study. The researchers assessed the weight and height of 410 children who were already being treated with medication. They did not introduce any new interventions or medications.

Observational study

Experimental study

Classmate uses the Crowd interface so those familiar with Crowd, will feel at home with a Classmate module

We have used only titles and abstracts that are in the public domain



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How does it work?

Create a new course

Create a new challenge

Trainers can also create a 'challenge'
A challenge draws on live records from live Cochrane Crowd tasks



How does it work?

Create a new challenge

Crowd tasks

RCT identification

DTA identification

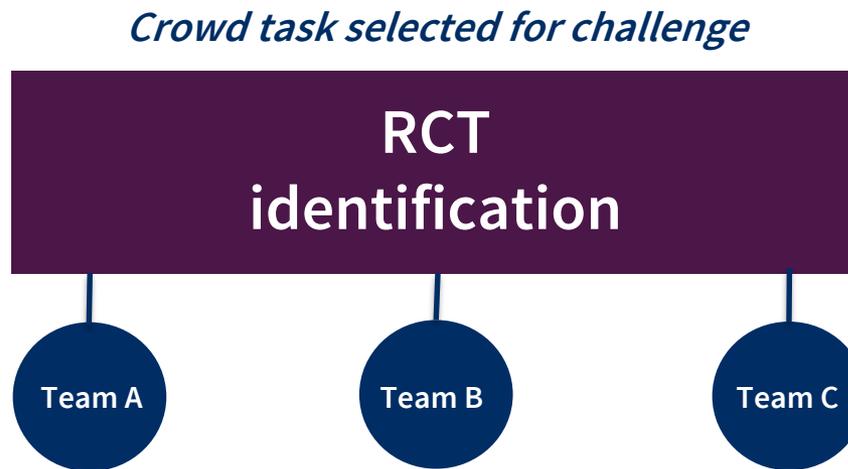
RevScreen

PICO annotation

A challenge can be created for any of the available Crowd tasks



How does it work?



For each challenge, the trainer can set a time limit for the challenge, create teams, send motivational messages to those teams, track progress



Project Transform

Roll-out: challenge mode

July 2017

**Road-tester
group: 20-30
trainers**

August 2017

**Platform
iteration based
on road-tester
feedback**

Sept 2017

**Hard launch of
Classmate
challenge mode**

Starting from next week we'll begin to roll-out of Classmate



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Become a road tester

As road tester, we hope you'll:

- Set up and run a real challenge
- Feedback everything!!



Email classmate@cochrane.org in the next few days