

Annual Report 2014

Cochrane Switzerland



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Foreword

At Cochrane Switzerland, 2014 was a year full of new activities and initiatives. The year started with a new training workshop for systematic review authors in German that we organised jointly with Cochrane Austria and Cochrane Germany and that was hosted at the Epidemiology, Biostatistics and Prevention Institute in Zürich. This collaboration with the other German speaking Cochrane entities will continue, aiming to rotate the location and organisation of this training workshop yearly.

In 2014, we increased our investment in making Cochrane evidence available in German. The website *Cochrane Kompakt* was developed and launched in October, the content of which is being provided by the Cochrane entities in Austria, Germany and Switzerland. One of our ongoing studies on knowledge management illustrates how important summarised access to evidence is for healthcare professionals. Earlier, we already discussed the importance of language to increase use of evidence¹. *Cochrane Kompakt* responds to these identified needs and complements the efforts to provide Cochrane evidence in other European languages, in particular French and Spanish.

We contributed to the development of Cochrane activities in Switzerland by fostering the creation of two new Cochrane entities: the European Satellite of the Cochrane Public Health Group, and the Cochrane Insurance Medicine Field. The Cochrane Public Health Group (CPHG) is one of the 53 Review Groups of Cochrane and constitutes a focal point for researchers and stakeholders with an interest in evidence-based public health interventions. Its European Satellite will aim to promote the development and use of evidence-based methods in public health in Europe, and currently involves four institutions from Germany, Austria, and Switzerland. The Satellite has been formally established in 2015.

The new Cochrane Insurance Medicine Field was established in December 2014 through an initiative led by the Swiss Academy of Insurance Medicine (asim), located at the University of Basel. Cochrane Switzerland supported the establishment of the Field and continues to work closely with its team. This new Field will support the development of evidence-based methods in insurance medicine. A particular target audience are health professionals; policy makers; claimants and their lawyers, who are concerned with medical judgments and medical decisions in an insurance context.

To support all these new developments and guide us into the future we developed a Strategic Plan for the years 2015-2020. The plan outlines our strategic focus and what we aim to have achieved by 2020. We look forward to working with our current and new partners, both at national and international levels, and our dedicated team in acting upon this strategy.

Prof. Bernard Burnand & Dr. Erik von Elm

¹ Von Elm E, Ravaud P, MacLehose H, et al. Translating Cochrane reviews to ensure that healthcare decision-making is informed by high-quality research evidence. *PLOS Medicine*, September 2013, Volume 10, Issue 9

Cochrane Switzerland in 2014 – Achievements and key activities

The activities of Cochrane Switzerland are described along the axes of the four main objectives of Cochrane's strategy to 2020: producing evidence, making evidence available, advocating for evidence and developing the organisation. We align ourselves to this strategy while adjusting it to best fit our needs.

1.1. Producing evidence

By the end of 2014, 190 systematic reviews published by Cochrane had involved an author based in Switzerland. We aim to expand this pool of authors by providing training workshops at basic level, thus increasing awareness and interest in carrying out systematic reviews. We also provide more advanced level training workshops to strengthen methodological and statistical capacity of current and new authors.

In 2014, we organised courses and workshops in various formats:

➤ An introductory course for Cochrane authors

This workshop was organised jointly with Cochrane Austria and Cochrane Germany and took place in Zürich in January 2014. In the three-day course, participants learned the basic concepts for conducting a Cochrane Systematic Review. The course addressed: the definition of a research question, development of the protocol, systematic literature research, selection of studies, evaluation of bias, data extraction, analysis and interpretation. It also introduced participants to Cochrane's Review Manager software (RevMan). Twenty-eight people participated in the course. Participants came from research institutions or hospital departments in Germany, Switzerland, Austria and Romania.

➤ An introductory course to systematic literature searching

This one day workshop was held in September 2014 in Lausanne, and attended by 18 participants. Most of them were professionals based at institutions linked to the university hospitals of Geneva and Lausanne. The course introduced the participants to the concepts of a systematic literature review following the Cochrane methodology. It consisted of a theoretic part as well as a more hands-on/practical part, during which participants were encouraged to develop their own literature search strategy with the support of librarians who were available throughout the day.

➤ Introductory course for using and understanding systematic reviews.

This course took place in October 2014, in Bern, and was facilitated jointly with two colleagues from Cochrane Germany. The course was organised at the Bern University of Applied Sciences together with FH Schweiz, the umbrella organisation of alumni of the Swiss Universities of

Applied Sciences. The 30 participants included health professionals in the areas of midwifery, nursing, occupational therapy and physiotherapy. The course familiarised participants with concepts of evidence-based healthcare and Cochrane Systematic Reviews, and encouraged, through work in small groups, a critical review of intervention studies and systematic reviews. The facilitators also drew the attention of participants to the use of the Cochrane Library in daily professional practice.

Team members were also active in trainings delivered by other Cochrane entities and partners in evidence-based healthcare or public health. In 2014, this included contributions to:

- A two-day workshop on Systematic Literature Reviews of the European DEDIPAC (Determinants of Diets and Physical Activity) network that was jointly organised by Cochrane Austria, Germany and Switzerland and held in February 2014 in Potsdam, Germany.
- A Certificate of Advanced Studies course on Clinical Research methods.
- During an introductory course on research for 5th year medical students (University of Lausanne), we provided an introduction to approaches for evidence-based healthcare and to Cochrane.

In 2014, we started three new systematic review projects:

- We responded to a request by SUVA, the national public occupational accident insurer, to conduct a systematic review on occupational risk and protective factors of developing epicondylitis, a frequent tendinopathy of the elbow. Our team was commissioned to conduct this aetiological review following Cochrane methodology where possible. It will aim to inform decisions on whether epicondylitis should be regarded as an occupational disease in Switzerland. We expect the results of this review by end 2015.
- The second new project is a synthesis of qualitative evidence on mothers' experiences with and perceptions of breastfeeding support. This Cochrane review with the Consumer and Communication Review Group is being led by our former collaborator Theresa Bengough, now based in Vienna, Austria. It is part of her PhD thesis work at the University of Leuven, Belgium and will complement an existing Cochrane intervention review on support for breastfeeding mothers.
- A third project focuses on optimising prevention strategies for sudden cardiac death in heart failure patients. Through a systematic overview and simulation study, we aim to evaluate the public health impact of various available treatment strategies. This is expected to lead to an estimate of the relative effectiveness of the different cardiovascular prevention drugs and other interventions currently in use.

1.2. Making evidence available

Switzerland is a multi-lingual country. Consequently, we provide access to information about Cochrane in French, German and Italian through our website, also by linking it to those of the French, German and Italian Cochrane Centres and cochrane.org, where appropriate. Many health professionals are able to access and understand the evidence provided through Cochrane and the

Cochrane Library in English. But for other target groups such as patient and consumer groups, the media, policy- and decision-makers the preferred language is French, German or Italian. Consequently, it is important to provide access to information in one of the national languages. We have developed partnerships with three national medical education journals in Switzerland and one in France to respond to this need:

Revue Médicale Suisse

Since 2009, we regularly produce summaries in French for this weekly medical education journal, which is published by “Editions Médecine & Hygiène” (Geneva). In 2014, five summaries were published in French.

PRAXIS

PRAXIS is a bi-monthly medical education journal for health professionals in German speaking Switzerland and published by the Hans Huber Verlag (Berne). In a special series called „Mini-Review Cochrane für die Praxis” we address a clinical case scenario using information from Cochrane Reviews. In 2014, three such articles were published in PRAXIS.

Tribuna Medica Ticinese

This monthly journal publishes summaries of Cochrane Reviews for the family health practitioner, targeting health professionals in the Italian speaking part of Switzerland. In 2014, three summaries were published in Tribuna Medica Ticinese.

Médecine & enfance

In 2014, two summary articles were published in French in Médecine & Enfance, a journal published by Edimark Santé (France) ten times a year, focusing on topics in the area of paediatrics.

See Annex 1 for a full list of publications in these four journals.

In line with Cochrane’s *Strategy to 2020* to make systematic reviews accessible in other languages, we initiated *Cochrane Kompakt*, the German-language platform providing access to plain language summaries of Cochrane Reviews (<http://www.cochrane.org/de/kompakt>). In collaboration with Cochrane Germany and Cochrane Austria we translated and adapted the content needed for navigating the website, provided a first set of summaries and launched the platform in October 2014. To further expand this resource in 2015, we obtained additional financial support from the Swiss Academy of Medical Sciences.

1.3. Advocating for evidence

We promote the use of best evidence from health research and the use of Cochrane Reviews specifically, through public presentations at conferences and meetings, as well as by being spokespersons for health related issues and themes for national media.

In 2014, we contributed to the Swiss Public Health Conference, which took place in August in Olten. As in preceding years, we organised a workshop that looked at the contribution of Cochrane Reviews on a topic related to the theme of the conference. For 2014, this theme was public mental health. We used the example of prevention of depression and suicide to illustrate how systematic reviews can help decision-makers and public health professionals prioritise

prevention strategies. We also touched upon the potential barriers when using research evidence in applied public health. The workshop included a talk summarising two topical systematic reviews followed by the perspective of two health professionals active in depression and suicide prevention, and a discussion with the participants.

In November, we were invited to present at a conference organised by the Swiss Association of Science Journalism in Thun. The theme of the meeting was 'Choosing wisely – recipe for more effective medicine or alibi exercise?', and was attended by around 60 science journalists. We contributed to the question from a Cochrane perspective, and reflected on how generated evidence could find its use in practice. Findings from recent research into knowledge translation and uptake of knowledge by medical professionals was shared and debated. The talk resulted in radio and national newspapers pieces on why patients are not always receiving evidence-based care.

Further, our team members were invited to present and participate in the following events, thus further advocating for the use of evidence and highlighting the work of Cochrane Switzerland:

- workshop on Open Access to Data from Clinical Research on Essential Medicines at the European Conference of Universities Allied for Essential Medicines (UAEM) held in Basel in April 2014;
- course module "Evidence-based Medicine" of the post-graduate Master of Advanced Studies "Insurance Medicine" in Basel in May 2014;
- session on peer review at the conference of the European Society of Anaesthesia in Stockholm, Sweden in June 2014;
- workshop on the Cochrane Library at the Swiss Academic Librarians Day (Bibliothekentag) organised by the Swiss Academy of Medical Sciences in Bern in September 2014;
- the 22nd Cochrane Colloquium in Hyderabad, India in September 2014;
- lunch-time seminar of the MRC Clinical Trial Unit at UCL London, UK in November 2014;
- workshop for the ethics committee of Canton Vaud (Switzerland) focusing on RCTs;
- a lunch seminar organised by FH Schweiz, the umbrella organisation of alumni of the Swiss universities of applied sciences in Lausanne in December 2014.

1.4. Developing Cochrane Switzerland

In 2013, Cochrane organised a consultative process among its global network of contributors, to review and revisit its strategic directions. This resulted in the elaboration of the *Strategy to 2020*². Building on this strategy, we developed our own Strategic Plan 2015-2020³.

We defined four goals and nine objectives that will guide our work over the coming years (see box below). Of note, the sequence of the goals does not represent a hierarchy of importance, but

² The Cochrane Collaboration. *Strategy to 2020*. September 2013. Available from:

http://www.cochrane.org/sites/default/files/uploads/Cochrane_Strategy%20to%202020_Final%20public%20access%20version_corrected.pdf

³ Cochrane Switzerland. Strategic Plan 2015-2012. Available from:

<http://swiss.cochrane.org/sites/swiss.cochrane.org/files/uploads/pdf/Strategic%20plan%202015-2020.pdf>

rather follows the same order as the goals in the *Strategy to 2020*. We assign high priority to Goal 2. We will regularly revisit our Strategic Plan to facilitate response to new opportunities or challenges.

Cochrane Switzerland's goals and objectives for 2015-2020

Goal 1: Provide training in systematic reviews, and contribute to Cochrane Reviews and development of review methodology.

Objective 1.1.: Train researchers, health professionals and other interested groups, in the principles and methodology of systematic reviews. We aim to capacitate and motivate people to contribute to reviews in their discipline and thus increase the number of contributors residing in Switzerland.

Objective 1.2.: Carry out systematic reviews on Swiss priority health concerns. Our team is already involved in conducting systematic reviews. Targeting these reviews to Swiss health priorities will facilitate awareness-raising for evidence-informed decision making.

Objective 1.3.: Contribute to the further development of Cochrane methodologies, especially in the areas of public health and in the organisation and delivery of effective health care practices. Cochrane Switzerland aims to continue its active involvement in the European Satellite of the Cochrane Public Health Group and in the Cochrane Effective Practice and Organisation of Care Group (EPOC).

Goal 2: Increase the use of evidence in health care by making it accessible to key actors of the Swiss health system.

Objective 2.1. Make Cochrane evidence accessible in the three national languages of Switzerland (French, German, Italian). Until recently, most of the Cochrane evidence was available in English only. For consumer and patient groups, the general public, but also for many health practitioners, the language represents a barrier to access and use of scientific evidence. Cochrane, in its *Strategy to 2020*, acknowledges the urgency to address language needs and identifies a number of targets to increase access through multi-lingual content. Cochrane Switzerland will build on these activities and implement additional activities where needed to address the language needs of Swiss stakeholders.

Objective 2.2. Respond to user needs and align communication formats and channels to these needs. This objective complements objective 2.1, but emphasises increasing access by using various communication approaches.

Objective 2.3. Liaise with media to raise awareness of the available evidence and resources. Media in Switzerland (as well as elsewhere) report almost daily on new diagnostic tests or treatments. It is often not clear what evidence is used in these reports and how trustworthy this evidence is. With this objective, we aim to increase the use of evidence by the media in their reporting on health issues.

Goal 3: Advocate for evidence and make Cochrane's work known in Switzerland.

Objective 3.1. Advocate for evidence-informed health decision making and for Cochrane and its resources as the 'home of evidence'. We acknowledge that decision making is influenced by many factors at national and cantonal levels, but focus our approach on how evidence can be accessed and used so that it can start playing a larger role in decision making.

Goal 4: Build an effective and sustainable structure for Cochrane Switzerland to carry out its work.

Objective 4.1. Develop Cochrane Switzerland into a sustainable structure serving the needs of patients and health professionals in Switzerland. This objective focuses on developing a process and structure that facilitates the participation of stakeholders in the work of Cochrane Switzerland.

Objective 4.2. Actively contribute to the international activities of Cochrane, especially through the various Cochrane Review Groups and the Cochrane Fields.

Within the broader Cochrane Collaboration, our team contributed actively to the establishment of the European Satellite of the Cochrane Public Health Group and the establishment of the Cochrane Insurance Medicine Field.

European Satellite of the Cochrane Public Health Group

The Cochrane Public Health Group (CPHG) is one of the 53 Cochrane Review Groups and constitutes a focal point for researchers and stakeholders with an interest in evidence-based public health interventions. It is based at The McCaughey Centre, VicHealth Centre for the Promotion of Mental Health and Community Wellbeing, School of Population Health, University of Melbourne, Australia. Recently, CPHG has expressed an interest in establishing a stronger basis in other regions of the world, including Europe.

Over the past years, several initiatives have emerged in European countries, including Germany, Austria and Switzerland, with the common goal to promote the development and use of evidence-based methods in public health. The public health professionals and researchers active in these initiatives have responded to CPHG's call to extend its geographical representation by proposing to establish a European satellite. In March 2014, an exploratory meeting took place in Halle, Germany, where representatives of institutions based in Germany, Austria, Switzerland and the UK as well as potential stakeholders met to assess the needs and potential roles for a European CPHG satellite. Following these discussions and several rounds of consultation, the collaborating academic institutions and the CPHG base of Melbourne decided to move ahead with the formal application to register a European CPHG satellite with the Cochrane Collaboration.

The European satellite has the following terms of reference:

- to support CPHG authors in Europe and to encourage potential review authors to engage in a CPHG review;
- to undertake methodological peer-review of CPHG reviews conducted in Europe and beyond;
- to engage with national and Europe-based public health institutions, in particular WHO and the European Centre for Disease Prevention and Control (ECDC);
- to disseminate up-to-date public health evidence in appropriate formats;
- to contribute to a formal prioritisation process for the CPHG.

Cochrane Switzerland is one of the participating institutions on this initiative. The European Satellite was formally established in March 2015.

Cochrane Insurance Medicine Field

In December 2014, Cochrane approved the establishment of a new Field in Insurance Medicine. This new Field will support the development of evidence-based methods in insurance medicine and work with stakeholders such as medical experts; researchers; policymakers; claimants and their lawyers concerned with medical judgments and medical decisions in an insurance context. The initiative is led by Prof. Regina Kunz, director of the Swiss Academy of Insurance Medicine, University of Basel, and supported by colleagues in The Netherlands, Sweden and Canada. We provided expert advice for the development of the Field and help promoting it within our network

Our team also continued contributing to the following Cochrane Review Groups as authors, editors or referees:

- Tobacco Addiction Group;
- Drugs and Alcohol Group;

- Effective Practice and Organisation of Care Group;
- Injuries Group;
- Methodology Review Group;
- Occupational Safety and Health Group;
- Upper Gastrointestinal and Pancreatic Diseases Group;
- Consumers and Communication Group;
- Oral Health Group.

As members we were involved in the:

- Prognosis Methods Group;
- Trainers' Network.

2. Partners and partnerships

Cochrane Switzerland is hosted by the Institute for social and preventive medicine (IUMSP) at the Lausanne University Hospital (CHUV and UNIL). It is through this set up that Cochrane Switzerland has a sustainable human resource base as well as infrastructure.

External partnerships are crucial for us to achieve our goals. Team members are active in a range of networks, advisory bodies, and professional associations, which facilitates the development of these partnerships. This includes membership and involvement in:

- Advisory Committee for the 23rd Cochrane Colloquium, 3-7 October 2015, Vienna, Austria;
- Coordination pour l'Evaluation des Pratiques Professionnelles en Santé en Rhône-Alpes;
- Collaborative Group of the Appraisal of Guidelines, Research, and Evaluation in Europe (AGREE-Trust);
- Commission fédérale des prestations générales et des principes, Federal Office of Public Health;
- Enhancing the QUALity and Transparency Of health Research (EQUATOR Network);
- Federal Quality Strategy for the Swiss Health Care System, Federal Office for Public Health;
- German Network for Evidence-based Medicine (DNEbM);
- Grading of Recommendations Assessment, Development and Evaluation (GRADE) Working Group;
- Guidelines International Network (G-I-N);
- International Epidemiological Association;
- International Methodology Consortium on Coded Health Information (IMECCHI);
- International Society for Quality in Healthcare (ISQUA);
- Public Health Switzerland;
- Réseau d'Epidémiologie Clinique International Francophone, Lyon (RECIF);
- STrengthening the Reporting of OBservational studies in Epidemiology (STROBE) Initiative;
- Swiss Health Technology Assessment Network;
- Topic Advisory Group 'Quality and Safety', WHO;
- Working group 'Versorgungsforschung in der Schweiz', Swiss Academy of Medical Sciences.

3. Our team

In 2014, our team consisted of eight people based in Lausanne. Two additional team members are based in Bellinzona and volunteer time for Cochrane Switzerland. The team members are listed in alphabetical order.



Muaamar Al-Gobari, MSc, MPH
PhD student (from September 2014)



Prof. Isabelle Peytremann Bridevaux, MD, MPH, DSc
Researcher



Chantal Ardit, MSc, MA
Researcher



Nadine Pfeifer, MSc
Researcher (from September 2014)



Lucienne Boujon
Secretary



Myriam Rège Walther, MSc, MSc
Co-director Cochrane Switzerland (until May 2014)



Prof. Bernard Burnand, MD, MPH
Director Cochrane Switzerland



Patrick Taffé, MSc, PhD
Statisticien



Erik von Elm, MD, MSc
Co-director Cochrane Switzerland



Fabrizio Barazzoni, MD, MPH
(based in Bellinzona)
Contributor



Aline Flatz, MD, MPH
Researcher



Stefania Pelli, MBA (based in Bellinzona)
Contributor

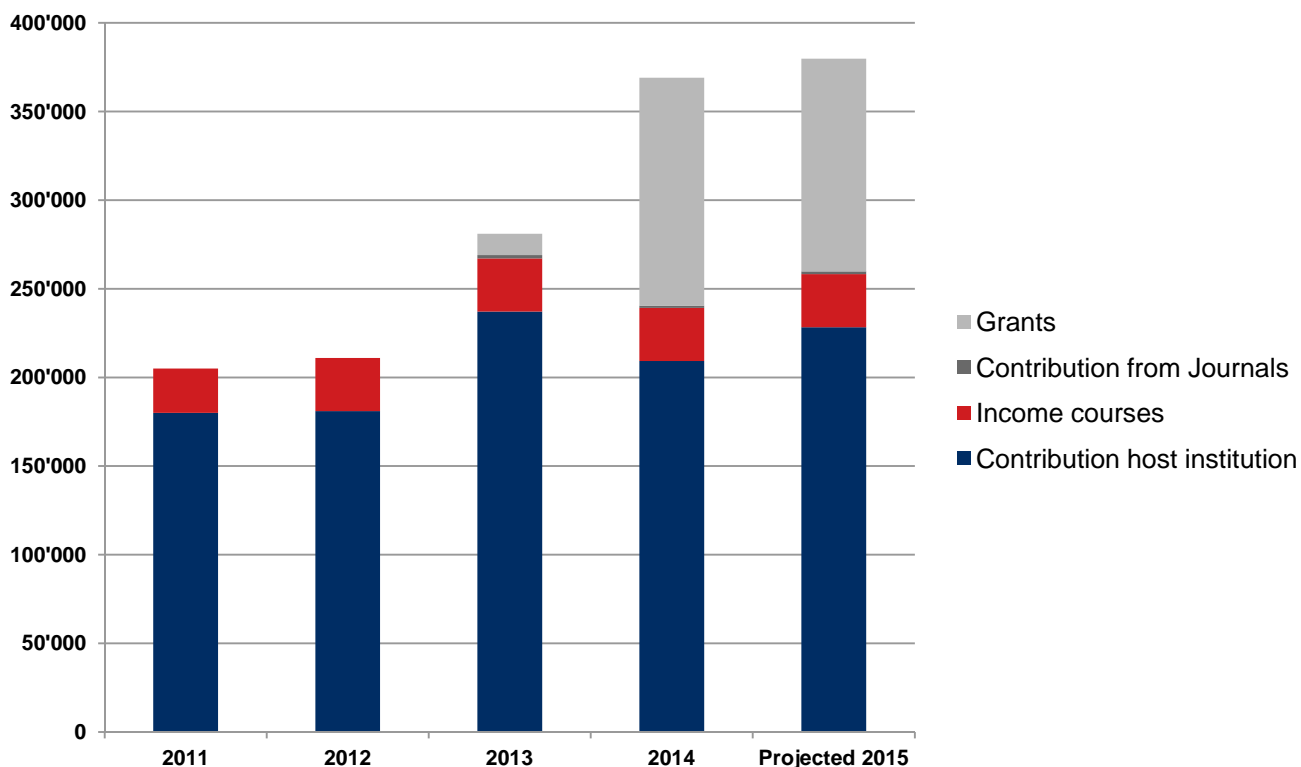


Sylvia de Haan, MSc, MPH
Coordinator Cochrane Switzerland (from September 2014)

4. Key financial data

The figure below indicates income (in CHF) since the establishment of Cochrane Switzerland and also provides projected income for 2015.

Figure: Income in CHF from 2011



Cochrane Switzerland receives in-kind support by the Institute for social and preventive medicine (IUMSP) at the Lausanne University Hospital (CHUV and UNIL). The IUMSP implements research projects that reinforce and complement the work of Cochrane Switzerland, for example in the area of knowledge management. These resources are not included in the financial overview presented above.

Annex 1 – Publications by Cochrane Switzerland

We work with several medical education journals to publish contextualised Cochrane summaries in French, German and Italian. Some summaries are published in more than one language in different journals.

Articles published in *Revue Médicale Suisse* in the series '*Revue Cochrane pour le praticien*':

- Mayer M, Cachat F, **Flatz A**, **Peytremann-Bridevaux I**. Enurésie nocturne: quel traitement efficace non pharmacologique recommander? *Rev Med Suisse* 2014; 10: 201.
- **Peytremann-Bridevaux I**, Bridevaux PO, **Burnand B**. Soins intégrés et BPCO. Bénéfiques pour les patients! *Rev Med Suisse* 2014; 10: 305.
- **Rège-Walther M**, Guerne PA, **Peytremann-Bridevaux I**. Fibromyalgie et autres douleurs neuropathiques: l'amitriptyline n'est pas la panacée. *Rev Med Suisse* 2014; 10: 505.
- Kruithof R, **Flatz A**, Egli M, **Peytremann-Bridevaux I**. Contrôle glycémique chez le diabétique de type 1: quels objectifs? *Rev Med Suisse* 2014; 10: 1473.
- Steurer-Stey CA, Puhan MA, **von Elm E**, **Bengough T**. Quel rôle jouent les antibiotiques dans le traitement de l'exacerbation aiguë de la BPCO? *Rev Med Suisse* 2014; 10: 1841.

Articles published in PRAXIS in the series '*Mini-review Cochrane für die Praxis*':

- Renard D, de Pélichy E, **von Elm E**. Langzeit-Antipsychotika bei Demenzpatienten – absetzen oder weiter geben? *Praxis* 2014; 103 (2): 109-110.
- Steurer-Stey C, Puhan MA, **Bengough T**, **von Elm E**. Welche Rolle spielen Antibiotika bei der Behandlung der akuten Exazerbation einer COPD? *Praxis* 2014; 103 (9): 537-538.
- Labud H, **Bengough T**, **von Elm E**. Hydrokolloid bei diabetischen Fussulzera: besser als herkömmliche Wundverbände ? *Praxis* 2014; 103 (15): 907-908.

Articles published in *Tribuna Medica Ticinese* in the series '*Revisione Cochrane per il medico di famiglia*':

- Schütz P, Müller B, Briel M, **von Elm E**. Il dosaggio della procalcitonina è indicato per guidare la terapia antibiotica in caso di infezione respiratorie acute? *Tribuna Medica Ticinese*, 79 Aprile 2014; 129-131.
- Althaus F, Mezger N, **Peytremann-Bridevaux I**. Trattamento della schistosomiasi da S. Mansoni: quale alternativa al Praziquantel? *Tribuna Medica Ticinese*, 79 Settembre 2014; 233-235.
- Mayer M, Cachat F, **Flatz A**, **Peytremann-Bridevaux I**. Enuresi notturna: quale trattamento non farmacologico raccomandare? *Tribuna Medica Ticinese*, 79 Novembre 2014; 289-291.

Articles published in Médecine et enfance in the series 'Côté Cochrane':

- Fumeaux P, Holzer L, **Burnand B**. La thérapie cognitivo-comportementale pour les troubles anxieux chez l'enfant et l'adolescent: efficacité et niveau de preuves. Médecine & enfance, avril 2014: 107-108.
- Mayer M, Cachat F, **Flatz A**, **Peytremann-Bridevaux I**. Enurésie nocturne: quel traitement efficace non pharmacologique recommander? Médecine & enfance, mai 2014: 145-146.
- Joye S, Fischer-Fumeaux C, **Flatz A**, Tolsa JF. Contact peau à peau précoce à la naissance: simple et efficace. Médecine & enfance, décembre 2014: 363-364.

Annex 2 – Other 2014 publications by our team

- Maillard MH, Bortolotti M, Vader J-P, Mottet C, Schoepfer A, Gonvers J-J, **Burnand B**, Froehlich F, Michetti P, Pittet V. Appropriateness and long-term discontinuation rate of biological therapies in ulcerative colitis. *J Crohns Colitis* 8 (2014) 825-34.
- Zuercher E, Casillas A, Hagon-Traub I, Bordet J, **Burnand B**, **Peytremann-Bridevaux I**. Baseline data of a population-based cohort of patients with diabetes in Switzerland (CoDiab-VD). *Swiss Med Wkly* 144 (2014) w13951.
- Bodenmann P, Velonaki V-S, Ruggeri O, Hugli O, **Burnand B**, Wasserfallen J-B, Moschetti K, Iglesias K, Baggio S, Daepfen J-B. Case management for frequent users of the emergency department: study protocol of a randomised controlled trial. *BMC Health Serv Res* 14 (2014) 264.
- Rosenthal R, Kasenda B, Dell-Kuster S, **von Elm E**, You J, Blümle A, Tomonaga Y, Saccilotto R, Amstutz A, **Bengough T**, Meerpohl JJ, Stegert M, Tikkinen KAO, Neumann I, Carrasco-Labra A, Faulhaber M, Mulla S, Mertz D, Akl EA, Bassler D. Completion and Publication Rates of Randomized Controlled Trials in Surgery: An Empirical Study. *Ann Surg* [Epub ahead of print] (2014).
- Arditi C, **Burnand B**. Démographie médicale: indicateurs et observatoires. *Revue des pratiques en Suisse et ailleurs*. Lausanne, Institut universitaire de médecine sociale et préventive (IUMSP), 2014, (Raisons de santé 236).
- Gilles I, **Burnand B**, **Peytremann-Bridevaux I**. Factors associated with healthcare professionals' intent to stay in hospital: a comparison across five occupational categories. *Int J Qual Health Care* 26 (2014) 158-66.
- Mueller Y, D'Acremont V, Ambresin A-E, Rossi I, Martin O, **Burnand B**, Genton B. Feasibility and clinical outcomes when using practice guidelines for evaluation of fever in returning travelers and migrants: a validation study. *J Travel Med* 21 (2014) 169-82.
- Schoepfer AM, Bortolotti M, Pittet V, Mottet C, Gonvers J-J, Reich O, Fournier N, Vader J-P, **Burnand B**, Michetti P, Froehlich F. The gap between scientific evidence and clinical practice: 5-aminosalicylates are frequently used for the treatment of Crohn's disease. *Aliment Pharmacol Ther* 40 (2014) 930-7.
- Chatelard S, Bodenmann P, Vaucher P, Herzig L, Bischoff T, **Burnand B**. General practitioners can evaluate the material, social and health dimensions of patient social status. *Plos One* 9 (2014) e84828.

- Drösler SE, Romano PS, Sundararajan V, **Burnand B**, Colin C, Pincus H, Ghali W. How many diagnosis fields are needed to capture safety events in administrative data? Findings and recommendations from the WHO ICD-11 Topic Advisory Group on Quality and Safety. *Int J Qual Health Care* 26 (2014) 16-25.
- Santschi V, Chiolero A, Colosimo AL, Platt RW, Taffé P, Burnier M, **Burnand B**, Paradis G. Improving blood pressure control through pharmacist interventions: a meta-analysis of randomized controlled trials. *J Am Heart Assoc* 3 (2014) e000718.
- Daepfen J-B, Bodenmann P, **Burnand B**, Diserens C, Genton B, Spencer B, Widmer D. [Introduction. Future physicians survey the community]. *Rev Med Suisse* 10 (2014)
- **Peytremann-Bridevaux I**, Taffé P, **Burnand B**, Bridevaux PO, Puhan MA. Mortality of patients with COPD participating in chronic disease management programmes: a happy end? *Thorax* 69 (2014) 865-6.
- Iglesias K, **Burnand B**, **Peytremann-Bridevaux I**. PACIC Instrument: disentangling dimensions using published validation models. *Int J Qual Health Care* 26 (2014) 250-60.
- Pittet V, Rogler G, Mottet C, Froehlich F, Michetti P, de Saussure P, **Burnand B**, Vader J-P. Patients' information-seeking activity is associated with treatment compliance in inflammatory bowel disease patients. *Scand J Gastroenterol* 49 (2014) 662-73.
- Kasenda B, von Elm E, You J, Blümle A, Tomonaga Y, Saccilotto R, Amstutz A, **Bengough T**, Meerpohl JJ, Stegert M, Tikkinen KAO, Neumann I, Carrasco-Labra A, Faulhaber M, Mulla SM, Mertz D, Akl EA, Bassler D, Busse JW, Ferreira-Gonzalez I, et al. Prevalence, characteristics, and publication of discontinued randomized trials. *JAMA* 311 (2014) 1045-51.
- Kasenda B, Schandelmaier S, Sun X, **von Elm E**, You J, Blümle A, Tomonaga Y, Saccilotto, R, Amstutz A, **Bengough T**, Meerpohl JJ, Stegert M, Olu KK, Tikkinen KAO, Neumann I, Carrasco-Labra A, Faulhaber M, Mulla SM, Mertz D, Akl EA, et al. Subgroup analyses in randomised controlled trials: cohort study on trial protocols and journal publications. *BMJ* 349 (2014) g4539.
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Annex 3 – Systematic reviews first published in 2014 involving authors based in Switzerland

This annex provides an overview of new and updated systematic reviews published in 2014 that included an author based in Switzerland. The table below provides the title of the review as well as the Cochrane Review Group in charge. Further details about each of the reviews listed can be found in the Cochrane Library (see: <http://www.cochranelibrary.com/>).

Review Title	Cochrane Review Group	New/updated review
Extracorporeal photopheresis versus standard treatment for acute graft-versus-host disease after haematopoietic stem cell transplantation in paediatric patients	Childhood Cancer Group	New
Selenium for preventing cancer	Gynaecological Cancer Group	Updated
Deferasirox for managing iron overload in people with myelodysplastic syndrome	Haematological Malignancies Group	Updated
The role of additional radiotherapy for primary central nervous system lymphoma	Haematological Malignancies Group	New
Statins for acute coronary syndrome	Heart Group	Updated
Dihydroartemisinin-piperaquine for treating uncomplicated Plasmodium falciparum malaria	Infectious Diseases Group	New
Drugs for treating urinary schistosomiasis	Infectious Diseases Group	Updated
Rapid diagnostic tests for diagnosing uncomplicated non-falciparum or Plasmodium vivax malaria in endemic countries	Infectious Diseases Group	New
Rapid tests for the diagnosis of visceral leishmaniasis in patients with suspected disease	Infectious Diseases Group	New
Xpert® MTB/RIF assay for pulmonary tuberculosis and rifampicin resistance in adults	Infectious Diseases Group	Updated
Non-pharmacological interventions for chronic pain in people with spinal cord injury	Injuries Group	New
Exercise for osteoarthritis of the hip	Musculoskeletal Group	Updated and Conclusions Changed
Oral or transdermal opioids for osteoarthritis of the knee or hip	Musculoskeletal Group	Updated
Pentoxifylline for the prevention of bronchopulmonary dysplasia in preterm infants	Neonatal Group	New
Physical activity programs for promoting bone mineralization and growth in preterm infants	Neonatal Group	Updated
Acetylcholinesterase inhibitor treatment for myasthenia	Neuromuscular Disease	Updated

gravis	Group	
Direct composite resin fillings versus amalgam fillings for permanent or adult posterior teeth	Oral Health Group	New
Psychological interventions for acute pain after open heart surgery	Pain, Palliative and Supportive Care Group	New
Primary prophylaxis for venous thromboembolism in ambulatory cancer patients receiving chemotherapy	Peripheral Vascular Diseases Group	Updated
Combination of tocolytic agents for inhibiting preterm labour	Pregnancy and Childbirth Group	New
Aripiprazole versus other atypical antipsychotics for schizophrenia	Schizophrenia Group	Updated

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