

Annual Report 2016

Cochrane Switzerland



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Foreword

For Cochrane Switzerland, the year 2016 was marked by two important developments that help improve the accessibility to evidence-based healthcare information in Switzerland:

Since January 2016, thanks to the financial support of the Swiss Academy of Medical Sciences, the Federal Office of Public Health and the academic medical libraries, a national license allows all Swiss residents to have free access to the Cochrane Library for the coming 5 years. The Cochrane Library comprises more than 7000 published systematic reviews about therapeutic and diagnostic healthcare interventions. It is not only a great resource for healthcare professionals, but also for patients and the general public. The plain language summaries are available in several languages, including German and French, and facilitate a broad access to evidence-based information. During the year, the number of downloads of Cochrane reviews increased steadily. In 2016, Switzerland was registered as the country in the world with the third highest number of Cochrane review downloads, right behind England and Australia. This fact reinforces and sets out our conviction of the importance of free access to evidence-based information in Switzerland. Being able to freely access a resource such as the Cochrane Library will also greatly facilitate the development of knowledge translation and shared decision making in healthcare.

Further, the year 2016 has seen the official kick off of a new knowledge translation project developed in collaboration with the consumer association "Fédération Romande des Consommateurs (FRC)". This project is supported by the Department of Public Health of the Canton de Vaud, and marks the beginning of a closer relationship with healthcare consumers in Switzerland. The project's main aim is to make available evidence-based healthcare information and to strengthen its use, specifically in the communication between healthcare consumers and healthcare professionals. Cochrane Switzerland provides evidence, stemming in particular from Cochrane systematic reviews, of relevance to consumers. By connecting key healthcare professional and non-professional actors, this project promotes the use of Cochrane evidence in Switzerland, as well as the general idea of evidence-based healthcare information.

As we finalise this report, our team is preparing for the 2017 Cochrane Mid-Year Meeting to be held in Geneva in early April. Cochrane Switzerland will be honoured and pleased to welcome to Switzerland the global Cochrane family, among which many long-standing colleagues and friends: This Cochrane "business meeting" will be the first to be held partly in conjunction with one of Cochrane's major partner organizations, the World Health Organization.



Prof. Bernard Burnand



Dr. Erik von Elm

1. Achievements and key activities

The activities of Cochrane Switzerland are described along the lines of of Cochrane's Strategy to 2020 four main objectives: producing evidence, making evidence available, advocating for evidence and developing the organisation. Our own strategic plan is aligned to this strategy while adjusting it to best fit the specific needs of a national Associated Centre.

1.1. Producing evidence

1.1.1 Courses and workshops

Cochrane Switzerland provides a number of training opportunities every year. These can be training workshops at basic level, thus increasing awareness and interest in carrying out systematic reviews, but also more advanced training workshops to strengthen methodological and statistical capacity of current and new authors.

In 2016, we organised or were involved in the following courses and workshops:

- Introductory course for Cochrane review authors (January 2016). This workshop was organised jointly with Cochrane Austria and Cochrane Germany and, this time, took place in Vienna (Austria) with 31 participants. In this three-day course, they learned the basic concepts needed for conducting a Cochrane systematic review. The course addressed topics such as the definition of a review question, development of the protocol, systematic literature searches in electronic databases, selection of studies, evaluation of risk of bias, data extraction, meta-analysis and interpretation of findings. It also introduced participants to Cochrane's Review Manager software (RevMan) and the GRADE framework.
- Meta-analysis: advanced methods using Stata (December 2016). This 2.5-day course was attended by 11 participants, most of them with a background in medical statistics or systematic reviews. This course was held by our statistician, Patrick Taffé, and tackled in detail the theoretical foundation and techniques needed to carry out meta-analyses by means of the STATA software. It was preceded by a one-day optional training on STATA for participants wishing to refresh their skills.
- Introductory course "Using health research effectively". This course was designed for the medical teams of *Médecins Sans Frontières (MSF) Suisse* and delivered in three blocks of two half-days each (in November 2015, January 2016 and March 2016). Its contents allowed participants involved in decisions about or implementation of medical interventions in a humanitarian context to become familiar with the concepts of study designs in interventional and observational healthcare research and evidence-based healthcare methods. The focus was then set on systematic reviews summarising evidence from clinical and public health

research and providing a key information source specifically for guideline development. The three course modules were attended by a total of 25 participants.

- Systematic Reviews and Meta-Analysis module. This module is part of the Certificate of Advanced Studies (CAS) in Clinical Research that is organised annually by the Institute of Social and Preventive Medicine (IUMSP) and the Faculty of Biology and Medicine (FBM). Cochrane Switzerland is an official contributor and participates in teaching.

Team members were also active in trainings on systematic reviews, Cochrane and its resources, or evidence-based methods in general, as delivered by other Cochrane groups or partner institutions as well as requested by third parties interested in evidence-based healthcare. In 2016, these included:

- Pre-graduate teaching, Faculty of biology and medicine, University of Lausanne (introductory module on clinical research methods), February 2016.
- European Master of Science in Epidemiology, IMBEI, University of Mainz - Seminar and journal club on reporting guidelines – Mainz, Germany, March 2016.
- RELX Intellectual Properties SA (a holding including Elsevier) - Seminar on the current status of evidence-based medicine with respect to systematic reviews and information sources - Neuchâtel, May 2016.
- Cochrane Italy - Seminar on Knowledge translation: What it is and why it matters - Modena, Italy, June 2016.
- Netzwerk Fachbibliotheken Gesundheit (network of Swiss healthcare librarians) - Cochrane and the Cochrane Library - Basel, June 2016.
- SAMS 4th National gathering of Swiss medical librarians – “Swiss national license of the Cochrane Library” – Bern, September 2016.
- Nestlé Research Centre – “Public Health Nutrition” course delivered by IUMSP Lausanne - Systematic reviews with/without meta-analysis (focus on Cochrane methodology) - Lausanne, October 2016.
- University of Basel Postgraduate Programme (MAS) in Insurance Medicine - Lecture on the Cochrane Collaboration – Basel, November 2016.
- University of Lausanne Certificate of Advanced Studies (CAS) post-graduate programme in Clinical Research Methods - Lausanne, September to December 2016.

1.1.2 Systematic review projects

In 2016, we were involved also in several systematic review projects:

- We finalised and delivered the systematic review on occupational risk factors of developing epicondylitis that focussed on a frequent tendinopathy of the elbow, for which we were commissioned by SUVA¹ in autumn 2014. Applying Cochrane methodology as much as possible given the scope of the review, we completed systematic searches, the screening of search results, data extraction and risk of bias assessments. In 2016, the data syntheses and analyses and the writing of the final full report were finalised. The corresponding article manuscript is currently being prepared for submission to peer-reviewed journals.

¹ Federal insurance for occupational accidents and illnesses

- An ongoing review project is a synthesis of qualitative evidence on factors that influence women's engagement with breastfeeding support. This Cochrane review with the Consumer and Communication Review Group is led by our former collaborator Theresa Bengough, who is now based in Vienna, Austria, together with co-authors in Belgium and Germany. It is currently at the protocol stage and part of T. Bengough's ongoing PhD thesis programme at the University of Leuven, Belgium. The qualitative evidence synthesis has been designed to complement three existing Cochrane intervention reviews on support for breastfeeding mothers.
- A systematic review with Cochrane Public Health on the effectiveness of interventions implemented within sporting organisations to promote healthy behaviours and health outcomes is being led by our former staff member Aline Flatz. This review is conducted together with collaborators of the Epidemiology, Biostatistics and Prevention Institute at the University of Zurich and of the Danube University in Krems, Austria. In 2016, the full review manuscript was completed and it will be submitted to the review group in early 2017.
- Another evidence synthesis project focuses on current therapeutic strategies for sudden cardiac death prevention in heart failure patients. Through overviews of systematic reviews and meta-analyses, the project estimated the public health impact of drug and non-drug interventions in heart failure and tried to identify an optimal strategy supported by evidence in sudden cardiac death prevention. This project is part of the PhD programme of our collaborator Muammar Al-Gobari and has resulted in a first publication in PLoS One at the end of 2016. See **Annex 1** for the full reference.
- In 2016, team members also started to work on the update of a Cochrane review on computer-generated reminders delivered on paper to healthcare professionals: "Effects on professional practice and health care outcomes", that is being maintained with Cochrane Effective Practice and Organization of Care.
- Ongoing work to update existing Cochrane reviews includes a review on the full publication of meeting abstracts that will include more than 400 studies reporting on the publication outcome of studies presented at biomedical meetings, and a review on the non-pharmacological treatment of pain in people living with spinal cord injury.

In 2016, we also provided expertise on the design and conduct of several systematic review projects initiated by both researchers of the Lausanne University Hospital and external partners. This also included formats other than standard Cochrane reviews such as qualitative evidence syntheses and evidence maps.

1.1.3 Contributions to Cochrane review groups

Besides our own review projects, we continued contributing to the review production of the following Cochrane Review Groups, as co-authors, editors, referees or by providing informal advice to author groups based in Switzerland:

- Tobacco Addiction Group;
- Drugs and Alcohol Group;
- Effective Practice and Organisation of Care Group;

- Injuries Group;
- Methodology Review Group;
- Cochrane Work Group;
- Upper GI and Pancreatic Diseases Group;
- Consumers and Communication Group and
- Oral Health Group.

As members, we were involved in the ongoing work of:

- Methods Prognosis Group;
- Cochrane Training, and
- Translation Advisory Group

1.2. Making evidence available

Many healthcare professionals are able to access and understand the evidence provided by Cochrane and in the Cochrane Library in English. For other target groups such as patients and consumers groups, the media, policy and decision makers the preferred language is one of the national languages. Consequently, we provide access to information about Cochrane in French, German, Italian and English through our website, and also by linking to those of the Cochrane Centres and branches in Germany, Austria, France, and Italy and the UK as well as cochrane.org, where appropriate.

1.2.1 Cochrane Library National provision

Since 2016, the public and healthcare professionals of Switzerland have free and unrestricted access to more than 7000 published systematic reviews on healthcare interventions through one-click access to the full content of the Cochrane Library. The Swiss Academy of Medical Sciences, with the support of the Federal Office of Public Health and the academic medical libraries, purchased a national license to the Cochrane Library for the period 2016-2020. This content represents not only a comprehensive resource for healthcare professionals, but also for the general public. The plain language summaries are available in many languages, including German and French, and further facilitate access to this evidence-based information source.

Since the beginning of the year, the number of accesses increased steadily. Among the countries with a national license for the Cochrane Library, Switzerland was the country with the third highest number of Cochrane review downloads, right behind England and Australia. This fact confirms the importance of providing free access to evidence-based information in Switzerland. (See impact and usage graph for 2016 in [Annex 2](#)).

1.2.2 Publications in medical journals

To respond to the need of providing tailored information in the national languages, we continue our partnerships with three medical education journals in Switzerland and one in France:

Revue Médicale Suisse

Since 2009, we produce summaries in French for this weekly journal, which is published by Editions Médecine & Hygiène (Geneva). In 2016, three summaries were published in French.

PRAXIS

PRAXIS is a bi-monthly journal for healthcare professionals in the German speaking part of Switzerland and is published by Hogrefe. In a special series called „Mini-Review Cochrane für die Praxis“, we present a clinical case scenario and report on the main results of a recent Cochrane Reviews relevant in the context of this clinical case. In 2016, two such articles were published in PRAXIS. From 2016, we also developed a new one-page format called: “Neues aus der Cochrane Library” presenting a selection of 6 recent Cochrane summaries in the field of primary care. Two pages in this new format were published in 2016.

Tribuna Medica Ticinese

This monthly bulletin targets healthcare professionals of the canton of Ticino, the Italian speaking part of Switzerland. In 2016, three summaries were published in Tribuna Medica Ticinese.

Médecine & Enfance

In 2016, one summary was published in French in Médecine & Enfance, a journal published by Edimark Santé (France) ten times a year, and focusing on paediatrics.

See **Annex 3** for a full list of publications in these four journals.

1.2.3 Cochrane Kompakt - Cochrane summaries in German

In line with Cochrane’s *Strategy to 2020* to make systematic reviews accessible in other languages, we continued our active contribution to *Cochrane Kompakt*, the German-language platform for plain language summaries of Cochrane Reviews: (www.cochrane.org/de/kompakt) initiated in 2014. In collaboration with Cochrane Germany and Cochrane Austria we continue to translate plain language summaries of recently published or updated reviews. We have now made available over 1200 plain language summaries in German. In 2016, this was in part made possible by the support from two external sources:

- (1) We received funding from Cochrane central to support the German translation work during one year.
- (2) Together with the Institute of Midwifery at the Zürich University of Applied Sciences (Zürcher Hochschule für Angewandte Wissenschaften - ZHAW) we applied for and received a grant from the SANA Foundation to translate a total of 120 plain language summaries in the area of pregnancy and childbirth.

1.2.4 “Wissen Was Wirkt” - The Cochrane blog in German

We continued to collaborate with our colleagues in Austria and Germany to further develop the blog “Wissen Was Wirkt” (www.wissenwaswirkt.org). This blog in German covers recent Cochrane evidence, in particular reviews with plain language summaries translated into German. It thus further expands the reach of *Cochrane Kompakt*. In addition, it covers other topics or events about evidence-based healthcare, that are of interest to the blog’s readership, including the general public interested in healthcare issues and healthcare professionals.

Until April 2016, the blog was coordinated by a team of journalists affiliated with Cochrane Austria. After an interim phase, it was decided to transfer the coordination to Cochrane Germany in October 2016. Its team has since started to embed the blog in a broader dissemination strategy for Cochrane evidence in the German-speaking countries. We continue to contribute to the writing and editing of the blog content.

In 2016, the blog has become more prominent and popular. Below are some highlights and key numbers for 2016:

- A total of **97 blogposts** have been published until January 2017.
- Cochrane Austria initiated a **video series** in which staffs of Cochrane Austria and Cochrane Switzerland explain key concepts of evidence-based medicine in plain language. The videos were quite popular and have been incorporated in lectures.
- So far, we have received only a few comments to our posts. By the end of January 2017 there were 35 comments.
- According to Google Analytics the blog reaches **about 1000-2000 visits per month** (max. 4000 visits per month).
- The blog content is also actively disseminated via a **Facebook page** and a **twitter account** with the same label.

1.2.5 Collaboration with consumer organization FRC

In 2016, we kicked off a new dissemination project in collaboration with the consumer association of the French-speaking part of Switzerland "Fédération Romande des Consommateurs" (FRC). Key aims of the project are to make available evidence-based healthcare information in a suitable format and language, in the right place and at the right time, to strengthen its utilisation by consumers, as well as to develop new tools that will facilitate access to relevant healthcare information. Among other tasks, we provide evidence from Cochrane systematic reviews of relevance to consumers. For this purpose we have developed an interactive platform prototype. The current version of the platform prototype was launched in November, in time for a major regional health fair called "Salon Planète Santé Live" and it is available at: <http://cochraneuisse.nospages.com> (also see section **1.3.3 Health consumers**). Twenty-five Cochrane review summaries were selected, based on their availability in French and relevance for the general public, in a total of six areas: common cold, dental health, asthma and allergies, seniors, smoking, and pain.

In the longer term, the idea is to better target healthcare consumers' information needs in Switzerland and develop one or several customized platforms. With the further deployment of this project, it is planned to identify suitable locations where the information can be displayed on screens, e.g. in pharmacies and waiting rooms of private practices or of hospitals. The concept has already been presented and showcased on several occasions and is extremely well received by healthcare professionals and consumers.

1.3. Advocating for evidence

We advocate for the use of the best evidence from healthcare research and highlight the contribution of Cochrane through targeted communication activities and presence at key events in Switzerland. The free and unrestricted access to the Cochrane Library for Swiss residents since the beginning of the year was instrumental for this activity.

1.3.1 Information material

New information material in several languages has been developed and disseminated during the year to draw attention to Cochrane resources. We created this material with the support of Cochrane's central executive team and the publisher of the Cochrane Library, Wiley & Sons (UK). The material includes:

- *FLYER*: "Cherchez-vous une information fiable afin de pouvoir prendre une décision dans le domaine de la santé?" (FR)
- *FLYER*: Top 10 tips on how to use the Cochrane Library (in four languages: EN-DE-FR-IT)
- *FLYER*: Migrant health special collection (EN)
- *POSTER*: Free access to the Cochrane Library in Switzerland (EN)
- *BANNER FLAG*: Free access to the Cochrane Library in Switzerland (EN)

The flyers are available on our website for downloading and printing, and were disseminated across Switzerland at several key events in 2016.

1.3.2 Media

Cochrane Switzerland staff act as spokespersons for healthcare-related issues and themes in the media. In 2016, we started providing the local press of the French speaking part of Switzerland with the Cochrane press releases translated into French by Cochrane France. The plan for the coming years is to implement a media strategy in line with Cochrane's upcoming knowledge translation strategy. The key stakeholders in Swiss media will be identified and press releases relevant to the Swiss audience will be sent in a targeted manner to increase impact. In the longer term, we aim to ensure that each press release issued by Cochrane will be passed on to the local press in the three linguistic areas of Switzerland (i.e. in German, French and Italian).

Important events in 2016:

- In January 2016, we issued a press release, in collaboration with the Swiss Academy of Medical Sciences, to inform the public about **the free access to the Cochrane Library in the context of the new national provision**. The news about the national license was broadcasted on the national German-speaking TV channel SRF1 in the health programme Puls, in a seven-minute feature, and used by various other media.
- The French version of the book "100 Medizin Mythen", to which Cochrane Austria contributed, was presented in April 2016. On this occasion we were invited to **the public debate: "Recherche médicale: comment le dire au public?"** ("Medical research: How to tell it to the

public?") that took place **during the Geneva book fair "Le Salon du Livre"**, which overall attracted about 100'000 visitors. The presence of key media and consumer stakeholders was a good opportunity to showcase Cochrane and highlight the relevance and usefulness of evidence-based information in different contexts. It was also an opportunity to reach a wider non-academic audience.

1.3.3 Healthcare consumers

The year 2016 was marked by the beginning of a closer relationship with the key audience of healthcare consumers in Switzerland. In collaboration with the consumer association "Fédération Romande des Consommateurs (FRC)" we obtained funding from the "Commission de promotion de la santé et de lutte contre les addictions" (CPSLA) of the Canton of Vaud. The primary focus of the project is to make available evidence-based healthcare information and strengthen its utilisation, specifically in the communication between healthcare services consumers and their healthcare professionals. An emphasis is on evidence from Cochrane systematic reviews that are relevant to consumers. By regrouping and connecting key professional and non-professional healthcare stakeholders, this project also promotes Cochrane and the Cochrane Library in Switzerland, as well as a broader usage of evidence-based healthcare information. It thus contributes to the appropriate and efficient use of healthcare.

Within the context of this collaboration, the following developments and events have been particularly interesting:

Health fair: Salon Planète Santé Live (24-27 November 2016)

This biennial event is a four-day health fair for the general public and it showcases regional healthcare providers and non-profit organisations (e.g. patient organisations). It takes place at the SwissTech Convention Center in Lausanne. In 2016, there were nearly 100 exhibits, and most of healthcare actors of the French-speaking part of Switzerland were present. A record number of 29'000 entrances was registered. A press release announcing our presence at the fair, as well as describing our collaboration with the consumer association Fédération Romande des Consommateurs (FRC) was issued and sent to more than 270 journalists. The news was also broadcasted through a live interview on the local radio channel Yes FM.

Cochrane Switzerland staff was present on the FRC stand to explain and promote the use of evidence-based information for healthcare questions in Switzerland.

A series of public debates and conferences about public health, prevention, new technologies, e-health, healthcare research, ethics, and politics were organised. Cochrane Switzerland and the FRC jointly gave a public lecture entitled: « Les blouses blanches vous déboussolent, suivez le guide! » (« Disoriented by white coats, follow the guide! »). During this talk, the importance of communication between healthcare providers and patients, as well as the availability of high-quality healthcare information were emphasised. It was also an opportunity to draw attention to Cochrane, the Cochrane Library, as well as to evidence-based healthcare in general.

Round tables: healthcare experts and patient associations

During the year, three round tables with stakeholders in the fields of health promotion and prevention, as well as healthcare providers and patients were organised in the French-speaking part of Switzerland. The meetings also strengthened the links between the participating actors.

Development of tools to support evidence-informed health decisions

- ***Calepin #masanté : (#myhealth notebook)***: This handy notebook lists a series of questions to be asked to physicians, pharmacists, dentists and insurance providers. It also gives advice on how to deal well with these discussion partners. Cochrane and the Cochrane Library are listed as top evidence-based healthcare resources. More than 1600 copies were distributed during the Planète Santé Live fair.
- ***Book: « La Boussole du patient » (The patient's compass)***: This guide was published by the Swiss Patient Organisation (spo.org) and provides patients with advice how to participate in decisions about their own healthcare, from appointment with a physician to hospital stay, and the management of medical error. Cochrane Switzerland participated to the proofreading of the French translation of the book. Cochrane evidence is also listed as main resource for EBM information.
- ***Web page « Trouver une bonne info de santé sur le web » (Finding relevant health info on the web) by FRC***: This page is available at frc.ch/masante and offers internet users guidance on finding reliable healthcare information on the web. Cochrane and the Cochrane Library are listed as the reference for EBM information.
- ***Healthcare information platform prototype***: We developed the first version of an internet platform that aims to facilitate access to a selection of Cochrane reviews on healthcare topics of interest for the general public: cochraneuisse.nospages.com. See [Section 1.2.5](#) for more details.

1.3.3 Healthcare professionals

Our team participated in several national and international meetings in 2016 including:

- ***Annual Conference of the German Network for Evidence-based medicine (Cologne, Germany, 3-5 March)***. Working group meeting organised by Cochrane Public Health Europe and participation in teaching in a workshop on bias.
- ***69th World Health Assembly (Geneva, Switzerland, 23-28 May)***. Cochrane is in official relationships with WHO since 2011 and, as a civil society organization, has observer status at WHO's highest decision making body, the World Health Assembly (WHA). As a member of Cochrane's WHO working group and WHA delegation, we attended several sessions and side events. Together with Health Technology Assessment International, another organization registered with WHO, Cochrane co-convened an official side event entitled "Informed decision making for universal health coverage" on 26 May 2016. This was the first time that Cochrane used its right to convene an official WHA side event at the Palais des Nations. This meeting was very well attended.
- ***24th Cochrane Colloquium (Seoul, South Korea, 23-27 October)***. We were actively involved in several working group meetings, including those of the directors of Cochrane Centres and Associated Centres, the Translation Advisory Group, and the Cochrane Public Health Group.

- **Swiss Public Health Conference (Bern, 15 November).** The focus of this one-day meeting was on migrants' health and the challenge for the Swiss healthcare system. Before the meeting, and with support by Cochrane's communication team, we prepared a flyer to draw attention to the special collection on migrant health in the Cochrane Library, which was distributed at the conference and used also on other similar occasions. Shortly after the meeting it was also distributed by one of the speakers to all chief medical officers of the Swiss cantons during a closed session.
- **High-Level Ministerial Meeting on Health Employment and Economic Growth: From Recommendations to Action (Geneva, Switzerland, 14-15 December).** We represented Cochrane in an international two-day conference convened jointly by ILO, OECD and WHO, addressing the shortage of health workers at global level. It was an opportunity to liaise with several member state delegations and draw attention to topical Cochrane reviews and the upcoming Global Evidence Summit in South Africa.
- **Federal Commission on Mandatory insurance (ELGK-CFPP).** This federal commission formally meets four times per year and has regular exchanges of its members. The use of Cochrane evidence and evidence-based information is regularly advocated.
- **Swiss Network on Health Technology Assessment (SNHTA).** This professional network has two formal meetings per year and the use of Cochrane evidence and evidence-based information is regularly advocated.

1.4. Developing Cochrane Switzerland

1.4.1 Our strategy

In our Strategic Plan 2015-2020² we defined four goals and nine objectives that continue to guide our work:

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, healthcare 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 healthcare concerns. Our team is already involved in conducting systematic reviews. Targeting these reviews to Swiss healthcare 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 healthcare 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 healthcare 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 healthcare 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 healthcare 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.

² Cochrane Switzerland. Strategic Plan 2015-2020. Available from:

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

1.4.2 Team changes

The year 2016 has seen some changes in our team:

Our scientific collaborator **Nadine Pfeifer** finalised her work on the systematic review on occupational risk factors of developing epicondylitis, a project for which we were commissioned by SUVA in autumn 2014, and moved on to a new position in the US. The report was finalised and the manuscript is currently being prepared for submission to peer-reviewed journals.

Our coordinator **Sylvia de Haan** returned to the Netherlands in spring. Since then she continues to contribute to Cochrane as its Partnerships Coordinator, in particular for the relation with WHO, while being affiliated with the Communications and External Affairs Department (CEAD) of the Central Executive Team in London, UK. Sylvia is replaced by **Claudia Burdet** since the 1 April 2016.

Dr Aline Flatz was our scientific collaborator in charge of activities related to Cochrane Public Health Europe. She left the team in August 2016. Her work will be resumed in early 2017 by a newly appointed staff member.

Pierluigi Ballabeni is working at the IUMSP since several years and, since this year, also contributes to Cochrane Switzerland's activities by translating web content into Italian.

In October 2016, **Thomy Tonia** joined the team as a part-time scientific collaborator to contribute to the ongoing work with the Scientific Secretariat of the Swiss Medical Board and selected Cochrane projects.

1.4.3 Key developments

The new collaboration with the Fédération Romande des Consommateurs (FRC) was of strategic importance for Cochrane Switzerland in 2016. It has been an opportunity to work more closely with healthcare consumers, as well as to enhance evidence-based information awareness in Switzerland. By bringing together key healthcare stakeholders and consumer representatives, this project also opens up new prospects in the field of knowledge translation and health evidence-based information for the general public.

For this joint project we obtained funding from the Commission de promotion de la santé et de lutte contre les addictions (CPSLA). This public fund covers a 0.2 FTE position in our team over three years. Lausanne University Hospital also contributes by matching funds to the salary and social security costs, and provides the working environment. See [1.2.5 New collaboration with consumers association](#) and [1.3.3 Health consumers](#) for additional details. More information about the FRC can be found at: <https://www.frc.ch/>.

Cochrane Switzerland also co-leads the interdisciplinary programme i-KnoT (improving Knowledge Transfer in Health). The i-Knot programme's primary aim is to develop research on knowledge transfer, be it among researchers and clinicians or between healthcare providers and patients. I-Knot projects are tightly related to the collaboration with the FRC. Through networking and interdisciplinary interactions, i-Knot enriches Cochrane Switzerland's development towards an approach closer to the general public and all healthcare consumers in Switzerland. It also fosters the development of new projects and collaborations in the field of knowledge translation. More information about i-Knot can be found at:

<https://wp.unil.ch/esspace/2015/10/transfert-de-connaissances-en-sante-un-partenariat-interdisciplinaire-au-service-de-la-communaute/>.

In 2016, our team contributed actively to the further development of Cochrane Public Health Europe (CPHE), which is the European satellite of the Cochrane Public Health (CPH) review group. Within the established network of five academic centres in three countries (Germany, Austria and Switzerland), we pursued the joint work on three selected projects, i.e. a priority setting project to inform a selection of public health topics with evidence from systematic reviews, the development of rapid review methodology for public health reviews, and the development and testing of a specific format to summarize systematic reviews for potential users in the public health arena. More detail about CPHE can be found at: <http://ph.cochrane.org/cochrane-public-health-europe>.

Our team continued to be involved in research on the methodology of clinical trials and systematic reviews. We have contributed to several projects jointly conducted with the team of the Basel Institute for Clinical Epidemiology and Biostatistics and other consortia. This empirical research includes a series of projects on the prevalence and reasons for discontinuation of randomized controlled trials, that have received funding from the Swiss National Science Foundation. In 2016, these activities have yielded a number of publications in high-profile peer-reviewed journals including the Journal of Clinical Epidemiology (4 articles), PLoS One (2 articles), PLoS Medicine, Annals of Oncology, BMJ Open, Annals of Emergency Medicine (1 article each). Further, we were involved in the ongoing work to elaborate and disseminate reporting guidelines for health research, in particular the STROBE and RECORD statements. In 2016, the German translation of the RECORD Statement was published in the journal ZEFQ and a new reporting guideline for studies on time to diagnosis (REST) elaborated with leadership of a French team. For further detail see **Annex 1**.

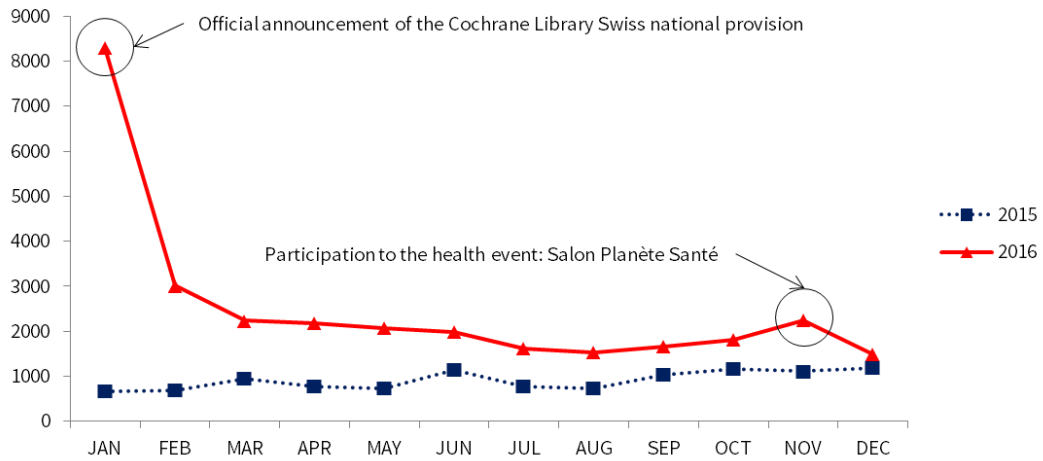
1.4.4 Impact and growth indicators

Over the past 12 months we noted very positive trends with regards to traffic on our website and subscription to our newsletter:

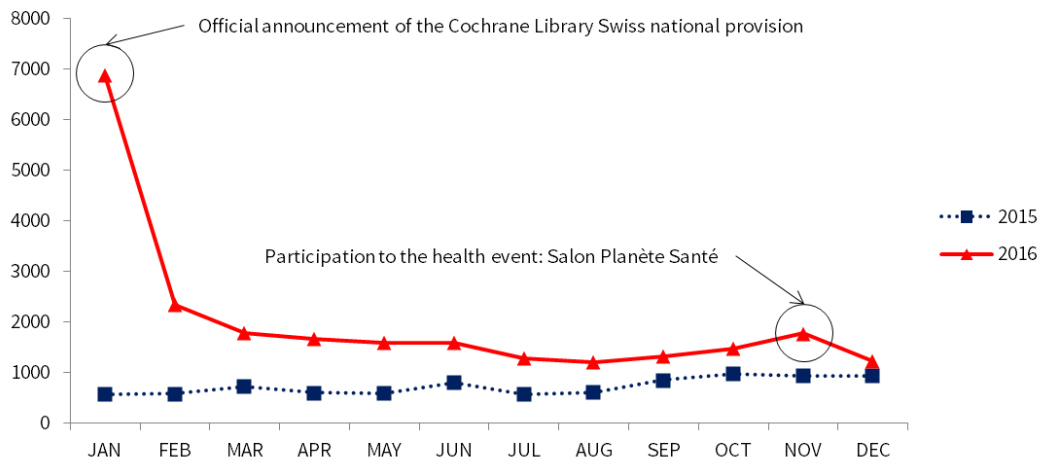
Website traffic for swiss.cochrane.org

Access statistics using Google Analytics indicated a strong increase in the number of sessions, page views, and users in 2016, as compared to the preceding year. Two key events in 2016 were the launch of the national provision of the Cochrane Library, and the participation in the health fair "Salon Planète Santé Live" together with the Fédération Romande des Consommateurs. Both are reflected by an increase in the number of sessions, page views and users (see tables on next page).

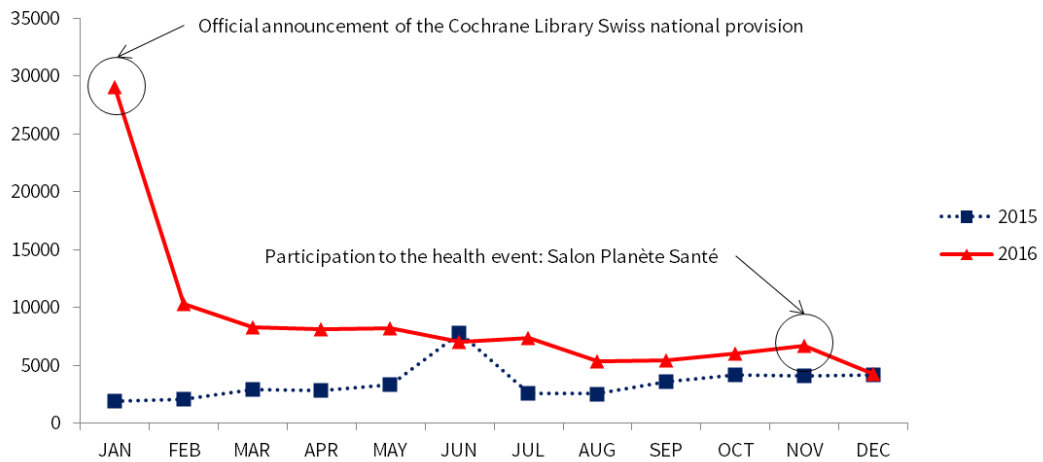
Sessions



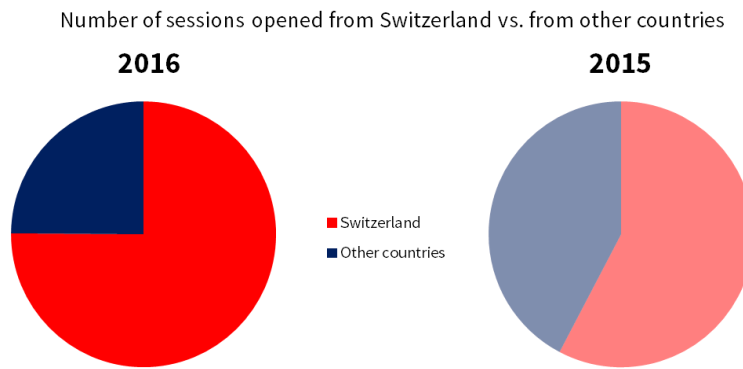
Users



Page views

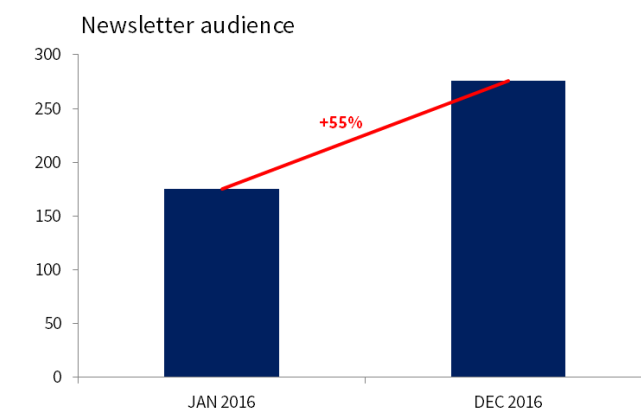


As compared to 2015, the proportion of sessions opened from a computer in Switzerland increased. In 2015, 58% of sessions accessing our website were from within the country while, in 2016, it was 75%. These numbers suggest that our strategy and specific activities were better targeted towards the Swiss audience in 2016.



Newsletter

In 2016, we published the third and fourth issues of our newsletter in English, French and German, with the aim to update interested persons and groups about our work. All issues of the newsletter are also available online from our website. The number of subscriptions has increased from 175 in January 2016 to 276 in December 2016, which represents a 55% growth.



2. Partners and partnerships

Cochrane Switzerland is hosted by the Institute of Social and Preventive Medicine (IUMSP) at Lausanne University Hospital (CHUV³) and University of Lausanne (UNIL). It is through this set up that Cochrane Switzerland has a sustainable human resource base as well as infrastructure.

External partnerships are crucial 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 and contributes to the promotion of Cochrane and concepts of evidence-based healthcare. This includes memberships and involvement in:

- Coordination pour l'Évaluation des Pratiques Professionnelles en Santé en Rhône-Alpes (CEPPRAL);
- Collaborative Group of the Appraisal of Guidelines, Research, and Evaluation in Europe (AGREE-Trust);
- Federal Commission on Mandatory insurance, Federal Office of Public Health (CFPP-ELGK);
- Enhancing the QUALity and Transparency Of health Research (EQUATOR Network);
- Scientific Advisory Committee on the Quality Strategy for the Swiss Health Care System, Federal Office of Public Health (FOPH);
- Fédération Romande des Consommateurs (FRC);
- German Network for Evidence-based Medicine (DNEbM);
- Grading of Recommendations Assessment, Development and Evaluation (GRADE) Working Group;
- Guidelines International Network (G-I-N);
- International Methodology Consortium on Coded Health Information (IMECCHI);
- International Society for Quality in Healthcare (ISQUA);
- Public Health Switzerland;
- Réseau d'Épidémiologie Clinique International Francophone (RECIF); RECIF is the Euro-Mediterranean branch of INCLIN (International Network on Clinical Epidemiology);
- STrengthening the Reporting of OBservational studies in Epidemiology (STROBE) Initiative;
- Swiss Network for Health Technology Assessment (SNHTA);
- Topic Advisory Group 'Quality and Safety', WHO;
- Working group 'Versorgungsforschung in der Schweiz', Swiss Academy of Medical Sciences.

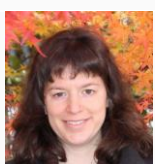
³ CHUV : Centre Hospitalier Universitaire Vaudois

3. Our team

By the end of 2016, our team consisted of eleven part- or full-time staff members who are affiliated with our host institution, the IUMSP. 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



Chantal Arditi, MSc, MA
Researcher
Cochrane Switzerland



Pierluigi Ballabeni, MSc, PhD
Contributor



Lucienne Boujon
Secretary
Cochrane Switzerland



Claudia Burdet, MSc, PhD
Coordinator
Cochrane Switzerland



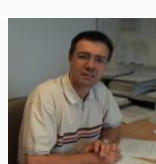
Bernard Burnand, MD, MPH Professor, Chief Physician, Director
Cochrane Switzerland



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



Isabelle Peytremann Bridevaux, MD, MPH, DSc,
Professor, Senior researcher



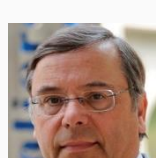
Patrick Taffé, MSc, PhD
Statistician



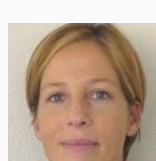
Thomy Tonia, MSc
Researcher, Senior Methodologist



Kathelene Weiss, MA
Development Coordinator
Cochrane Central Executive Team



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

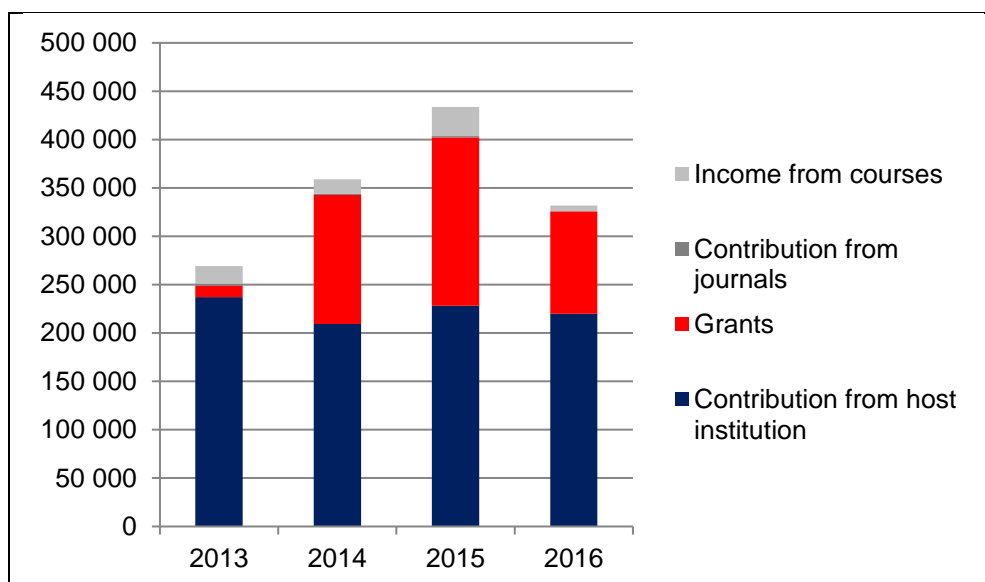


Stefania Pelli, MBA
(based in Bellinzona)
Contributor

4. Key financial data

The figure below shows the total income (in CHF) of Cochrane Switzerland for the years 2013 to 2016.

Figure: Income in CHF from 2013 to 2016



Cochrane Switzerland receives in-kind support from the Institute of 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 or health services research. Resources related to these projects are not included in the financial overview presented above.

Annex 1 - Peer reviewed articles by our team 2016

- Aerts M, Minalu G, Bösner S, Buntinx F, **Burnand B**, Haasenritter J, Herzig L, Knottnerus JA, Nilsson S, Renier W, Sox C, Sox H, Donner-Banzhoff N. International Working Group on Chest Pain in Primary Care (Interchest). Deriving a clinical prediction rule for coronary artery disease in primary care: improving internal and external validity by pooling individual patient data from five international sites. *J Clin Epidemiol*. 2016 Oct 20.
- Ambrosino N, Vitacca M, Dreher M, Isetta V, Montserrat JM, **Tonia T**, Turchetti G, Winck JC, Burgos F, Kampelmacher M, Vaghegini G; ERS Tele-Monitoring of Ventilator-Dependent Patients Task Force. Tele-monitoring of ventilator-dependent patients: a European Respiratory Society Statement. *Eur Respir J*. 2016 Sep ;48(3) :648-63.
- Arditi C, **Burnand B**, **Peytremann-Bridevaux I**. Adding non-randomised studies to a Cochrane review brings complementary information for healthcare stakeholders: an augmented systematic review and meta-analysis. *BMC Health Serv Res* 2016; 16:598.
- Bassler D, Mueller KF, Briel M, Kleijnen J, Marusic A, Wager E, Antes G, **von Elm E**, Altman DG, Meerpohl JJ; OPEN Consortium. Bias in dissemination of clinical research findings: structured OPEN framework of what, who and why, based on literature review and expert consensus. *BMJ Open*. 2016 Jan;6(1): e010024.
- Belvisi MG, Morty RE, Rohde G, Miravittles M, Forrest KA, Genton C, Ritter N, Luludi N, Jimenez A, Rigau D, Tonia T, Vaccaro V, Pannetier C, Brusselle GG, Holgate ST. The ever-expanding ERS fellowship programmes: achievements over the past 3 years. *Eur Respir J*. 2016 Sep;48(3):595-9.
- Bodenmann P, Velonaki VS, Griffin JL, Baggio S, Iglesias K, Moschetti K, Ruggeri O, **Burnand B**, Wasserfallen JB, Vu F, Schupbach J, Hugli O, Daepfen JB. Case Management may Reduce Emergency Department Frequent use in a Universal Health Coverage System: a Randomized Controlled Trial. *J Gen Intern Med*. 2016 Jul 11.
- Blümle A, Schandelmaier S, Oeller P, Kasenda B, Briel M, **von Elm E**; DISCO study group. Premature Discontinuation of Prospective Clinical Studies Approved by a Research Ethics Committee - A Comparison of Randomised and Non-Randomised Studies. *PLoS One*. 2016 Oct 28;11(10): e0165605.
- Briel M, Olu KK, **von Elm E**, Kasenda B, Alturki R, Agarwal A, Bhatnagar N, Schandelmaier S. A systematic review of discontinued trials suggested that most reasons for recruitment failure were preventable. *J Clin Epidemiol*. 2016 Dec; 80: 8-15.
- Eidenbenz D, **Taffé P**, Hugli O, Ruffinen GZ, and Pasquier M. Determinants of prehospital analgesia for isolated limb injury in an alpine helicopter emergency medical service: a 2-year retrospective study. *Anaesthesia*. 2016; 71: 779-787.

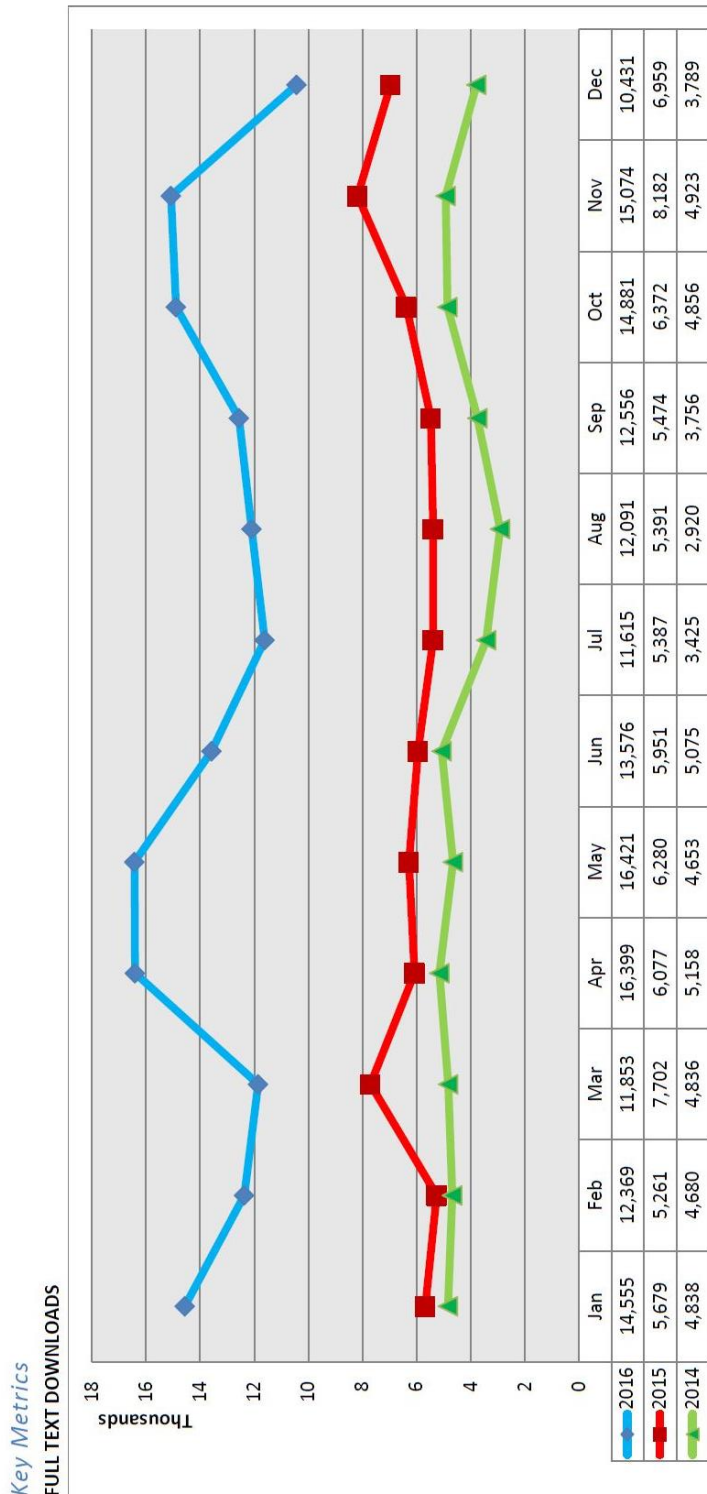
- Elia N, **von Elm E**, Chatagner A, Pöpping DM, Tramèr MR. How do authors of systematic reviews deal with research malpractice and misconduct in original studies? A cross-sectional analysis of systematic reviews and survey of their authors. *BMJ Open*. 2016 Mar 2;6(3): e010442.
- Flatz A, Pfeifer N, Radtke T, Kriemler S, Klerings I, Wolfenden L, **von Elm E**. Interventions implemented through sporting organisations for promoting healthy behaviour or improving health outcomes (Protocol). *Cochrane Database of Systematic Reviews* 2016, Issue 5. Art. No.: CD012170.
- Griffin JL, Yersin M, Baggio S, Iglesias K, Velonaki VS, Moschetti K, **Burnand B**, Wasserfallen JB, Vu F, Ansermet C, Hugli O, Daepfen JB, Bodenmann P. Characteristics and predictors of mortality among frequent users of an Emergency Department in Switzerland. *Eur J Emerg Med*. 2016 Oct 4.
- Halfon P, Egli Y, Morel Y, and **Taffé P**. A multilevel empirical study of the determinants of intensity of episodes of ambulatory physical therapy based on routinely collected data. *BMC Health Services Research*, (in press), 2016.
- Hemkens LG, Benchimol EI, Langan SM, Briel M, Kasenda B, Januel JM, Herrett E, **von Elm E**. The reporting of studies using routinely collected health data was often insufficient. *J Clin Epidemiol*. 2016 Nov; 79: 104-111.
- Jotterand Chaparro C, Depeyre JL, Longchamp D, Perez MH, **Taffé P**, and Cotting J. How much protein and energy are needed to equilibrate nitrogen and energy balances in ventilated critically ill children? *Clinical Nutrition*. 2016 35(2): 460-467.
- Kasenda B, **von Elm E**, You JJ, Blümle A, Tomonaga Y, Saccilotto R, Amstutz A, Bengough T, Meerpohl JJ, Stegert M, Olu KK, Tikkinen KA, Neumann I, Carrasco-Labra A, Faulhaber M, Mulla SM, Mertz D, Akl EA, Bassler D, Busse JW, Ferreira-González I, Lamontagne F, Nordmann A, Gloy V, Rantz H, Moja L, Ebrahim S, Schandelmaier S, Sun X, Vandvik PO, Johnston BC, Walter MA, **Burnand B**, Schwenkglens M, Hemkens LG, Bucher HC, Guyatt GH, Briel M. Agreements between Industry and Academia on Publication Rights: A Retrospective Study of Protocols and Publications of Randomized Clinical Trials. *PLoS Med*. 2016 Jun 28;13(6): e1002046.
- Kirkham JJ, Dwan KM, Blümle A, **von Elm E**, Williamson PR. How Much Participant Outcome Data Is Missing from Sight: Findings from a Cohort of Trials Submitted to a German Research Ethics Committee. *PLoS One*. 2016 Jun 17;11(6): e0157883.
- Launay E, Cohen JF, Bossuyt PM, Buekens P, Deeks J, Dye T, Feltbower R, Ferrari A, Kramer M, Leeftang M, Moher D, Moons KG, **von Elm E**, Ravaud P, Chalumeau M. Reporting studies on time to diagnosis: proposal of a guideline by an international panel (REST). *BMC Med*. 2016; 14(1): 146.
- Leyvraz M, **Taffé P**, Chatelan A, Paradis G, Tabin R, Bovet P, Bochud M, and Chiolerio A. Sodium intake and blood pressure in children and adolescents: Protocol for a systematic

- review and meta-analysis. *BMJ Open* (<http://dx.doi.org/10.1136/bmjopen-2016-012518>), 2016.
- Mueller KF, Meerpohl JJ, Briel M, Antes G, **von Elm E**, Lang B, Motschall E, Schwarzer G, Bassler D. Methods for detecting, quantifying and adjusting for dissemination bias in meta-analysis are described. *J Clin Epidemiol*. 2016 Dec; 80:25-33,
 - N'Goran AA, Blaser J, Deruaz-Luyet A, Senn N, Frey P, Haller DM, Tandjung R, Zeller A, **Burnand B**, Herzig L. From chronic conditions to relevance in multimorbidity: a four-step study in family medicine. *Fam Pract*. 2016 May 6. pii: cmw030.
 - Pittet V, Vaucher C, Maillard MH, Girardin M, de Saussure P, **Burnand B**, Rogler G, Michetti P. Information Needs and Concerns of Patients with Inflammatory Bowel Disease: What Can We Learn from Participants in a Bilingual Clinical Cohort? *PLoS One*. 2016 Mar 3;11(3):e0150620.
 - Sansonnens J, **Taffé P**, **Burnand B**, ADS study group. Higher occurrence of nausea and vomiting after total hip arthroplasty using general versus spinal anesthesia: an observational study. *BMC Anesthesiology*. 2016; 16:44.
 - Schandelmaier S, Conen K, **von Elm E**, You JJ, Blümle A, Tomonaga Y, Saccilotto R, Amstutz A, Bengough T, Meerpohl JJ, Stegert M, Olu KK, Tikkinen KA, Neumann I, Carrasco-Labra A, Faulhaber M, Mulla SM, Mertz D, Akl EA, Sun X, Bassler D, Busse JW, Ferreira-González I, Lamontagne F, Nordmann A, Gloy V, Raatz H, Moja L, Rosenthal R, Ebrahim S, Vandvik PO, Johnston BC, Walter MA, **Burnand B**, Schwenkglenks M, Hemkens LG, Bucher HC, Guyatt GH, Briel M, Kasenda B; DISCO study group. Planning and reporting of quality-of-life outcomes in cancer trials. *Ann Oncol*. 2016 Jan;27: 209.
 - Schandelmaier S, **von Elm E**, You JJ, Blümle A, Tomonaga Y, Lamontagne F, Saccilotto R, Amstutz A, Bengough T, Meerpohl JJ, Stegert M, Olu KK, Tikkinen KA, Neumann I, Carrasco-Labra A, Faulhaber M, Mulla SM, Mertz D, Akl EA, Sun X, Bassler D, Busse JW, Ferreira-González I, Nordmann A, Gloy V, Raatz H, Moja L, Rosenthal R, Ebrahim S, Vandvik PO, Johnston BC, Walter MA, **Burnand B**, Schwenkglenks M, Hemkens LG, Cook DJ, Meade MO, Bucher HC, Kasenda B, Briel M. Premature Discontinuation of Randomized Trials in Critical and Emergency Care: A Retrospective Cohort Study. *Crit Care Med*. 2016 Jan; 44:130-7.
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 - Southern DA, **Burnand B**, Droesler SE, Flemons W, Forster AJ, Gurevich Y, Harrison J, Quan H, Pincus HA, Romano PS, Sundararajan V, Kostanjsek N, Ghali WA. Deriving ICD-10 Codes for Patient Safety Indicators for Large-scale Surveillance Using Administrative Hospital Data. *Med Care*. 2016 Sep 15.
 - Stegert M, Kasenda B, **von Elm E**, You JJ, Blümle A, Tomonaga Y, Saccilotto R, Amstutz A, Bengough T, Briel M; DISCO study group. An analysis of protocols and publications

- suggested that most discontinuations of clinical trials were not based on preplanned interim analyses or stopping rules. *J Clin Epidemiol.* 2016 Jan; 69:152-60.
- **Taffé P.** Effective plots to assess bias and precision in method comparison studies. *Statistical Methods in Medical Research*, 2016.
 - Tavares V, Carron PN, Yersin B, **Taffé P**, **Burnand B**, Pittet V. The probability of having advanced medical interventions is associated with age in out-of-hospital life-threatening situations. *Scand J Trauma Resusc Emerg Med.* 2016 Aug 24;24(1):103.
 - **Tonia T**, Van Oyen H, Berger A, Schindler C, Künzli N. If I tweet will you cite? The effect of social media exposure of articles on downloads and citations. *Int J Public Health.* 2016 May;61(4):513-20.
 - Vaucher C, Bovet E, Bengough T, Pidoux V, Grossen M, Panese F, **Burnand B**. Meeting physicians' needs: a bottom-up approach for improving the implementation of medical knowledge into practice. *Health Res Policy and Systems* 2016; 14:49.
 - Vaucher C, Maillard MH, Froehlich F, **Burnand B**, Michetti P, Pittet V. Patients and gastroenterologists' perceptions of treatments for Inflammatory Bowel Diseases: do their perspectives match? *Scand J Gastroenterol* 2016 Feb 19:1-6. DOI: 10.3109/00365521.2016.1147065

Annex 2 - Access to Cochrane Library in Switzerland 2014-2016

Numbers are full-text downloads of Cochrane systematic reviews per month from a computer located in Switzerland. 2016 (blue line) was the first year with free access through a national license.



161,821 full text downloads of articles from the Cochrane Library were recorded on Wiley Online Library in 2016; this figure is 117% higher than 2015.

Annex 3 - Other publications by Cochrane Switzerland 2016

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*':

- **Arditi C**, Gex G, Bridevaux P-O, **Peytremann-Bridevaux I**. Programme de prise en charge des maladies chroniques : quels bénéfices dans l'asthme ? *Rev Med Suisse* 2016; 12: 567.
- Zurita S, Lazor-Blanchet C, **Flatz A**, **Peytremann-Bridevaux I**. Stress au travail chez les professionnels de la santé : quelle sont les mesures de prévention qui fonctionnent ? *Rev Med Suisse* 2016; 12: 1201.
- Gencer B, Mach F, **Burnand B**. La télémédecine : nouvel outil dans la prise en charge des patients avec insuffisance cardiaque. *Rev Med Suisse* 2016; 12: 2136.

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

- Ruetsch R, Juillerat P, **Flatz A**, **von Elm E**. Fördern PPI im Langzeitgebrauch prämaligene Läsionen der Magenschleimhaut? *Praxis* 2016; 105 (4): 221–222
- Wildi L, **Flatz A**, **von Elm E**. Ist Chondroitin bei Arthrose wirksam? *Praxis* 2016; 105 (10): 587–588
- Neues aus der Cochrane Library. *Praxis* 2016; 105 (14): 847–848
- Neues aus der Cochrane Library. *Praxis* 2016; 105 (19): 1157–1158

Articles published in *Tribuna Medica Ticinese*:

- Steurer-Stey C A, Puhani M A, **von Elm E**, **Bengough T**. Quale ruolo giocano gli antibiotici nell'esacerbazione acuta della BPCO? *Tribuna Medica Ticinese* 2016 ;81; 75-77.
- Joye S, Fischer-Fumeaux C, **Flatz A**, Tolsa JF. Contatto precoce pelle a pelle alla nascita: semplice ed efficace. *Tribuna Medica Ticinese* 201 ; 81 ; 161-163.
- Beaud F, Pruijm M, **Peytremann-Bridevaux I**. IRC pre-terminale: non è mai troppo tardi per rivolgersi allo specialista. *Tribuna Medica Ticinese* 2016 ; 81 ; 251-253.

Articles published in *Médecine et Enfance* in the series '*Côté Cochrane*':

- Fumeaux P, Revol O, **Burnand B**. Le méthylphénidate et le trouble de l'attention avec hyperactivité chez l'enfant et l'adolescent. *Médecine et enfance* 2016; septembre : 188.

Annex 4 - Cochrane reviews newly published or updated in 2016 involving authors based in Switzerland

This table provides an overview of new or updated Cochrane systematic reviews published in 2016 that included one or more authors based in Switzerland. The full reviews are available in the Cochrane Library and are free of charge in Switzerland (<http://www.cochranelibrary.com>).

Review Title	Cochrane Review Group
Antenatal breastfeeding education for increasing breastfeeding duration	Pregnancy and Childbirth Group
Aripiprazole versus other atypical antipsychotics for schizophrenia	Schizophrenia Group
Cognitive-behavioural treatment for subacute and chronic neck pain	Back and Neck Group
Colchicine for prevention of cardiovascular events	Heart Group
Efficacy and safety of rapid tests to guide antibiotic prescriptions for sore throat	Acute Respiratory Infections Group
Endodontic procedures for retreatment of periapical lesions	Oral Health Group
Exercise for pregnant women with gestational diabetes for improving maternal and fetal outcomes	Pregnancy and Childbirth Group
Exercise for women receiving adjuvant therapy for breast cancer	Breast Cancer Group
Exploration of the contralateral side when operating for inguinal hernia in children for detection of bilateral hernation	Colorectal Cancer Group
External cephalic version for breech presentation at term	Pregnancy and Childbirth Group
Fibrates for primary prevention of cardiovascular disease events	Heart Group
Fortification of staple foods with zinc for improving zinc status and other health outcomes in the general population	Public Health Group
High-dose chemotherapy with autologous stem cell support for first-line treatment of aggressive non-Hodgkin lymphoma: a systematic review and meta-analysis based on individual patient data	Haematological Malignancies Group
Humidification of indoor air for preventing or reducing dryness symptoms or upper respiratory infections in educational settings and at the workplace	Work Group
Interventions for treating bisphosphonate-related osteonecrosis of the jaw (BRONJ)	Oral Health Group
Interventions to improve water, sanitation, and hygiene for preventing soil-transmitted helminth infection	Infectious Diseases Group
Maxillary distraction osteogenesis versus orthognathic surgery for cleft lip and palate patients	Oral Health Group

Non-pharmacological interventions for alleviating pain during orthodontic treatment	Oral Health Group
Antenatal breastfeeding education for increasing breastfeeding duration	Pregnancy and Childbirth Group
Oral non-steroidal anti-inflammatory drugs versus other oral analgesic agents for acute soft tissue injury	Bone, Joint and Muscle Trauma Group
Perceptions and experiences of labour companionship: a qualitative evidence synthesis	Effective Practice and Organisation of Care Group
Prophylactic versus selective blood transfusion for sickle cell disease in pregnancy	Pregnancy and Childbirth Group
Psychological and social interventions for the prevention of mental disorders in people living in low- and middle-income countries affected by humanitarian crises	Common Mental Disorders Group
Psychological therapies for panic disorder with or without agoraphobia in adults: a network meta-analysis	Common Mental Disorders Group
Pulmonary rehabilitation following exacerbations of chronic obstructive pulmonary disease	Airways Group
Salt fluoridation for preventing dental caries	Oral Health Group
Screening for genital chlamydia infection	STI Group
Selenium for preventing cancer	Gynaecological, Neuro-oncology and Orphan Cancer Group
Short-term and long-term effects of tibolone in postmenopausal women	Gynaecology and Fertility Group
Surgery for women with apical vaginal prolapse	Gynaecology and Fertility Group
Surgical adjunctive procedures for accelerating orthodontic treatment	Oral Health Group
Topical umbilical cord care at birth	Pregnancy and Childbirth Group
Transvaginal mesh or grafts compared with native tissue repair for vaginal prolapse	Gynaecology and Fertility Group
Vitamin D supplementation for women during pregnancy	Pregnancy and Childbirth Group

Contact us

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Cochrane
Switzerland