

Publication of IPD meta-analyses in the Cochrane Database of Systematic Reviews: potential barriers and opportunities

Larysa Rydzewska¹, Jayne Tierney¹, Mike Clarke², Lesley Stewart³, Maroeska Rovers⁴

¹MRC Clinical Trials Unit, London. ²Queens University, Belfast. ³Centre for Reviews and Dissemination, York. ⁴Radboud University Nijmegen Medical Centre, Nijmegen.

Introduction

Individual participant data (IPD) reviews are typically non-Cochrane reviews published in a print journal on behalf of a collaborative group. Some are subsequently published on the Cochrane Database of Systematic Reviews (CDSR).

There is no guidance in the current version of the Cochrane Handbook on converting IPD reviews to Cochrane Reviews, which may create challenges for both IPD reviews authors and Cochrane Review Group (CRG) editorial teams.

Objectives

To assess how IPD Meta-analysis Methods Group members tend to publish their IPD reviews and their reasons for the publication route taken.

Methods

We developed a questionnaire to determine:

- Where IPD reviews were being published and why a particular publication route was chosen.
- Experiences of publishing IPD reviews in CDSR.

An online tool (SurveyMonkey™) was used to create a survey with answer choices presented in a randomised order each time to help minimise question choice bias

The survey was circulated to all members of the Methods Group

All responses were collated and analysed using SurveyMonkey™ analysis tools

Results

Response rates and number of IPD reviews published

65 members of the Methods Group were surveyed

31 responses have been received to date (48% response rate)

- 6 respondents (9%) had never published an IPD review.
- 25 respondents (81%) had published at least one IPD review.
 - Some respondents replied on behalf of one or more IPD reviews
 - Average of 4 published IPD reviews per respondent (range 1-15).
 - Responses relate to 95 published IPD reviews
- 19 respondents had published at least one IPD review in a print journal only
- 11 respondents had experience of converting at least one IPD review
- 14 respondents had never converted any reviews

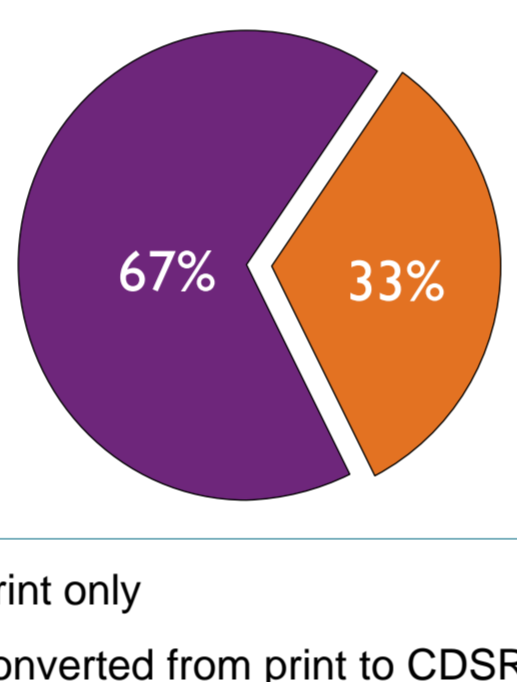
Publication patterns of IPD reviews

Publication route was known for 73 out of the 95 IPD reviews (77%)

→ No detailed information available for n=22 IPD reviews

All 73 IPD reviews were published in a print journal first:

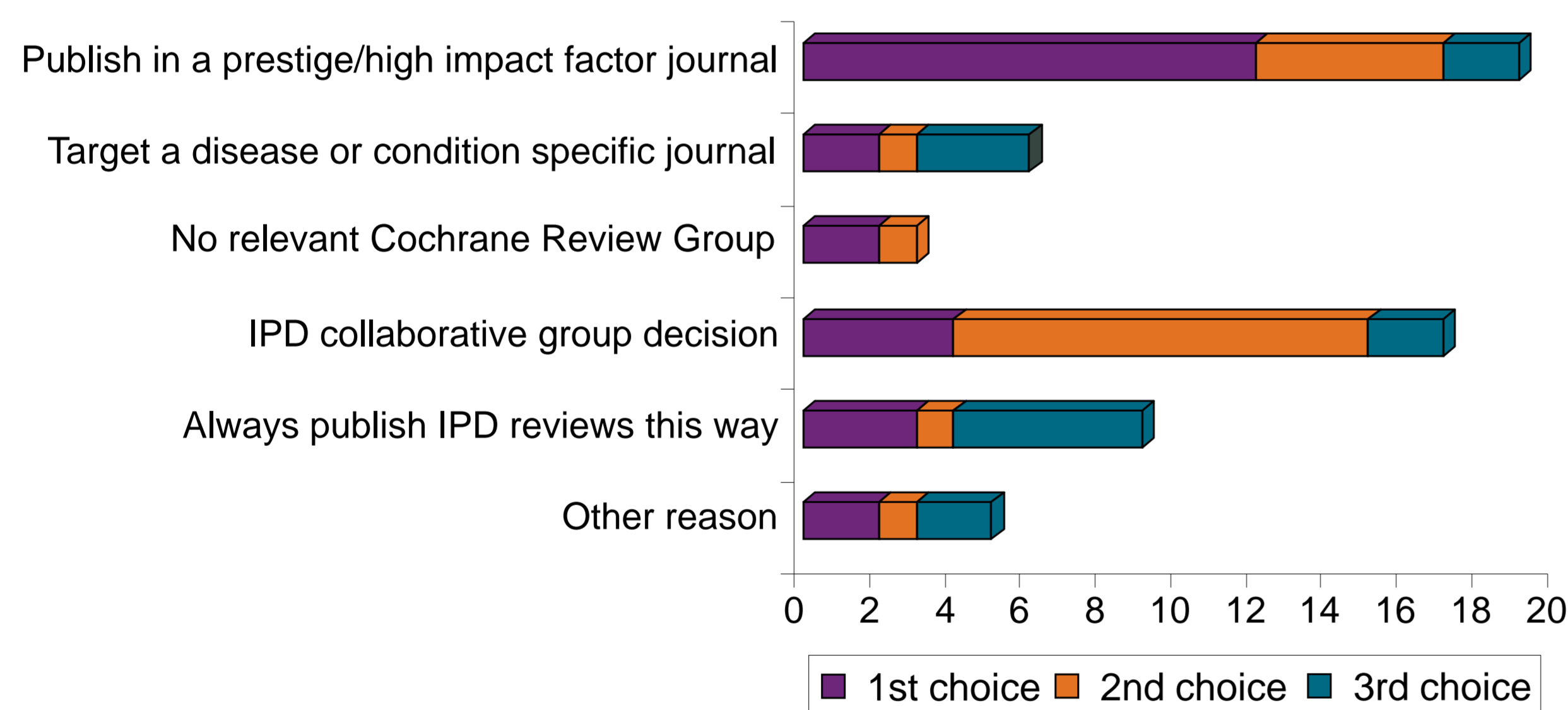
- 49 were published in a print journal only
- 24 were published in a print journal first and subsequently converted to a Cochrane Review
- None of the reviews were co-published
- None of the reviews were published on CDSR first



Publishing IPD reviews in a print journal

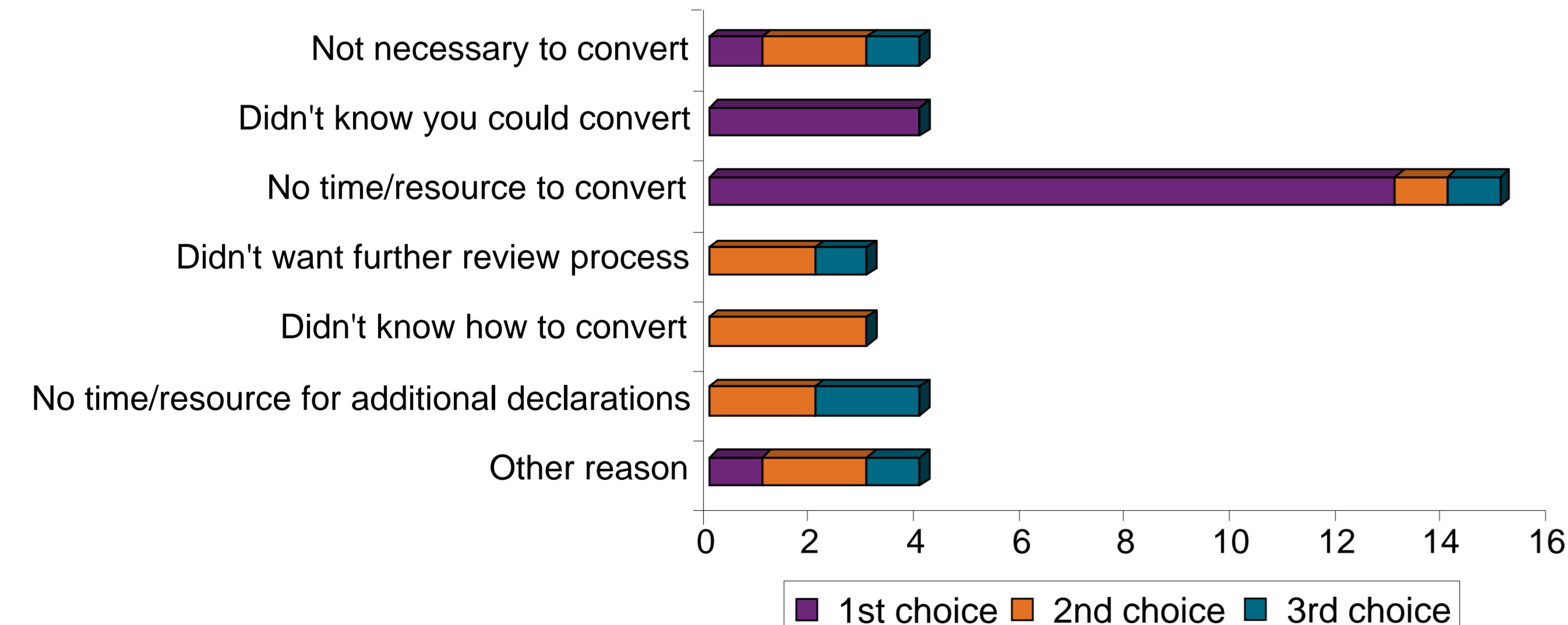
Reasons for publishing in print journal (25 respondents)

Decisions to publish first (or only) in a print journal were based largely on journal prestige and/or impact factor as well as collaborative group consensus



Reasons for not converting IPD reviews to CDSR (19 respondents)

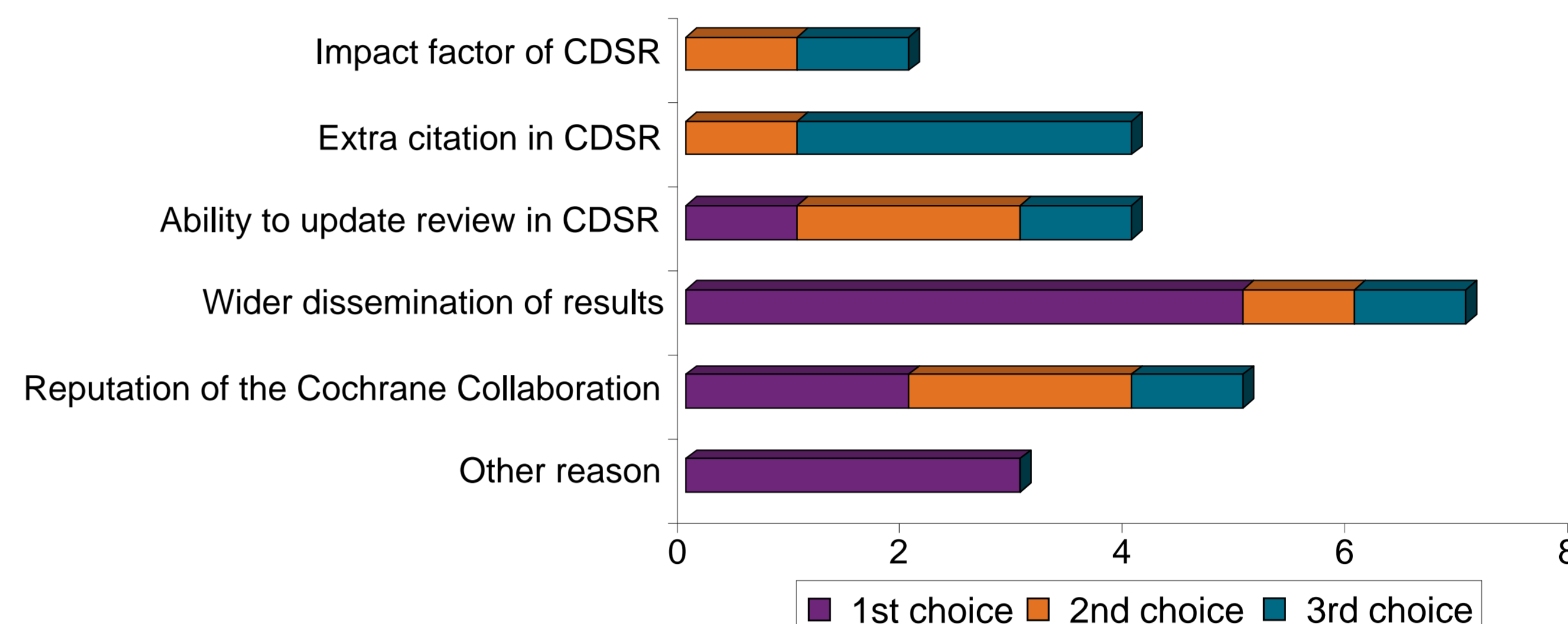
Main reasons for non-conversion were lack of time and/or resource and either being unaware that conversion was possible or not knowing how to convert.



Converting IPD reviews to Cochrane Reviews

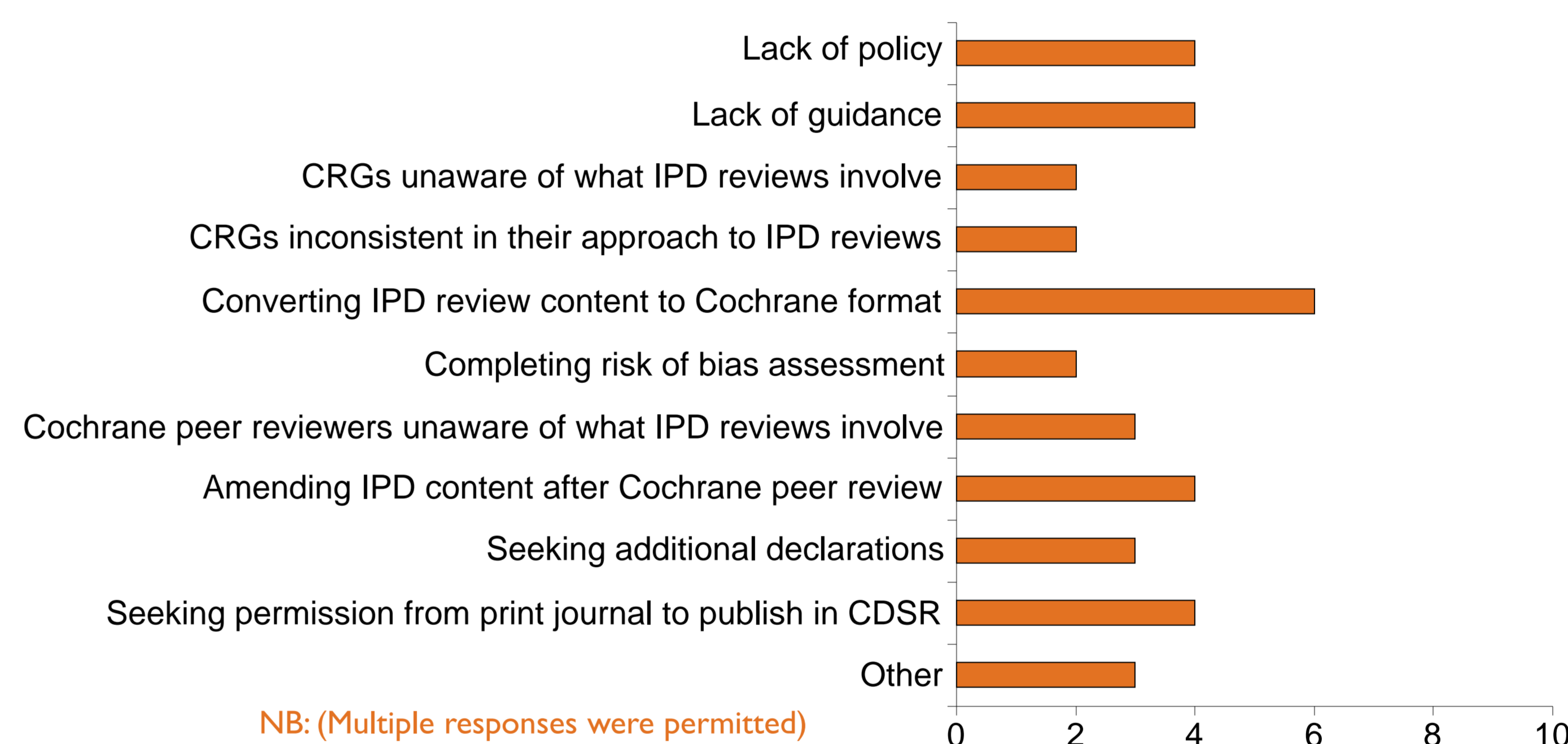
Reasons for converting IPD reviews to CDSR (11 respondents)

Respondents cited a variety of reasons for conversion with the main reason being the opportunity for wider dissemination of results.



Challenges and potential barriers to the conversion process (11 respondents)

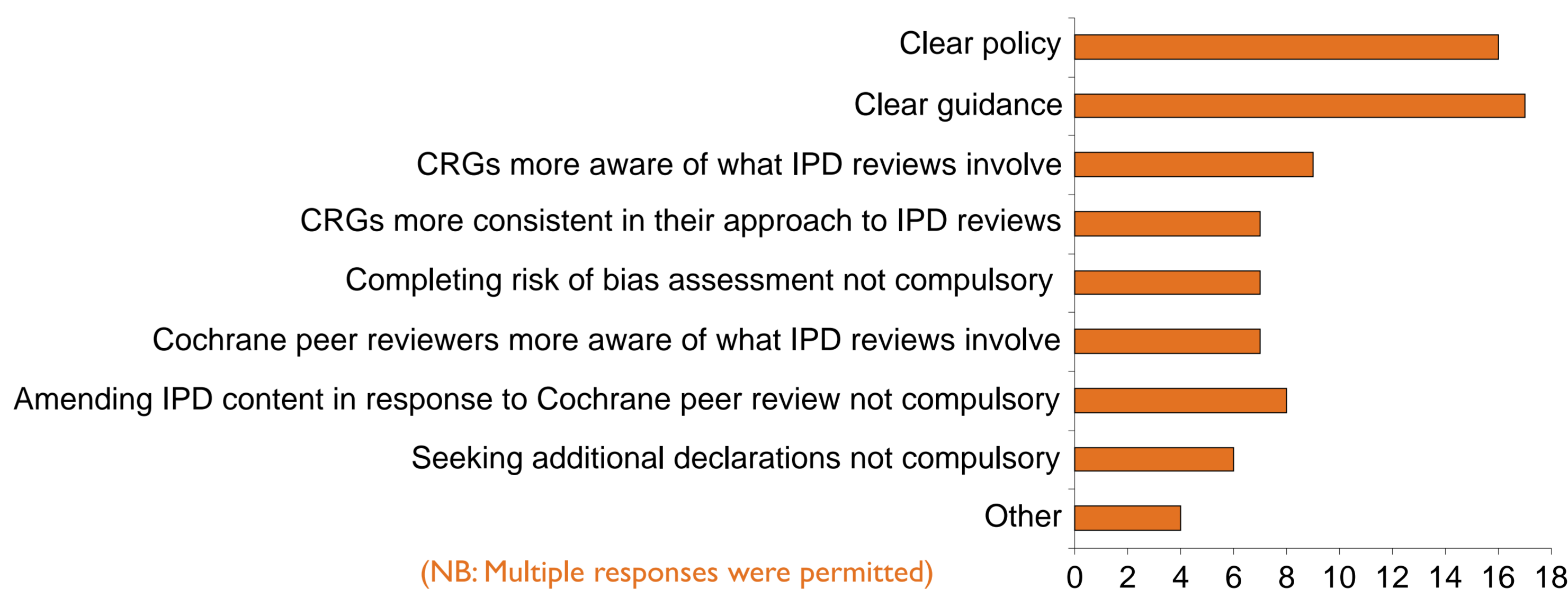
Over half (55%) of respondents who converted their IPD reviews experienced a variety of challenges, mainly citing difficulties in converting their reviews to the Cochrane format.



The future for conversion of IPD reviews to Cochrane Reviews

What would encourage conversion of IPD reviews (25 respondents)

Respondents mainly cited clear policy and guidance as ways in which they would be encouraged to convert their IPD reviews to Cochrane Reviews in future



Likelihood of converting IPD reviews to Cochrane Reviews in the future

11 respondents converted at least 1 IPD review; 14 respondents had not converted any reviews:

- 81% of those who had converted at least 1 IPD review thought it was likely or very likely that they would convert their future IPD reviews to Cochrane Reviews.
- 18% of those who had converted at least 1 IPD review didn't know, or thought it was unlikely they would convert in the future.

Conclusions

- If more IPD reviews were converted to Cochrane Reviews, this would increase the amount of high-quality evidence in CDSR and continue to ensure that it remains the best single source of reliable evidence about the effects of health care.
- It would reduce unnecessary duplication of effort, without many resource implications for CRGs.
- IPD authors would benefit from increased accessibility to their findings and more opportunities to update reviews as new data become available.
- Although challenges exist, those respondents who have been through the conversion process have not been deterred by these challenges from converting their IPD reviews in the future.
- Clear policy and guidance, together with a better understanding by CRGs and peer reviewers of both the IPD process and the time and resource involved could make conversion of IPD reviews a much more attractive prospect in the future.

Acknowledgements

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