

Swiss national license for the Cochrane Library

4th National gathering of Swiss medical librarians
Bern, September 9, 2016

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Trusted evidence.
Informed decisions.
Better health.



Overview

Why focussing on systematic reviews ?

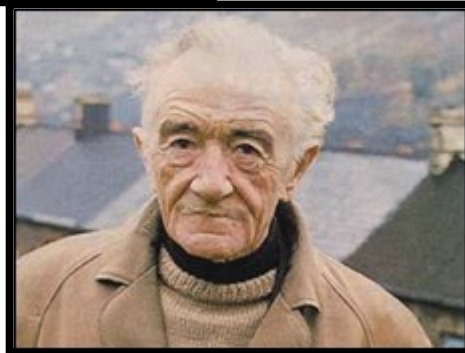
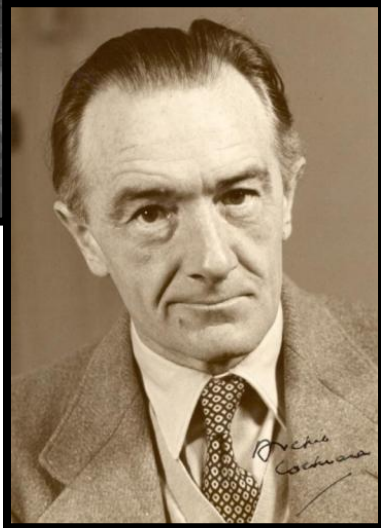
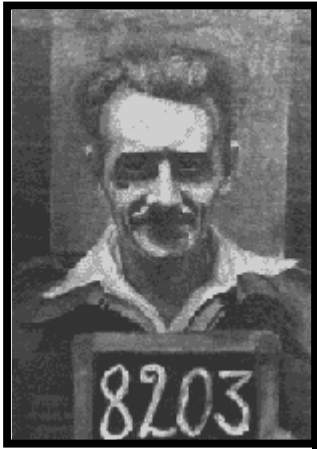
Cochrane & the Cochrane Library

Why do we need national licenses ?

Some preliminary data on usage

Outlook

Archie Cochrane



„It is surely a great criticism of our profession that we have not organised a **critical summary**, by specialty or subspecialty, adapted periodically, of all relevant randomised controlled trials.“

Cochrane 1979



Osborn

How can systematic reviews help?

- Effective method to make large amount of research data accessible
 - Less time to search original studies
 - Critical evaluation of included studies
- Allows exploring differences between studies
 - Heterogeneity
- Provides evidence base for decisions in health care
 - Unbiased selection of relevant information
 - Higher statistical precision / power due to larger number of participants (events) in pooled estimates
- Identify gaps and inform planning of future research



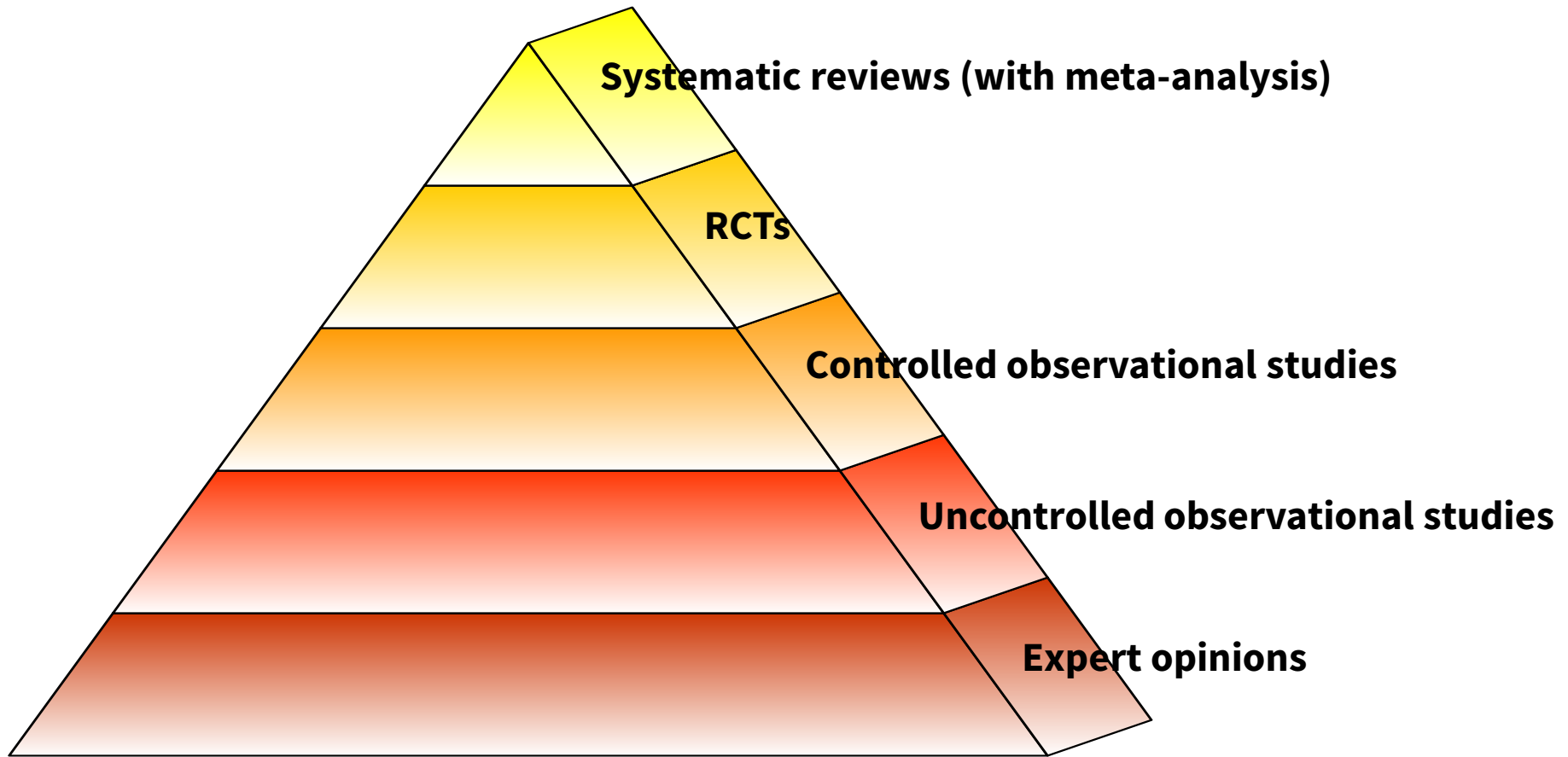
Features of systematic reviews

- Clearly formulated review question (e.g. PICO)
 - *a priori* defined inclusion criteria
- Detailed description of review methods (review protocol)
- Systematic literature search
 - Important role of librarians / information specialists
- Transparent assessment of study quality
- Standardised synthesis & presentation of results
 - Meta-analysis if possible

Conflicts of interest

- No commercial sponsoring of Cochrane Reviews
- Other sponsors (e.g. public) may not prevent or delay publication or interfere with independence of authors
- All potential conflicts of interest need to be declared:
 - Financial
 - Personal (e.g. authorship in included studies)

Hierarchy of evidence for benefit & harm of interventions



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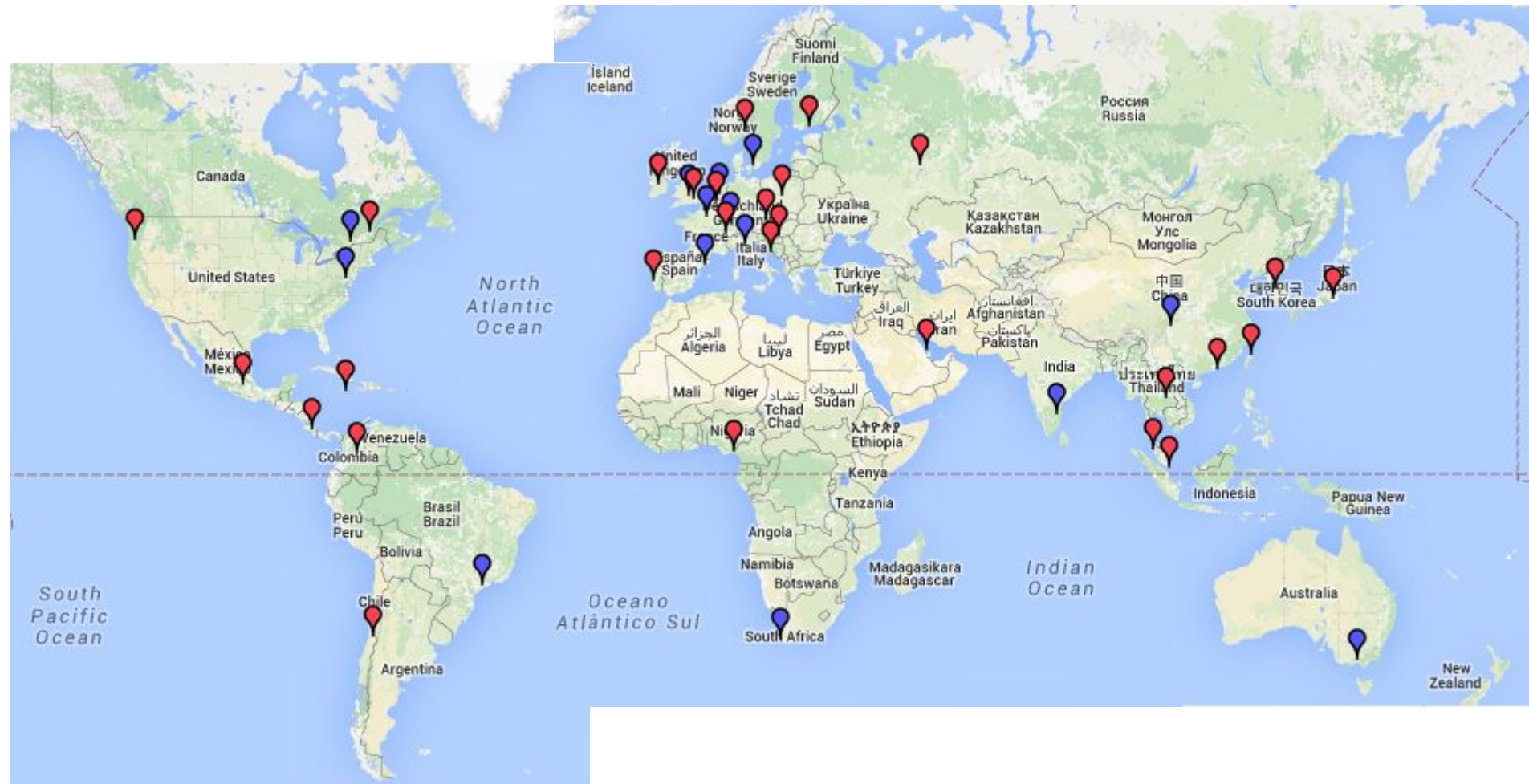
Some preliminary data on usage

Outlook

Cochrane – in brief

- **Structure** – founded 1993 in England as an international non-profit organisation; today a network with about 37'000 members
- **Goal** – provide independent high-quality information, so that decisions about healthcare can be made based on best available research evidence
- **How** – establishing, updating & disseminating systematic reviews
- **Main product** – Cochrane Library
www.cochranelibrary.com

Cochrane in the world



Cochrane Library

- >7000 completed Cochrane Reviews in ***Cochrane Database of Systematic Reviews (CDSR)***
- >2500 published protocols of Cochrane Reviews
- Cochrane Editorial Unit in London;
Editor-in-Chief: Dr. David Tovey
- Collaboration with publisher John Wiley & Sons Inc.
- Database CDSR is being updated monthly
- CDSR has an ISI Impact Factor (2015: 6.103)
- 5 additional databases

Cochrane Library includes 6 databases

Current record count for the Cochrane Library

Database	Total Records
Cochrane Database of Systematic Reviews A breakdown of CDSR content is available here	8,677
Cochrane Central Register of Controlled Trials	837,820
Cochrane Methodology Register	15,764
Database of Abstracts of Reviews of Effect	34,181
Health Technology Assessment Database	14,620
NHS Economic Evaluation Database	16,875
About The Cochrane Collaboration	81
Cochrane Editorials	96



Glue ear in children

Antibiotics for otitis media with effusion in children

[Read the review](#) →



Breast cancer chemotherapy test

[Read the editorial](#) →



World No Tobacco Day

[Read the Special Collection](#) →

Highlighted Reviews

Editorials

Special Collections

Biologic interventions for fatigue in rheumatoid arthritis

Celia Almeida, Ernest HS Choy, Sarah Hewlett, John R Kirwan, Fiona Cramp, Trudie Chalder, Jon Pollock, Robin Christensen

6 June 2016



Search

Search Manager

Medical Terms (MeSH)

Browse

To search an exact word(s) use quotation marks, e.g. "hospital" finds hospital; hospital (no quotation marks) finds hospital and hospitals; pay finds paid, pays, paying, payed)

[Add to top](#)

	Edit		#1	antibiotics		11657
	Edit		#2	child		88148
	Edit		#3	ear infection		719
		#4	#1 and #2 and #3			120

Clear Strategy[Search Help](#) Highlight orphan lines

Save strategy

Strategy Name

Save Strategy


Comments

Cochrane Database of Systematic Reviews : Issue 6 of 12, June 2016

Issue [updated daily](#) throughout month

There are **95** results from **9440** records for your search on **#4 - #1 and #2 and #3** in **Cochrane Reviews** in the strategy currently being edited


Pages **1 - 25** | **26 - 50** | **51 - 75** | **76 - 95**

Sort by Relevance: high to low 

Select all | Export all | Export selected

-  **Antibiotics** for acute otitis media in children
Roderick P Venekamp , Sharon L Sanders , Paul P Glasziou , Chris B Del Mar and Maroeska M Rovers
Online Publication Date: June 2015


[Ns](#) [Review](#)

-  **Antibiotic prophylaxis** in clean and clean-contaminated **ear** surgery
Hendrik P Verschuur , Wouter de Wever and Peter Paul van Benthem
Online Publication Date: July 2004


[Ns](#) [Review](#)

-  **Antibiotics** for otitis media with effusion in children
Roderick P Venekamp , Martin J Burton , Thijs MA van Dongen , Geert J van der Heijden , Alice van Zon and Anne GM Schilder
Online Publication Date: June 2016

[Ns](#) [Review](#)

-  **Topical antibiotics** without steroids for chronically discharging ears with underlying eardrum perforations
Carolyn A Macfadyen , Jose M Acuin and Carrol L Gamble
Online Publication Date: October 2005

[Review](#)

-  **Interventions** for the prevention of postoperative **ear** discharge after insertion of ventilation tubes (grommets) in children
Mohammed Iqbal Syed , Sharon Suller , George G Browning and Michael A Akeroyd
Online Publication Date: April 2013

[Review](#)

All Results (120)

Cochrane Reviews (95)

All

Review

Protocol

Other Reviews (1)

Trials (22)

Methods Studies (0)

Technology Assessments (0)

Economic Evaluations (0)

Cochrane Groups (2)

All

Current Issue

Me Methodology

Dx Diagnostic

Ov Overview

Pg Prognosis

Qu Qualitative

Cc Conclusions changed

Ns New search

Mc Major change

Up Update

Wd Withdrawn

Cm Comment



↵ Go to old article view

Cochrane Database of Systematic Reviews

Antibiotics for otitis media with effusion in children

New search

Review

Intervention

Roderick P Venekamp , Martin J Burton, Thijs MA van Dongen, Geert J van der Heijden, Alice van Zon, Anne GM Schilder

First published: 12 June 2016


Assessed as up-to-date: 14 April 2016

Editorial Group: [Cochrane ENT Group](#)

DOI: 10.1002/14651858.CD009163.pub3 [View/save citation](#)

Cited by: 0 articles [Check for new citations](#)

 score { 9

 Text size



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Comment

- Abstract
- Summary of findings
- Background
- Objectives
- Methods
- Results
- Discussion
- Authors' conclusions
- Acknowledgements
- Data and analyses
- Appendices
- What's new
- Contributions of authors
- Declarations of interest

Abstract

Background

Provide feedback or get help



PDF



Info



References



Figures



Tables



**Cochrane
Library**

Cochrane Database of Systematic Reviews

Antibiotics for otitis media with effusion in children (Review)

Venekamp RP, Burton MJ, van Dongen TMA, van der Heijden GJ, van Zon A, Schilder AGM

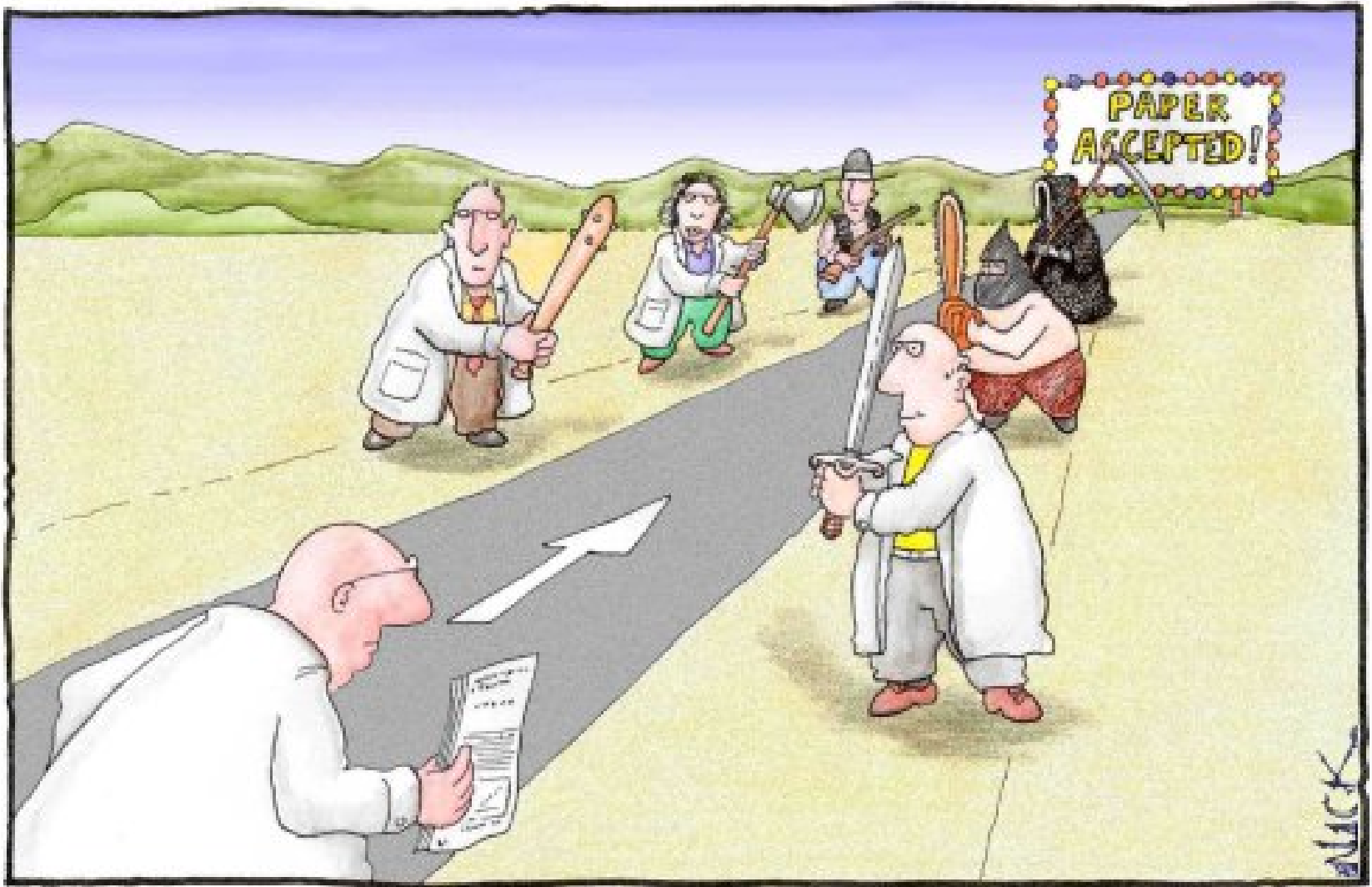
Venekamp RP, Burton MJ, van Dongen TMA, van der Heijden GJ, van Zon A, Schilder AGM.

Antibiotics for otitis media with effusion in children.

Cochrane Database of Systematic Reviews 2016, Issue 6. Art. No.: CD009163.

DOI: 10.1002/14651858.CD009163.pub3.

www.cochranelibrary.com



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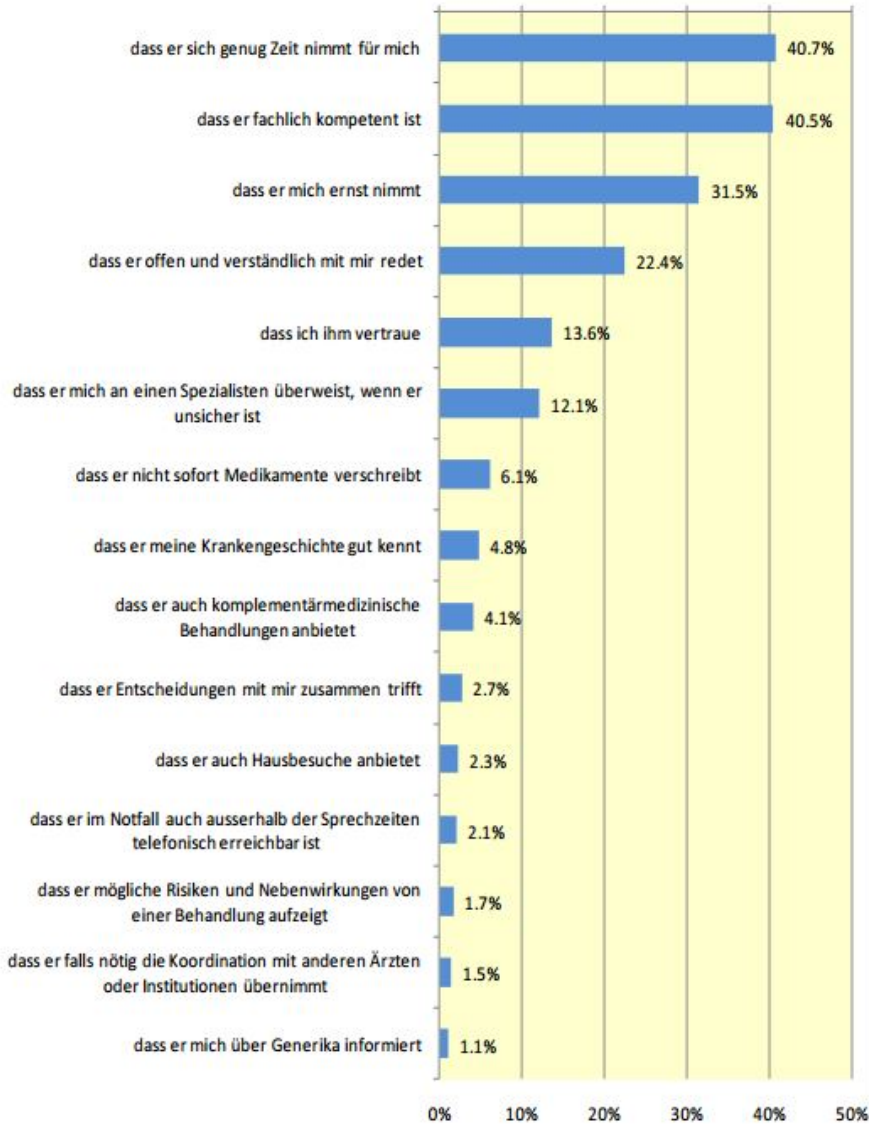
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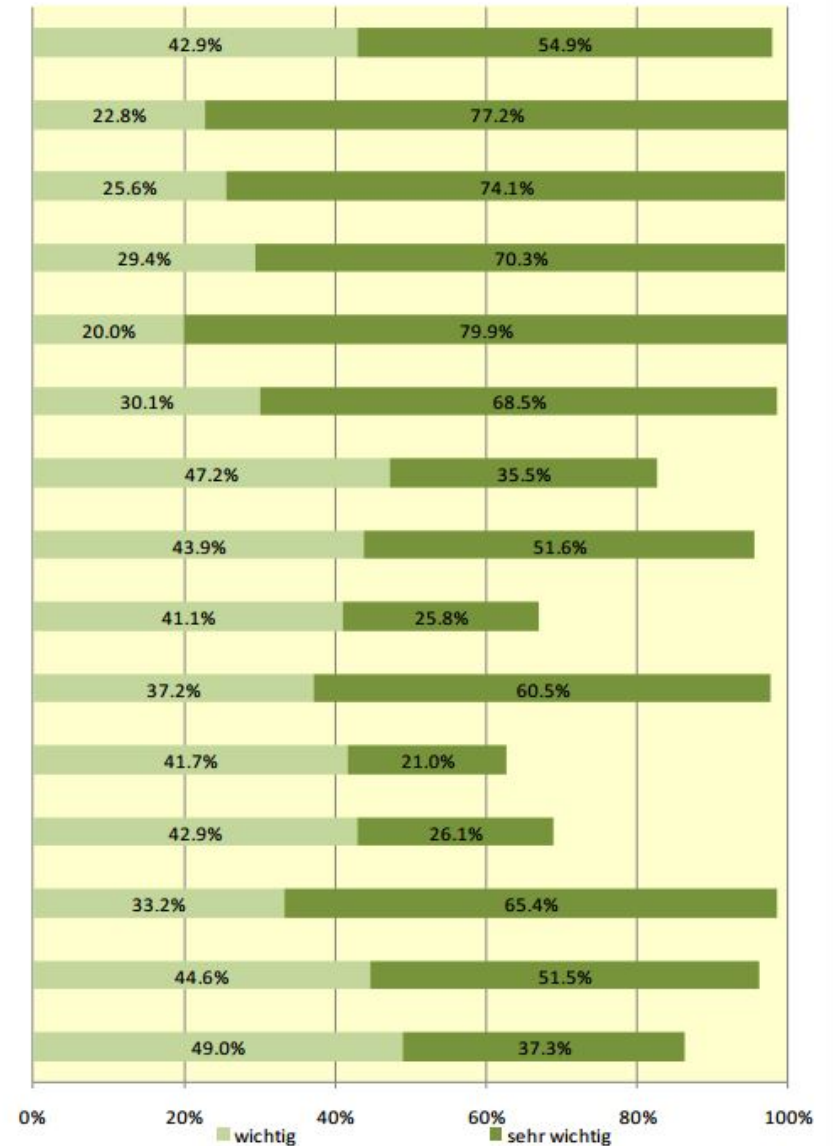
Outlook

Abbildung 21: Was macht einen guten Hausarzt aus? (I)

Offene Frage



Geschlossene Frage



RESEARCH ARTICLE

Open Access



Swiss family physicians' perceptions and attitudes towards knowledge translation practices

Theresa Bengough^{1,2}, Emilie Bovet^{2,3}, Camille Bécherraz^{2,3}, Susanne Schlegel^{2,4}, Bernard Burnand^{2*} and Vincent Pidoux^{2,5}

Qualitative research incl. focus groups with GPs in German / French speaking part of Switzerland (2012/13)

Access to medical literature

- Most health professionals have access during their studies e.g. through university libraries
 - Medical journals (national / international)
 - Electronic databases (e.g. Up-To-Date, Cochrane Library)
- When leaving academia for smaller hospitals or private practice lack of time & funds
 - Trade-offs when considering paying for individual licences
- Loss of habit (interest?) to read high-quality literature
 - Perception of disconnect with 'real world' problems of practitioners

Consortium to fund national license for Cochrane Library 2016 - 2020

**Lead: Swiss Academy of Medical Sciences (SAMW / ASSM)
part of longstanding initiative to improve access to medical literature**

Partners:

Federal Office of Public Health (BAG)

Bibliothek SoH Solothurner Spitaler, Olten

**Bibliothequ cantonale et universitaire
Lausanne**

Bibliothequ de l'Universite de Geneve

Ente Ospedaliero Cantonale Bellinzona

ETH-Bibliothek Zurich

**Fachhochschulen Koordinationsstelle
Konsortium**

Kantonsspital Winterthur

Schweizer Paraplegikerzentrum

Universitatsbibliothek Basel

Universitatsbibliothek Bern

Universitatsbibliothek Zurich

Zentral- und Hochschulbibliothek Luzern

«Cochrane Library» – Wissen für die, die es wissen wollen

Aktualisiert am Montag, 30. Mai 2016, 11:18 Uhr
Sarah Allemann

Wer Antworten auf medizinisch schnell fündig. Aber was sind die wert? Die renommierte Datenbank Fels im Datenmeer in Zukunft a



Was bringt die Cochrane-Library
medizinischen Laien?

7:14 min, aus Puls vom 25.1.2016



Kontinuierliche unterstützende Betreuung für Frauen während des Geburtsprozesses

Veröffentlicht:

15. Juli 2013

Autoren:

Hodnett ED, Gates S, Hofmeyr GJ,
Sakala C

Verantwortliche Cochrane

Review Gruppe:

Pregnancy and Childbirth Group

Engl. Volltext lesen in der
Cochrane Library



Weiterleiten



Drucken



Referenz



Die kontinuierliche Betreuung während des Geburtsprozesses erhöhte die Wahrscheinlichkeit einer spontanen vaginalen Geburt, zeigte keine schädliche Wirkung und die Frauen waren zufriedener.

Geschichtlich betrachtet wurden Frauen während der Wehen des Geburtsprozesses schon immer von anderen Frauen begleitet und unterstützt. In vielen Ländern ist eine kontinuierliche Betreuung während des Geburtsprozesses jedoch zur Ausnahme statt zur Regel geworden, da mehr Frauen ihr Kind im Krankenhaus statt zu Hause gebären. Dies könnte zur Technisierung der Geburtserfahrungen von Frauen beitragen. Moderne geburtshilfliche Betreuung setzt Frauen häufig institutionellen Routinen aus, welche möglicherweise negative Auswirkungen auf den Geburtsprozess haben. Unterstützende Betreuung während des Geburtsprozesses kann emotionale Unterstützung, Maßnahmen zum Wohlbefinden, Informationen und Fürsprache für die Frau beinhalten. Diese Aktivitäten können die physiologischen Geburtsprozesse sowie das Gefühl der Frau, die Kontrolle zu behalten und kompetent zu sein, verbessern und somit die Notwendigkeit von geburtshilflichen Interventionen verringern. Der Review beinhaltet 23 Studien (22 enthielten Daten) aus 16 Ländern mit mehr als 15.000 Frauen, aus sehr unterschiedlichen Einrichtungen und Situationen. Die kontinuierliche Betreuung wurde entweder vom Krankenhauspersonal (z.B. Krankenschwestern oder Hebammen) geleistet, von Frauen, die nicht zum Krankenhauspersonal gehörten und keine persönliche Beziehung zu der gebärenden Frau hatten (z.B. Doulas oder Frauen, die einen gewissen Leitfaden zur Betreuung hatten), oder von einer Begleitung der Frau, die sie selbst aus ihrem sozialen Netzwerk gewählt hatte (z.B. der Ehemann, der Partner, die Mutter oder Freundin). Für Frauen, die eine kontinuierliche Geburtsunterstützung erhielten, war es wahrscheinlicher „spontan“ zu gebären, das heißt ohne Kaiserschnitt und ohne Sauglocke oder Zange. Außerdem hatten diese Frauen eine geringere



74

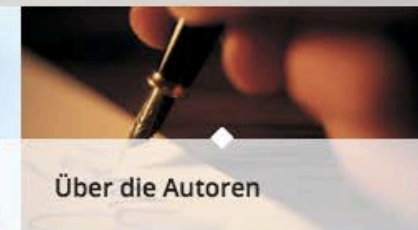
Wer redet über diesen Review?



Wie kann ein Cochrane Review weiterhelfen?

Seit 20 Jahren erstellt Cochrane systematische Reviews, in denen die Forschungsergebnisse zu Fragen der Gesundheitsversorgung und -politik zusammengefasst werden. Diese Reviews sind international als Qualitätsstandard in der evidenzbasierten Gesundheitsversorgung anerkannt.

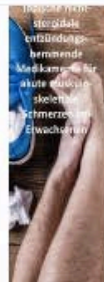
Weiterlesen...



Topische (lokal angewandte) nicht-steroidale entzündungshemmende Medikamente vermindern wirksam und mit wenigen Nebenwirkungen akute Schmerzen am Bewegungsapparat bei Erwachsenen. Gel-Präparate mit Diclofenac, Ibuprofen und Ketoprofen ergeben die besten Resultate. Sie sind eine sichere Alternative zu oralen (über den Mund eingenommenen) Medikamenten.



Aktualisierter Cochrane Review, 61 Studien, >8300 Erwachsene.



MEHR VON COCHRANE

Cochrane kompakt
medizin-transparent.at

KATEGORIEN

Allgemein

Overview

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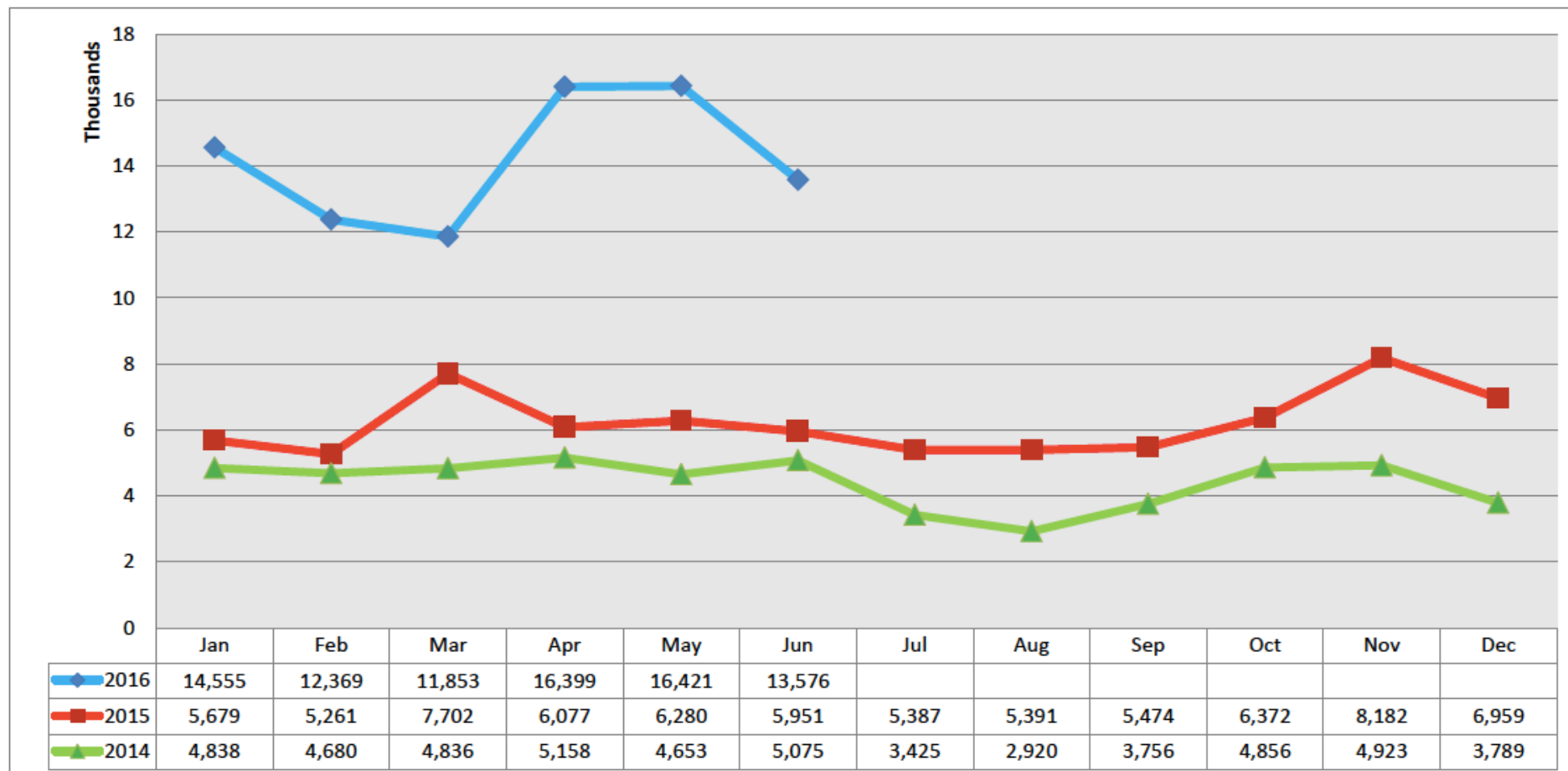
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Outlook

Cochrane Library usage in Switzerland (1)

FULL TEXT DOWNLOADS



46,396 full text downloads of articles from the Cochrane Library were recorded on Wiley Online Library in Q2 2016; this figure is 153% higher than the same time period in 2015.

Cochrane Library usage in Switzerland (2)

Rank	Country	Full text downloads
1	England	476,134
2	Australia	341,550
3	Switzerland	46,396
4	New Zealand	43,955
5	Norway	38,166
6	India	37,566
7	Ireland	33,937
8	Denmark	30,481
9	Scotland	19,312
10	Egypt	11,700
11	Wales	11,065

Countries with Cochrane Library national license; Ranking by total number of full text downloads, Q2 2016

Source: Wiley & Sons Inc.

Cochrane Library usage in Switzer- land (3)

Review Title	Authors	Topic
Interventions for preventing falls in older people living in the community	Lesley D Gillespie et al	Orthopaedics & trauma
Maternal dietary antigen avoidance during pregnancy or lactation, or both, for preventing or treating atopic disease in the child	Michael S Kramer et al	Pregnancy & childbirth
Surgical versus conservative interventions for treating anterior cruciate ligament injuries	A Paul Monk et al	Rheumatology
Yoga for asthma	Zu-Yao Yang et al	Complementary & alternative medicine
Preventing occupational stress in healthcare workers	Jani H Ruotsalainen et al	Mental health
Interventions for improving upper limb function after stroke	Alex Pollock et al	Neurology
Interprofessional collaboration: effects of practice-based interventions on professional practice and healthcare outcomes	Merrick Zwarenstein et al	Effective practice & health systems
Interventions for preventing delirium in hospitalised non-ICU patients	Najma Siddiqi et al	Mental health
Recombinant versus urinary human chorionic gonadotrophin for final oocyte maturation triggering in IVF and ICSI cycles	Mohamed A Youssef et al	Gynaecology
Electromechanical and robot-assisted arm training for improving activities of daily living, arm function, and arm muscle strength after stroke	Jan Mehrholz et al	Neurology

Cochrane Reviews most
accessed in Switzerland;
Q2 2016

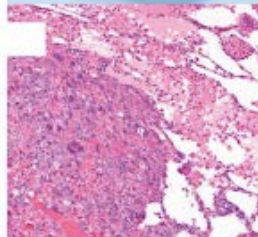
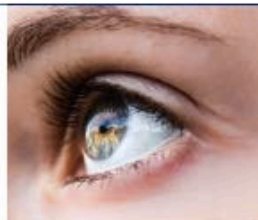
Source: Wiley & Sons Inc.

The Cochrane Library Reference Guide

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During the past 20 years, Cochrane has helped to transform the way health decisions are made. Cochrane produces reviews that summarize the best available evidence generated through research to inform decisions about health. Switzerland now has access to the Cochrane Library FREE thanks to funding from SAMS and the Federal Office of Public Health plus other supporting institutions.

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There are several options to browse and search the Cochrane Library. You can browse by topic or by Cochrane Review Group from the homepage, conduct a simple search or use the Advanced Search link to search by MeSH terms or to edit and combine searches.



Type a search term directly into the box, or select one of the advanced options to conduct a search, access saved searches, or search by MeSH

Get more information on how to use the Cochrane Library, including search guides

Quick links to read Cochrane Library «Editorials», «Highlighted Reviews», or «Special Collections»

Scroll down on the homepage to browse by topic or Review Group

The Cochrane Library offers additional resources including CENTRAL, DARE, CMR and HTA

Cochrane Reviews are systematic reviews of primary research in human health care and health policy, and are internationally recognized as the highest standard in evidence-based health care. They investigate the effects of interventions for prevention, treatment, and rehabilitation. They can also assess the accuracy of a diagnostic test for a given condition in a specific patient group and setting.



SAMS Swiss Academy of Medical Sciences



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Products: National Licences

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Mandated by **swissuniversities**

All persons resident in Switzerland are authorized to access content of Swiss National Licences. Access for **private individuals** is expected to launch in autumn 2016.

In order to secure a highly relevant and versatile National Licence portfolio, the project selected well-established scientific publishers. The National Licences realized within the first negotiation phase 2015/2016 are the complete Journal Archives of Cambridge University Press (CUP), De Gruyter and Oxford University Press (OUP). The licensed volumes are given in the product information.

+ CAMBRIDGE UNIVERSITY PRESS

+ DE GRUYTER

+ OXFORD UNIVERSITY PRESS

National license vs. Open Access (OA)

- Green OA: Cochrane Reviews are freely available 12 months after publication (since Feb 2013)
- Gold OA with immediate access (but expensive for authors)
- From 2020 whole Cochrane Library should become open access
- National license model differs from OA
 - It needs a funder with a mid- / long-term commitment
 - Decision made by users (or in their interest) rather than by producers (e.g. authors)
 - Both models are complementary



Open access, readership, citations: a randomized controlled trial of scientific journal publishing

Philip M. Davis¹

Department of Communication, Cornell University, Ithaca, New York, USA

ABSTRACT Does free access to journal articles result in greater diffusion of scientific knowledge? Using a randomized controlled trial of open access publishing, involving 36 participating journals in the sciences, social sciences, and humanities, we report on the effects of free access on article downloads and citations. Articles placed in the open access condition ($n=712$) received significantly more downloads and reached a broader audience within the first year, yet were cited no more frequently, nor earlier, than subscription-access control articles ($n=2533$) within 3 yr.

These results may be explained by social stratification, a process that concentrates scientific authors at a small number of elite research universities with excellent access to the scientific literature. The real beneficiaries of open access publishing may not be the research community but communities of practice that consume, but rarely contribute to, the corpus of literature.—Davis, P. M. Open access, readership, citations: a randomized controlled trial of scientific journal publishing. *FASEB J.* 25, 000–000 (2011). www.fasebj.org

did, however, receive more downloads from a broader group of readers.

The purpose of this study is to isolate and quantify the effects of open access publishing on article readership and citations. We extend our prior study (14, 15) to include a total of 36 academic journals covering the biological, medical, and multidisciplinary sciences, social sciences, and humanities.

MATERIALS AND METHODS

There are 3245 research articles and reviews published in 36 journals covering the sciences, social sciences, and humanities that form our study group. These 36 journals (listed in Table 1) are produced by 7 separate publishers but hosted on the same online platform (HighWire Press; <http://highwire.stanford.edu>), ensuring comparative analysis. Prior work indicates that online publishing platforms exert independent effects on article downloads (16) and article citations (13). Our data set includes 1619 articles published in 11 physiology journals, the readership and citation results of which were

Health professionals make choices...(1)

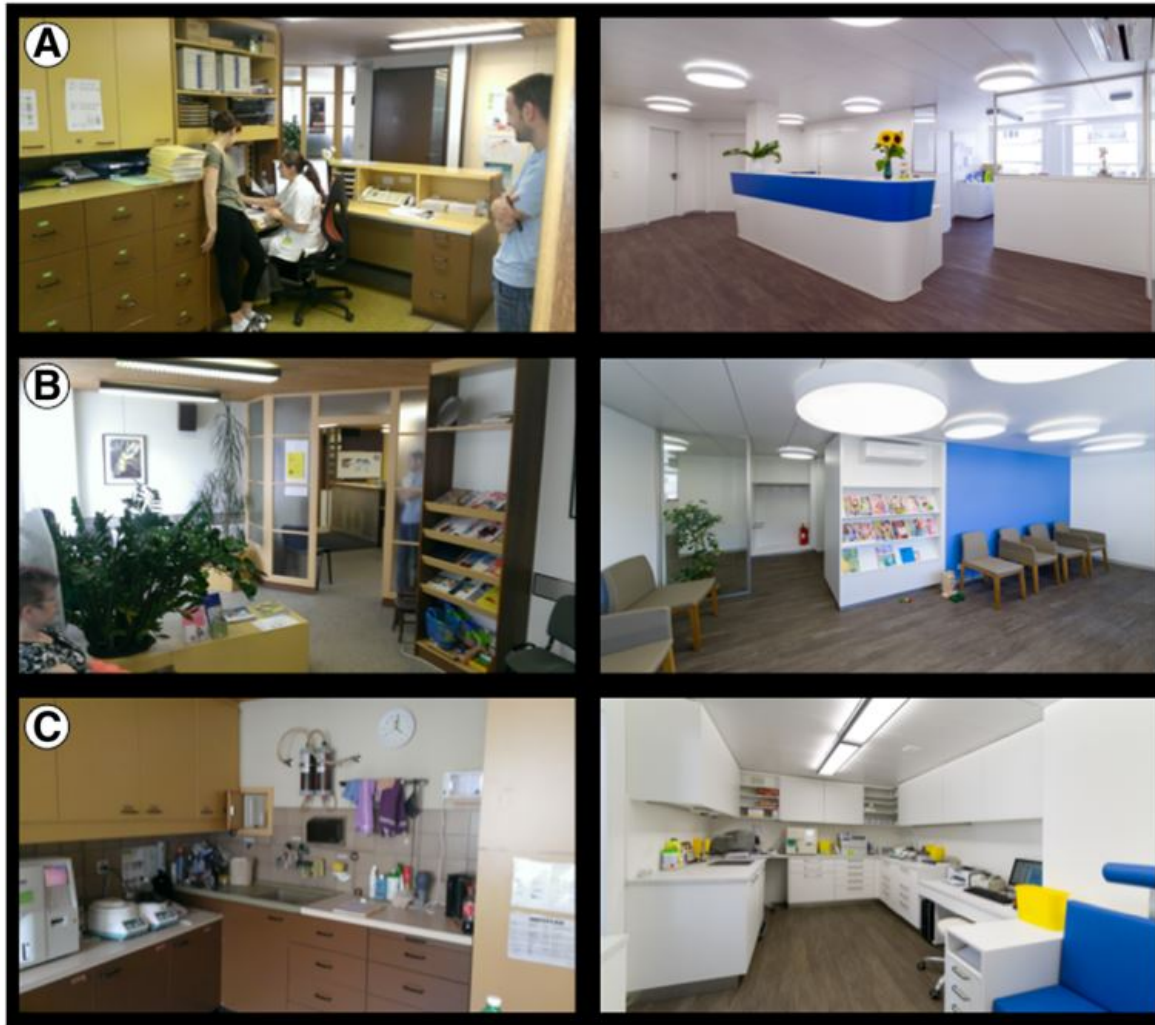


Fig. 1 Panels **a**, **b**, and **c** display the GP office before (left side) and after renovation (right side). **a** reception, **b** waiting room, **c** laboratory. We received consent to publish the pictures from all people on **(a)**

Health professionals make choices...(2)

Survey of patients in waiting room before & after renovation

Table 1 Domains of quality indicators selected to measure patient satisfaction

Domains	Quality indicators	
Appearance of the office	1	Appearance of the facility
	2	Diagnostic equipment
	3	Level of hygiene
	4	Punctuality and dependability
	5	Prompt response to patient needs
Qualities of the medical assistant	6	Dress and grooming of the medical assistants
	7	Friendliness and courtesy of the medical assistants
Qualities of the general practitioner	8	GP is attentive and responsive to patient's needs
	9	GP's level of expertise
	10	GP's level of empathy
General satisfaction	11	Medical performance of the office
	12	Overall satisfaction with the office

Health professionals make choices...(3)

Tièche et al. *BMC Health Services Research* (2016) 16:373
DOI 10.1186/s12913-016-1647-4

BMC Health Services Research

RESEARCH ARTICLE

Open Access

Patient satisfaction is biased by renovations to the interior of a primary care office: a pretest-posttest assessment



Raphaël Tièche¹, Bruno R. da Costa² and Sven Streit^{2*} 

Health professionals make choices...(4)

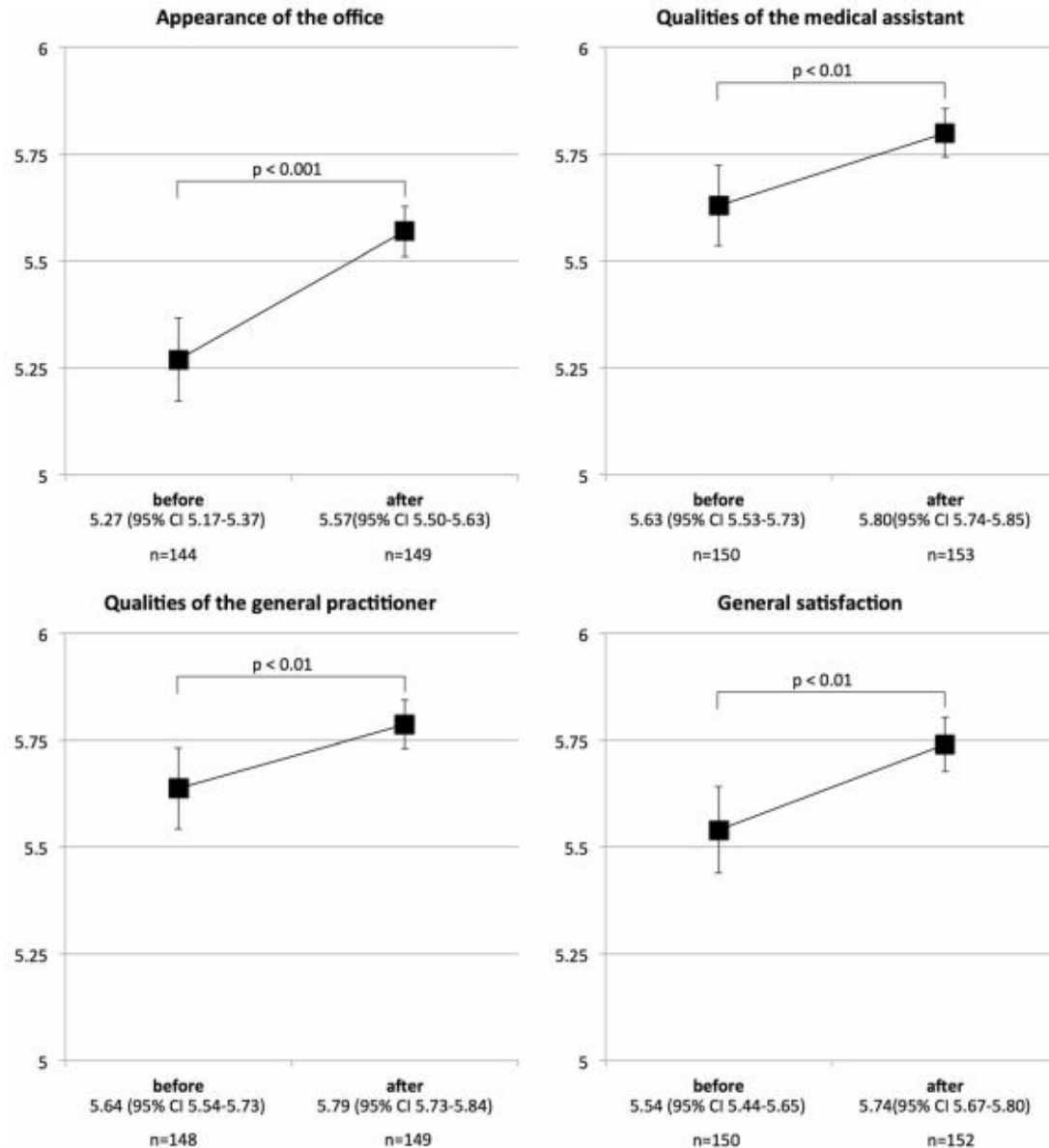


Fig. 2 Patient satisfaction per domain before and after renovation

Many thanks!

Website: <http://swiss.cochrane.org>

Email: swiss.cochrane@chuv.ch

Cochrane Blog in German:
www.wissenwaswirkt.org

Twitter: [@CochraneSuisse](https://twitter.com/CochraneSuisse)

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