Cochrane Training

Trusted evidence.
Informed decisions.
Better health.

MECIR Boxes and Tables in Chapter 4

4.3 Sources to search #section-4-3

MECIR Box 4.3.a Relevant expectations for conduct of intervention reviews

C19: Planning the search (**Mandatory**)

Plan in advance the methods to be used for identifying studies. Design searches to capture as many studies as possible that meet the eligibility criteria, ensuring that relevant time periods and sources are covered and not restricted by language or publication status.	Searches should be motivated directly by the eligibility criteria for the review, and it is important that all types of eligible studies are considered when planning the search. If searches are restricted by publication status or by language of publication, there is a possibility of publication bias, or language bias (whereby the language of publication is selected in a way that depends on the findings of the study), or both. Removing language restrictions in English language databases is not a good substitute for searching non-English language journals and databases.

C24: Searching general bibliographic databases and CENTRAL (**Mandatory**)

Search the Cochrane Review Group's (CRG's) Specialized Register (internally, e.g. via the Cochrane Register of Studies, or externally via CENTRAL). Ensure that CENTRAL, MEDLINE and Embase (if Embase is available to either the CRG or the review author), have been searched (either for the review or for the Review Group's Specialized Register).	Searches for studies should be as extensive as possible in order to reduce the risk of publication bias and to identify as much relevant evidence as possible. The minimum databases to be covered are the CRG's Specialized Register (if it exists and was designed to support reviews in this way), CENTRAL, MEDLINE and Embase (if Embase is available to either the CRG or the review author). Expertise may be required to avoid unnecessary duplication of effort. Some, but not all, reports of eligible studies from MEDLINE, Embase and the CRGs' Specialized Registers are already included in CENTRAL.

MECIR Box 4.3.b Relevant expectations for conduct of intervention reviews

C25: Searching specialist bibliographic databases (**Highly desirable**)

Search appropriate national, regional and subject-specific bibliographic databases.	Searches for studies should be as extensive as possible in order to reduce the risk of publication bias and to identify as much relevant evidence as possible. Databases relevant to the review topic should be covered (e.g. CINAHL for nursing-related topics, PsycINFO for psychological interventions), and regional databases (e.g. LILACS) should be considered.

MECIR Box 4.3.c Relevant expectations for conduct of intervention reviews

C31: Searching by contacting relevant individuals and organizations (**Highly desirable**)

Contact relevant individuals and organizations for information about unpublished or ongoing studies.	Searches for studies should be as extensive as possible in order to reduce the risk of publication bias and to identify as much relevant evidence as possible. It is important to identify ongoing studies, so that these can be assessed for possible inclusion when a review is updated.

MECIR Box 4.3.d Relevant expectations for conduct of intervention reviews

C27: Searching trials registers (**Mandatory**)

Search trials registers and repositories of results, where relevant to the topic, through ClinicalTrials.gov, the WHO International Clinical Trials Registry Platform (ICTRP) portal and other sources as appropriate.	Searches for studies should be as extensive as possible in order to reduce the risk of publication bias and to identify as much relevant evidence as possible. Although ClinicalTrials.gov is included as one of the registers within the WHO ICTRP portal, it is recommended that both ClinicalTrials.gov and the ICTRP portal are searched separately due to additional features in ClinicalTrials.gov.

MECIR Box 4.3.e Relevant expectations for conduct of intervention reviews

C28: Searching for grey literature (**Highly desirable**)

Search relevant grey literature sources such as reports, dissertations, theses, databases and databases of conference abstracts.	Searches for studies should be as extensive as possible in order to reduce the risk of publication bias and to identify as much relevant evidence as possible.

C29: Searching within other reviews (**Highly desirable**)

Search within previous reviews on the same topic.	Searches for studies should be as extensive as possible in order to reduce the risk of publication bias and to identify as much relevant evidence as possible.

C30: Searching reference lists (**Mandatory**)

Check reference lists in included studies and any relevant systematic reviews identified.	Searches for studies should be as extensive as possible in order to reduce the risk of publication bias and to identify as much relevant evidence as possible.

4.4 Designing search strategies #section-4-4

MECIR Box 4.4.a Relevant expectations for conduct of intervention reviews

C26: Searching for different types of evidence (**Mandatory**)

If the review has specific eligibility criteria around study design to address adverse effects, economic issues or qualitative research questions, undertake searches to address them.	Sometimes different searches will be conducted for different types of evidence, such as for non-randomized studies for addressing adverse effects, or for economic evaluation studies.

MECIR Box 4.4.b Relevant expectations for conduct of intervention reviews

C32: Structuring search strategies for bibliographic databases (**Mandatory**)

Inform the structure of search strategies in bibliographic databases around the main concepts of the review, using appropriate elements from PICO and study design. In structuring the search, maximize sensitivity whilst striving for reasonable precision. Ensure correct use of the 'AND' and 'OR' operators.	Inappropriate or inadequate search strategies may fail to identify records that are included in bibliographic databases. Expertise may need to be sought, in particular from the CRG's Information Specialist. The structure of a search strategy should be based on the main concepts being examined in a review. In general databases, such as MEDLINE, a search strategy to identify studies for a Cochrane Review will typically have three sets of terms: (i) terms to search for the health condition of interest, i.e. the population; (ii) terms to search for the intervention(s) evaluated; and (iii) terms to search for the types of study design to be included (typically a 'filter' for randomized trials). There are exceptions, however. For instance, for reviews of complex interventions, it may be necessary to search only for the population or the intervention. Within each concept, terms are joined together with the Boolean 'OR' operator, and the concepts are combined with the Boolean 'AND' operator. The 'NOT' operator should be avoided where possible to avoid the danger of inadvertently removing records that are relevant from the search set.

Table 4.4.a Sensitivity and precision of a search

	Reports retrieved	**Reports not retrieved**
Relevant reports	Relevant reports retrieved (a)	Relevant reports not retrieved (b)
Irrelevant reports	Irrelevant reports retrieved (c)	Irrelevant reports not retrieved (d)

Sensitivity: fraction of relevant reports retrieved from all relevant reports (a/(a+b))
Precision: fraction of relevant reports retrieved from all reports retrieved (a/(a+c))

MECIR Box 4.4.c Relevant expectations for conduct of intervention reviews

C33: Developing search strategies for bibliographic databases (**Mandatory**)

Identify appropriate controlled vocabulary (e.g. MeSH, Emtree, including 'exploded' terms) and free-text terms (considering, for example, spelling variants, synonyms, acronyms, truncation and proximity operators).	Inappropriate or inadequate search strategies may fail to identify records that are included in bibliographic databases. Search strategies need to be customized for each database. It is important that MeSH terms are 'exploded' wherever appropriate, in order not to miss relevant articles. The same principle applies to Emtree when searching Embase and also to a number of other databases. The controlled vocabulary search terms for MEDLINE and Embase are not identical, and neither is the approach to indexing. In order to be as comprehensive as possible, it is necessary to include a wide range of free-text terms for each of the concepts selected. This might include the use of truncation and wildcards. Developing a search strategy is an iterative process in which the terms that are used are modified, based on what has already been retrieved.

MECIR Box 4.4.d Relevant expectations for conduct of intervention reviews

C35: Restricting database searches (**Mandatory**)

Justify the use of any restrictions in the search strategy on publication date and publication format.	Date restrictions in the search should only be used when there are date restrictions in the eligibility criteria for studies. They should be applied only if it is known that relevant studies could only have been reported during a specific time period, for example if the intervention was only available after a certain time point. Searches for updates to reviews might naturally be restricted by date of entry into the database (rather than date of publication) to avoid duplication of effort. Publication format restrictions (e.g. exclusion of letters) should generally not be used in Cochrane Reviews, since any information about an eligible study may be of value.

MECIR Box 4.4.e Relevant expectations for conduct of intervention reviews

C48: Examining errata (**Mandatory**)

Examine any relevant retraction statements and errata for information.	Some studies may have been found to be fraudulent or may have been retracted since publication for other reasons. Errata can reveal important limitations, or even fatal flaws, in included studies. All of these may lead to the potential exclusion of a study from a review or meta-analysis. Care should be taken to ensure that this information is retrieved in all database searches by downloading the appropriate fields, together with the citation data.

MECIR Box 4.4.f Relevant expectations for conduct of intervention reviews

C34: Using search filters (**Highly desirable**)	
Use specially designed and tested search filters where appropriate including the Cochrane Highly Sensitive Search Strategies for identifying randomized trials in MEDLINE, but do not use filters in pre-filtered databases e.g. do not use a randomized trial filter in CENTRAL or a systematic review filter in DARE.	Inappropriate or inadequate search strategies may fail to identify records that are included in bibliographic databases. Search filters should be used with caution. They should be assessed not only for the reliability of their development and reported performance, but also for their current accuracy, relevance and effectiveness given the frequent interface and indexing changes affecting databases.

MECIR Box 4.4.g Relevant expectations for conduct of intervention reviews

C37: Rerunning searches (**Mandatory**)	
Rerun or update searches for all relevant databases within 12 months before publication of the review or review update, and screen the results for potentially eligible studies.	The published review should be as up to date as possible. The search must be rerun close to publication, if the initial search date is more than 12 months (preferably six months) from the intended publication date, and the results screened for potentially eligible studies. Ideally, the studies should be incorporated fully in the review. If not, then the potentially eligible studies will need to be reported, at a minimum as a reference under 'Studies awaiting classification' (or 'Ongoing studies' if they have not yet completed).
C38: Incorporating findings from rerun searches (**Highly desirable**)	
Fully incorporate any studies identified in the rerun or update of the search within 12 months before publication of the review or review update.	The published review should be as up to date as possible. After the rerun of the search, the decision whether to incorporate any new studies fully into the review will need to be balanced against the delay in publication.

4.5 Documenting and reporting the search process #section-4-5

MECIR Box 4.5.a Relevant expectations for conduct of intervention reviews

C36: Documenting the search process (**Mandatory**)	
Document the search process in enough detail to ensure that it can be reported correctly in the review.	The search process (including the sources searched, when, by whom, and using which terms) needs to be documented in enough detail throughout the process to ensure that it can be reported correctly in the review, to the extent that all the searches of all the databases are reproducible.

4.6 Selecting studies #section-4-6

MECIR Box 4.6.a Relevant expectations for conduct of intervention reviews

C42: Collating multiple reports (**Mandatory**)	
Collate multiple reports of the same study, so that each study, rather than each report, is the unit of interest in the review.	It is wrong to consider multiple reports of the same study as if they are multiple studies. Secondary reports of a study should not be discarded, however, since they may contain valuable information about the design and conduct. Review authors must choose and justify which report to use as a source for study results.

MECIR Box 4.6.b Relevant expectations for conduct of intervention reviews

C40: Excluding studies without useable data (**Mandatory**)	
Include studies in the review irrespective of whether measured outcome data are reported in a 'usable' way.	Systematic reviews typically should seek to include all relevant participants who have been included in eligible study designs of the relevant interventions and had the outcomes of interest measured. Reviews must not exclude studies solely on the basis of reporting of the outcome data, since this may introduce bias due to selective outcome reporting and risk undermining the systematic review process. While such studies cannot be included in meta-analyses, the implications of their omission should be considered. Note that studies may legitimately be excluded because outcomes were not measured. Furthermore, issues may be different for adverse effects outcomes, since the pool of studies may be much larger and it can be difficult to assess whether such outcomes were measured.

MECIR Box 4.6.c Relevant expectations for conduct of intervention reviews

C39: Making inclusion decisions (**Mandatory**)	
Use (at least) two people working independently to determine whether each study meets the eligibility criteria, and define in advance the process for resolving disagreements.	Duplicating the study selection process reduces both the risk of making mistakes and the possibility that selection is influenced by a single person's biases. The inclusion decisions should be based on the full texts of potentially eligible studies when possible, usually after an initial screen of titles and abstracts. It is desirable, but not mandatory, that two people undertake this initial screening, working independently.

MECIR Box 4.6.d Relevant expectations for conduct of intervention reviews

C41: Documenting decisions about records identified (**Mandatory**)	
Document the selection process in sufficient detail to be able to complete a flow diagram and a table of 'Characteristics of excluded studies'.	Decisions should be documented for all records identified by the search. Numbers of records are sufficient for exclusions based on initial screening of titles and abstracts. Broad categorizations are sufficient for records classed as potentially eligible during an initial screen. Studies listed in the table of 'Characteristics of excluded studies' should be those that a user might reasonably expect to find in the review. At least one explicit reason for their exclusion must be documented. Authors will need to decide for each review when to map records to studies (if multiple records refer to one study). Lists of included and excluded studies must be based on studies rather than records.