

Publishing Rapid Reviews:

Risks and Opportunities



Lesley Stewart

Conflict of interest

- Director, Centre for Reviews and Dissemination, University of York
- CRD produces rapid reviews
- CRD initiated and produces PROSPERO
- Member of PRISMA-P group
- Co-Editor in Chief of *Systematic Reviews*
- No financial conflicts





Rapid review

Describes a range of outputs

- Scoping studies
 - systematically derived bibliography
 - \pm critical appraisal of key studies
- Evidence bulletin/summary/briefing
 - existing systematic reviews \pm new/key primary studies
- Review of reviews
 - descriptive/analytic
- Rapid systematic review
 - expedited process/ methods



Rapid reviews in PROSPERO

PROSPERO includes systematic reviews and reviews of reviews

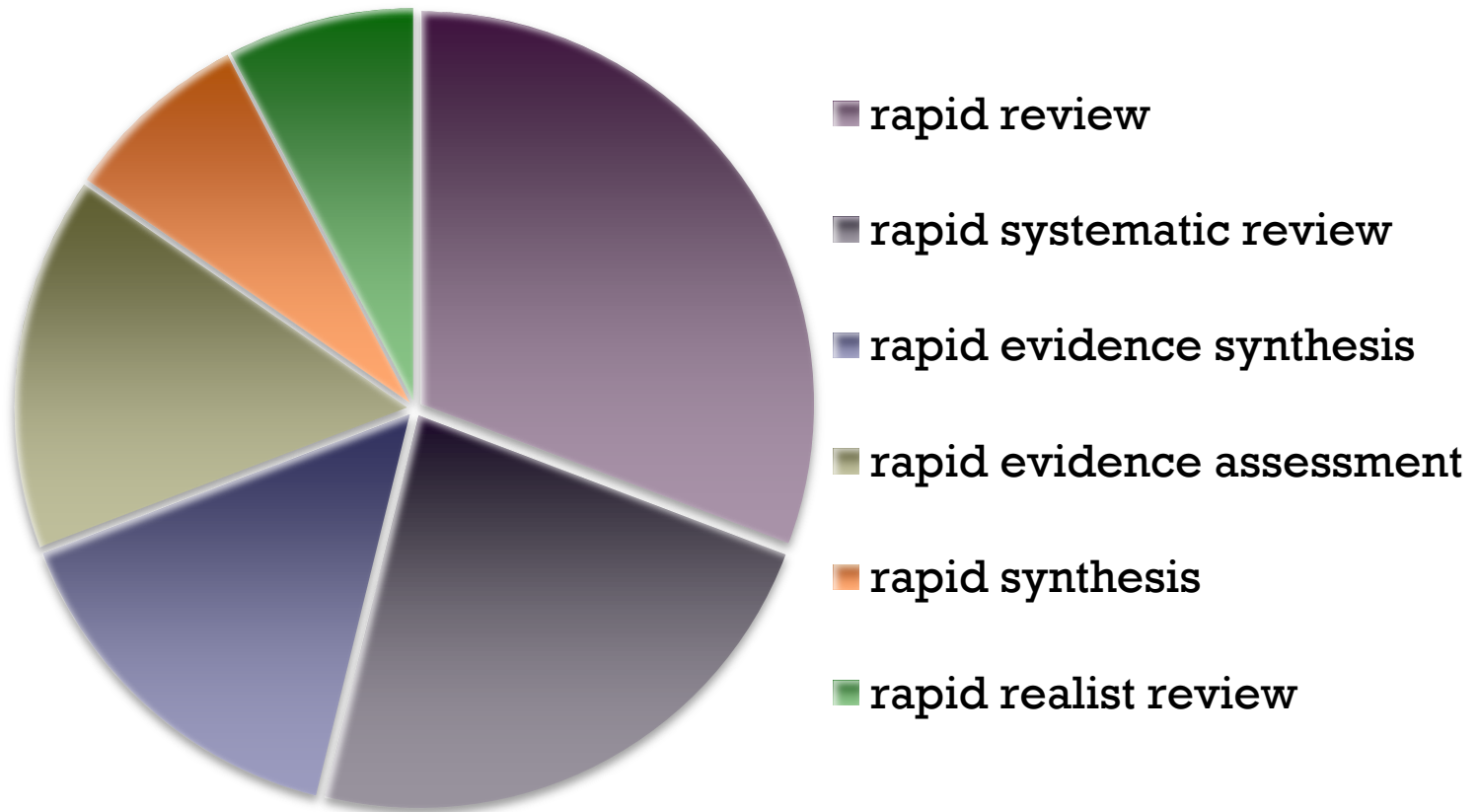
- Simple search “rapid” in title

Search Results [33 records]

| Registration no. ⇅ | Title ⇅ | Status ⇅ |
|--------------------|--|----------|
| CRD42015016151 | Health workers' compliance to Rapid Diagnostic Tests (RDTs) to guide malaria treatment: a systematic review and meta-analysis. | Ongoing |
| CRD42015016138 | Exploring the factors that predict long-term change in practice when multidisciplinary staff teams in inpatient mental health rehabilitation units undertake training aimed at increasing their engagement with recovery-based practice: a rapid realist review protocol | Ongoing |
| CRD42015015998 | Methodologies for rapid response for evidence-informed decision making in health policy and practice: an overview of systematic reviews and primary studies (Protocol) | Ongoing |
| CRD42014015452 | A Rapid Evidence synthesis of Outcomes and Care Utilisation following Self-care support for children and adolescents with long term conditions (REFOCUS): reducing care utilisation without comprising health outcomes | Ongoing |
| CRD42014014834 | Systematic review and meta-analysis of out-of-hospital rapid sequence intubation safety | Ongoing |
| CRD42014014539 | The effectiveness of rapid response teams activated by patients or family members of patients admitted to inpatient hospital units: a systematic review protocol | Ongoing |
| CRD42014014458 | Enhanced recovery after elective caesarean: protocol for a rapid review of clinical protocols, and an umbrella review of systematic reviews | Ongoing |
| CRD42014014416 | Comparison of parenteral routes for fluid administration: a rapid systematic review of randomised controlled trials | Ongoing |
| CRD42014014000 | How patients, their legal representatives and/or clinicians view consent procedures for research participation during acute or emergency treatment: a rapid review | Ongoing |
| CRD42014013279 | Improving outcomes for people in mental health crisis: a rapid synthesis of the evidence for available models of care | Ongoing |

Terminology

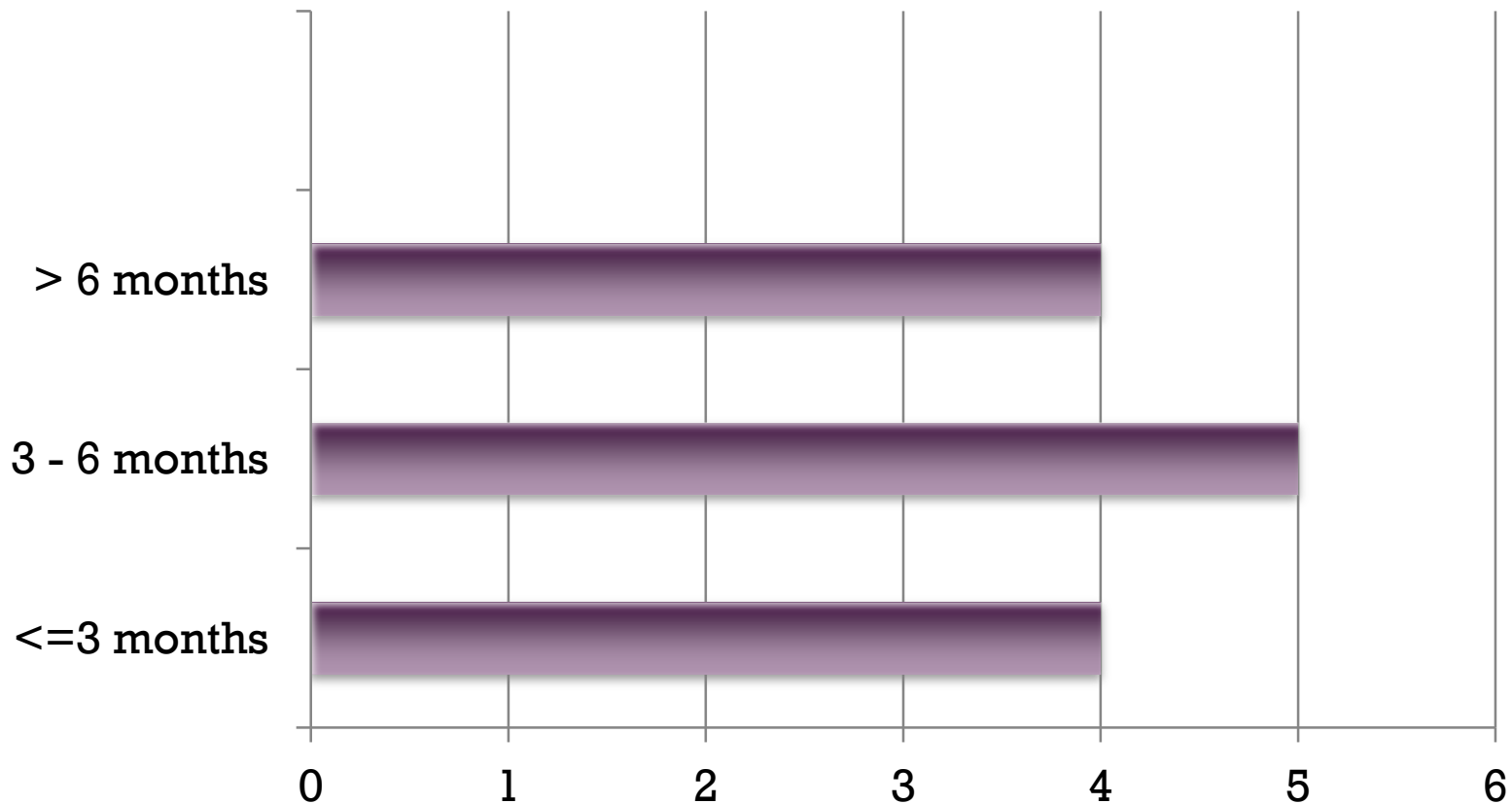
13 records 2013-2015 12 UK/Ireland 1 USA



Small numbers: illustrative of
current practice

Planned timescale

Range 6 weeks to 15 months median 6 months

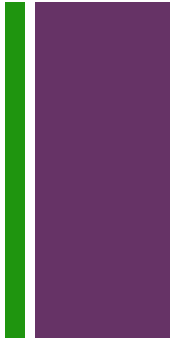


Dissemination strategy

Optional field

- 10 provided information on dissemination plans
- 7 journal article
 - 5 full report
 - 2 'briefings'
- 2 direct to decision making
 - 1 'briefing'
- 1 conference presentation & sharing with stakeholders

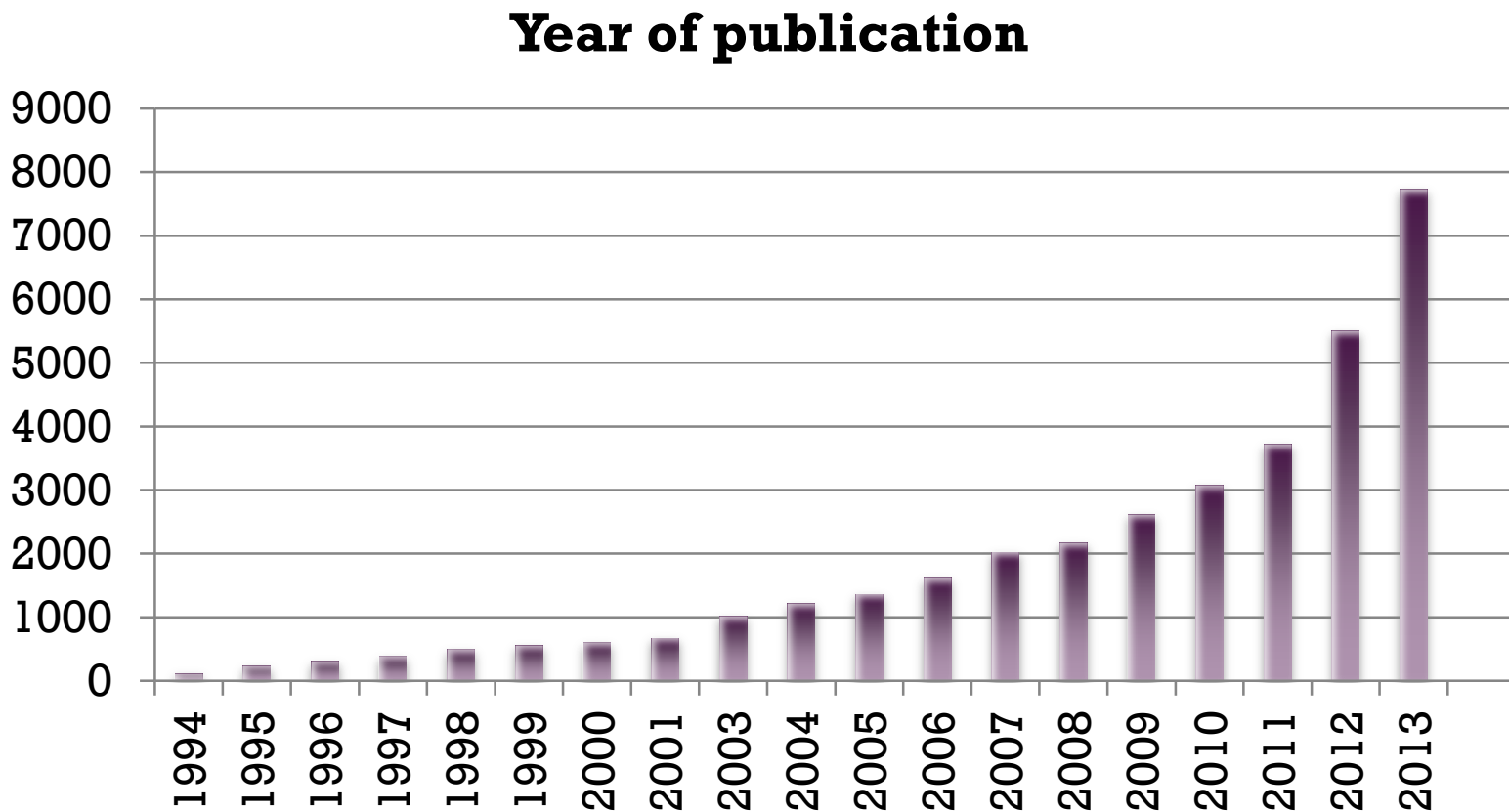
Informal comparison



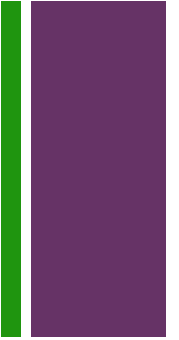
- PROPERO most recent 20 records
(excluding Cochrane protocols)
did not have rapid in title
- Anticipated duration
 - 6 weeks to 16 months
 - median 5 months
- Dissemination strategy
 - 15 provided information
 - 15 journal articles
 - 3 reports
 - 2 direct feedback to stakeholders

Systematic reviews published

From DARE

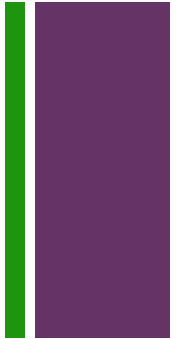


Why publish



- Transparency and accountability
- Peer review and comment
- Knowledge transfer and translation
- Help avoid unintended duplication/waste
- Academic credit

Publishing 'rapid reviews'



- Best evidence to inform decisions
 - matched to decision making timeframes
- Often commissioned and tailored to specific needs and set in specific context
 - input to decision making assured
- Same questions/issues likely to be of wider importance
 - core research evidence should hold even where details on context/implementation differ
 - duplication in locating and 'unpicking' research evidence is wasteful

- Formal (academic journal)
- Informal
 - Website
 - Database
 - Bulletin (electronic or paper)



Publishing in academic journals

Advantages

- Credibility
peer review, journal quality
- Discoverability
indexed in bibliographic
databases
- Permanence
- Easier to cite and track
citations

Disadvantages

- Time and effort
preparation and publication
process may take many
months
- Format may not suit some
types of rapid review
outputs, or be accessible to
some audiences
- Cost

Informal publishing

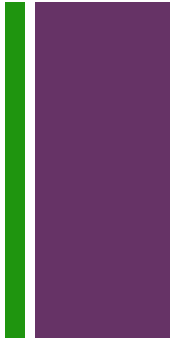
Advantages

- Immediate
- Unconstrained format
 - structure and format to suit output and user
 - to achieve maximum impact/knowledge transfer
- ~Free

Disadvantages

- Outputs may be more difficult for others to discover
 - not indexed on bibliographic databases
- May be interpreted as less credible and of lesser value
 - But producer may engender credibility/trust
- Need to be maintained

Publishing 'rapid reviews'



■ Rapid systematic review

- Not fundamentally different from a standard systematic review
- Publish following PRISMA
- Explain rationale for adopting a 'rapid' approach
- Pay particular attention to describing any deviations from accepted systematic review process used to ensure timeliness
- For all systematic reviews, also consider knowledge translation aspect and how best to reach relevant audiences

Publishing 'rapid reviews'

Bulletins/ summaries/ briefings

- Accessible
 - language, design, format
 - distilled to short 'bottom lines'



EffectivenessMatters

November 2014

Housing improvement and home safety

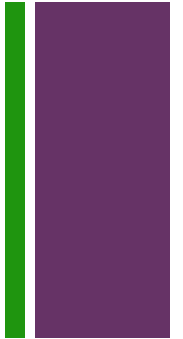


- The homes we live in impact on health, wellbeing and health inequalities
- Treating illnesses directly related to living in cold, damp and dangerous homes costs the NHS £2.5 billion per year
- Ensuring affordable warmth through insulation and more efficient heating can improve health and wellbeing
- Home safety assessment and modification can reduce falls and risk of falling in older people
- Education, promotion of exercise and wearing of appropriate footwear, environmental modifications and training of healthcare workers can reduce the rate of fall-related injuries (including fractures) in older people
- Homes can be made safer through education delivered by health or social care professionals, school teachers, lay workers, and voluntary organisations
- Home assessment followed by tailored packages and co-ordinated care from healthcare providers and social services can reduce the number of asthma-symptom days, school absenteeism and acute-care visits amongst children and adolescents

This issue of *Effectiveness Matters* has been produced by the Centre for Reviews and Dissemination (CRD) in collaboration with the National Institute for Health Research School for Public Health Research (NIHR SPHR), the London School of Hygiene & Tropical Medicine and the MRC Social and Public Health Sciences Unit (MRC SPHSU), University of Glasgow.

The views expressed in this bulletin are those of the authors and not necessarily those of the University of York, the NIHR SPHR or the MRC SPHSU.

Publication



- Is journal publication desirable?
 - what type of article
 - not well suited to IMRAD format
 - can journals be more innovative and creative
- Can informal publishing methods provide an alternative means of sharing information and communicating findings
 - ‘one stop shop’
 - trusted source
- How can contribution be acknowledged outside of formal publication (academic reward)

Registering rapid reviews

- Registration
 - transparency
 - helps avoid duplication/waste
 - minimal effort
 - free
- Applies to rapid systematic reviews and reviews of reviews
 - may be issues of timeliness
 - register before data extraction (ideally before screening)
 - may be heightened anxiety of idea theft

MUSEUM



← SCIENCE IN THE
MODERN ERA



DISCOVERY
OF THE
INVERSE
IMPACT LAW



BEFORE THE GREAT
SUBSCRIPTION CRASH OF
2017, SCIENTISTS BELIEVED
THE MORE INACCESSIBLE THE
STUDY, THE GREATER THE
IMPACT.



JOURNAL
IMPACT
FACTOR
RANKING

Bastian