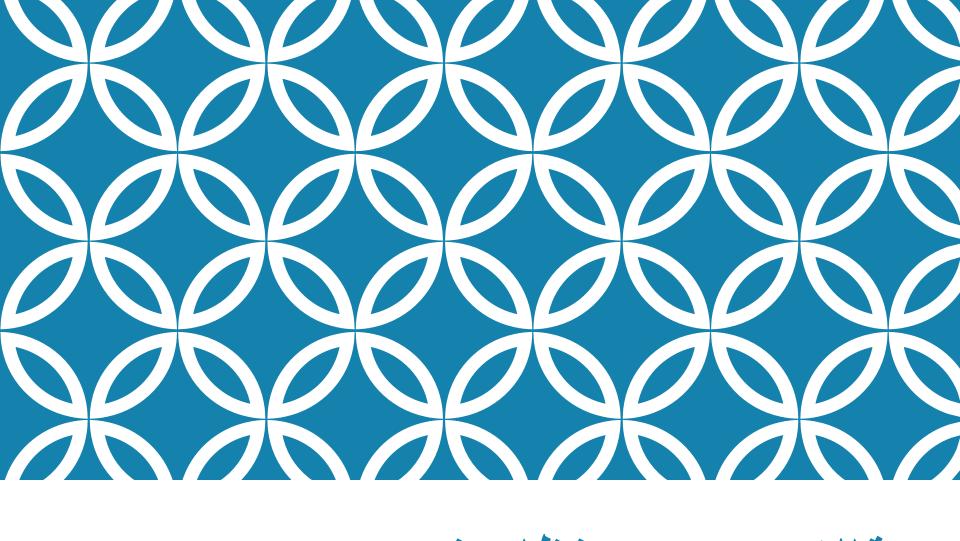
به نام خدا

کارگاه آموزشی کتابدار بالینی دانشگاه علوم پزشکی سبزوار

زمان برگزاری: 17 و 18 بهمن ماه 1395

محل برگزاری: پردیس دانشگاه ـ سایت کامپیوتر



مقالات مروری نظاممند و جایگاه آنها در تصمیمگیری بالینی به طور کلی مقالات را به دو دسته تقسیم می کنند:

1- مطالعات اولیه (PRIMARY STUDIES) مطالعاتی هستند که از تحقیق مستقیم به دست می آیند از آزمایشات، کارآزمایی بالینی و پایش ها EXPERIMENT, CLINICAL TRAIL, SURVEY

 ۲- مطالعات ثانویه (SECONDARY STUDIES)
 مطالعاتی هستند که با مطالعات اولیه و با کار روی داده های آنها انجام و نتیجه بدست می آورد. در یک دسته بندی ساده ما مطالعات مشاهده ای و غیر تحلیلی را داریم:

۱- مطالعات مقطعی (CROSS SECTIONAL STUDIES)
 ساده ترین شکل بررسی های مشاهده ای و اغلب در نمونه ای از کل جمعیت به وسیله معاینه، پرسشنامه یا پژوهش انجام می شود.(مطالعه میزان وفور و میزان شیوع یا بررسی فراوانی هم می نامندش).

۲- مطالعات طولی (LONGITUDINAL STUDIES)
 به مشاهدات مکرر در زمان طولانی از طریق پیگیری معاینات و ...
 پرداخته و هزینه آن از مقطعی بیشتر که البته اطلاعات مفیدی به ما می دهد. (بررسی میزان بروز)
 ادن مطالعه مثل دی فیلد دستماد ده مطالعات مقطع ده مثاره دی ...

این مطّالعه مثل یک فیلم سینمایی و مطالعات مقطعی به مثابه یک عکس.

در یک دسته بندی دیگر ما مطالعات تحلیلی را به دو دسته تقسیم می کنیم:

۱ – مطالعات شاهد موردی (گذشته نگر)(CASE CONTROL STUDIES)

۲- مطالعات هم گروهی (COHORT - STUDIES)
 به نوعی از مطالعات تحلیلی مشاهده ای گفته می شود که برای بدست اوردن شواهد بیشتر جهت رد یا قبول فرضیه ماست.
 می تواند آینده نگر یا جاری باشد گذشته نگر یا تاریخی و مرکب از دو روش قبلی

انواع مقالات در علوم پزشكي

Original Article

Review Article

Case Reports

Editorial

Short Communication (short papers)

Letter to Editor

مقاله پژوهشی اصیل مقاله مروری مقاله گزارش مورد سرمقاله (سخن سردبیر) مقاله کوتاه

نامه به سردبیر

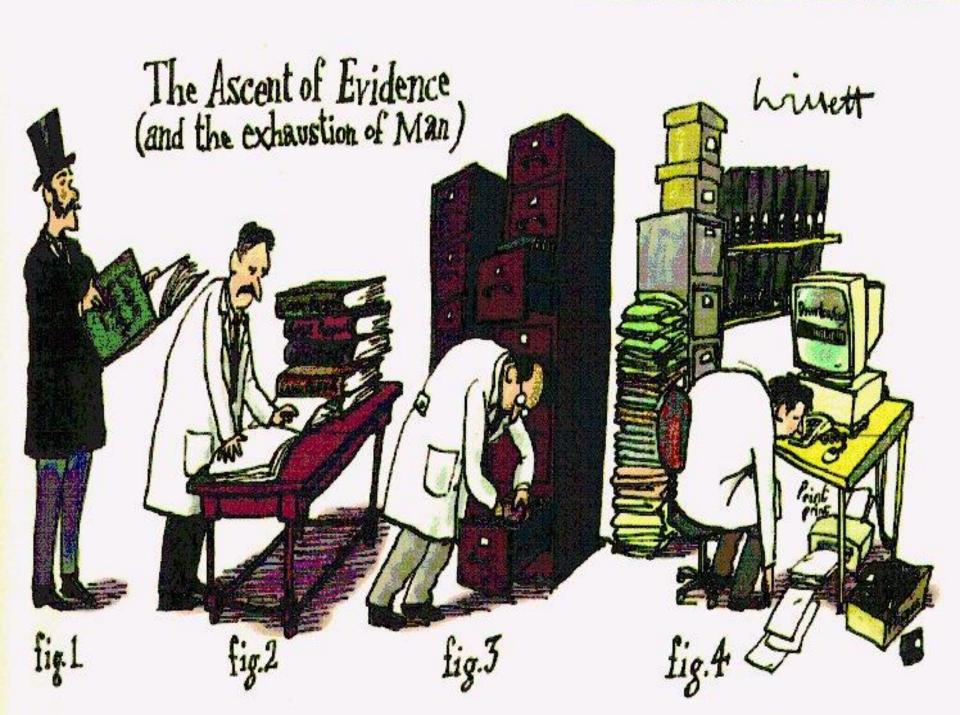
انواع مقالات مروری در علوم پزشکی

Traditional Review Articles (Narrative Review) مقالات مروری سنتی مرور روایتی، نقلی (ثانویه)

Systematic Review (Meta-analysis)

مقالات مروری نظاممند مرور ساختاردار(ثانویه)





MEDICAL PUBLISHING SCOPE

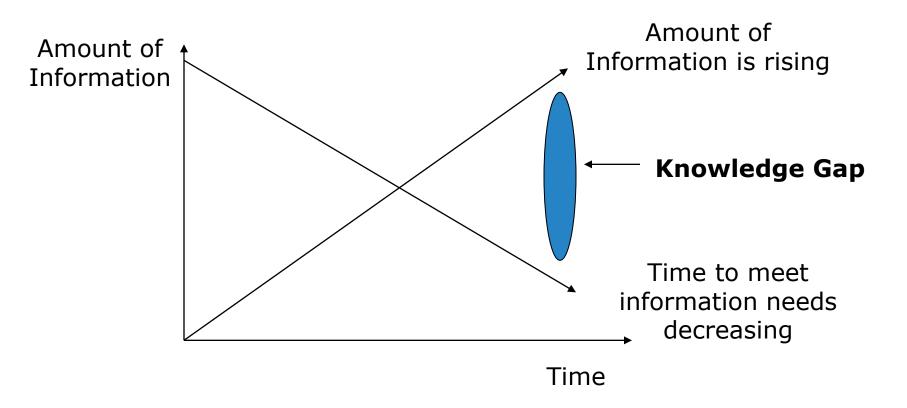
Annually:

- +20,000 journals
- +17,000 new books

MEDLINE:

- +5,000 journals
- +25 Million references
- 400,000 new entries yearly

مشكل فاصله اطلاعاتي



The Knowledge Gap

Half-time or Half-life of Clinical Medical Science is now

about 6 Month

Doubling time of biomedical science was

about 19 years in 1991

Doubling time of biomedical science was

about 20 months in 2001

SO YOU WORK IN A JOB WHICH:

Its half-time (half-life) is 6 months, &

Its doubling-time is 20 month

You works in a ever-changing & ever-growing profession!

So you should keep updating!

FOR GENERAL PHYSICIANS TO KEEP CURRENT:

Read 19 new articles per day which appear in medical journals

19 x 2 hrs (Critical Appraisal) = 38 hrs per day

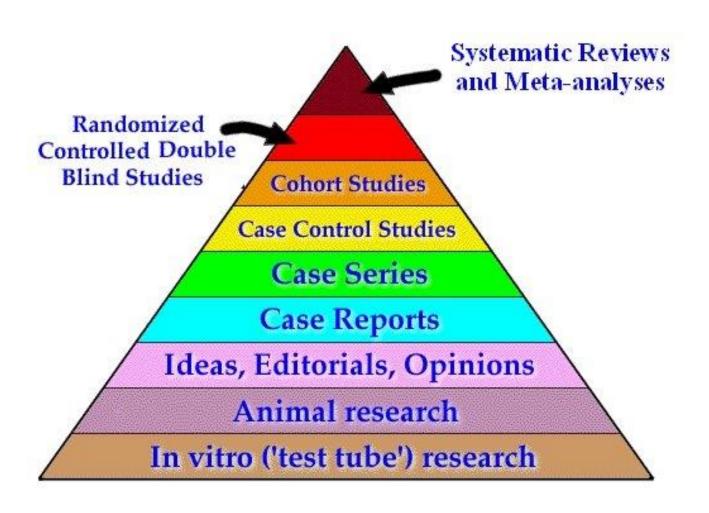
Davidoff F et al. (1995)

EBM; A new journal to help doctors identify the information they need. BMJ 310:1085-86.

WHAT IS 'LEVEL OF EVIDENCE'? سطوح شواهد چیست؟

The extent to which one can be confident that an estimate of effect or association is correct (unbiased).

HIERARCHY OF STUDIES سلسله مراتب مطالعات



EVIDENCE PYRAMID هرم شواهد

Systematic Review

Randomized Controlled Trial

Cohort studies

Case Control studies

Case Series/Case Reports

Animal research

LEVELS OF EVIDENCE

Level of Evidence	Type of Study	
1a	Systematic reviews of randomized clinical trials (RCTs)	
1b	Individual RCTs	
2a	Systematic reviews of cohort studies	
2b	Individual cohort studies and low-quality RCTs	
3a	Systematic reviews of case-controlled studies	
3b	Individual case-controlled studies	
4	Case series and poor-quality cohort and case-control studies	
5	Expert opinion based on clinical experience	

Adapted from: Sackett DL et al. *Evidence-Based Medicine: How to Practice and Teach EBM*. 2nd ed. Churchill Livingstone; 2000.

SYSTEMATIC REVIEWS

Postdam Consultation on Meta-analysis (Cook et al, 1995) defined a systematic review as

"application of scientific strategies that limit bias to the systematic assembly, critical appraisal and synthesis of all relevant studies on a specific topic"

Postdam

SYSTEMATIC REVIEWS

Systematic review is a method of

- locating,
- appraising,
- and synthesizing evidence
- while making explicit efforts to limit bias
- > a quarter of a century since Gene Glass coined the term "metaanalysis" to refer to the quantitative synthesis of the results of primary studies

A 'SYSTEMATIC REVIEW', THEREFORE, AIMS TO BE:

Systematic (e.g. in its identification of literature)

Explicit (e.g. in its statement of objectives, materials and methods)

Reproducible (e.g. in its methodology and conclusions

SYSTEMATIC REVIEW

"Scientific tool which can be used to

summaries, appraise, and communicate the results and implications of otherwise unmanageable quantities of research" (NHS CRD, 1996).

THEY ARE NOT CONVENTIONAL REVIEWS

Follow a strict methodological and statistical protocol

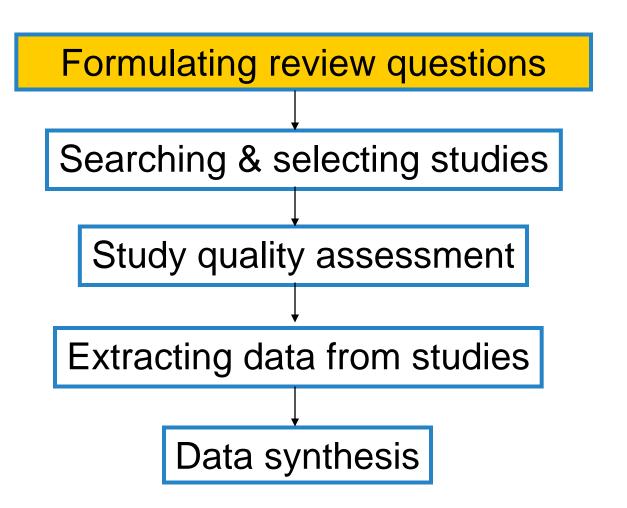
- more comprehensive
- minimising the chance of bias
- improves transparency, repeatability and reliability

تفاوت مقاله مروری سنتی و مروری نظام مند

(Adapted from Cook, D. J. et. al. (1997). Ann. Intern. Med. 126: 376-380)			
Feature	Traditional Review	Systematic Review	
Question	Often broad in scope	Focused question	
Sources & search	Not usually specified, potentially biased	Comprehensive sources & explicit search strategy	
Selection	Rarely specified, potentially biased	Criterion-based selection, uniformly applied	
Appraisal	Variable	Rigorous critical appraisal, uniformly applied	
Synthesis	Often a qualitative summary	Quantitative summary* when appropriate	
Inferences	Sometimes evidence-based	Evidence-based	
*A quantitative summary that includes a statistical synthesis is a meta-			

analysis

مراحل انجام مطاا لعه مروری نظاممند (۱)



قالب بندى عنوان مطالعه مرورى نظام مند

The first and most important decision in preparing a review is to determine its focus

This is best done by asking clearly framed questions.

Define a four part clinical question, breaking the question down into its component parts

Question components: PICO

What types of Patients?

What types of Interventions?

What types of Comparison?

What types of Outcomes?

طراحی سئوال بالینی در قالب PICO

Components of Clinical Questions

Patient/ Population

In patients with

In women with suspected coronary disease

acute MI

In postmenopausal women Intervention/ Exposure

does early treatment with a statin

what is the accuracy of exercise ECHO

does hormone replacement therapy

Comparison

compared to placebo

compared to exercise ECG

compared to no HRT

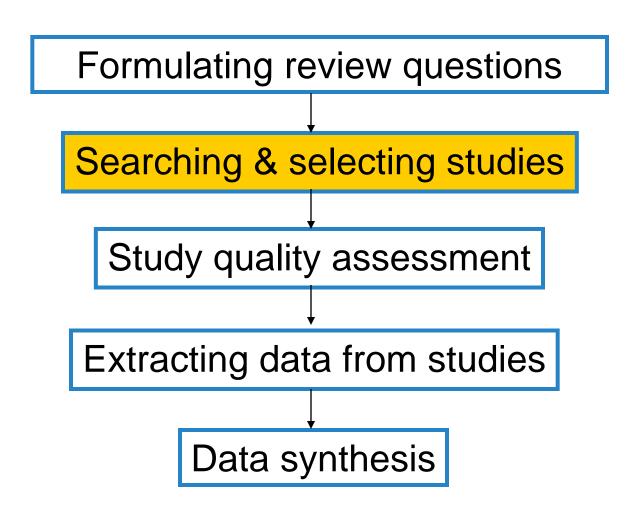
Outcome

decrease cardiovascular mortality?

for diagnosing significant CAD?

increase the risk of breast cancer?

مراحل انجام مطالعه مرورى نظاممند



SELECTING STUDIES

performing a comprehensive, objective, and reproducible search of the literature

selecting studies which meet the original inclusion and exclusion criteria

can be the most time-consuming and challenging task in preparing a systematic review

منابع اطلاعاتی مورد استفاده در مطاعات مروری نظام مند

Electronic databases

- MEDLINE and EMBASE
- The Cochrane Central Register of Controlled Trials (CENTRAL)

Conference proceedings & abstract books

Hand searching

"Grey literature" (thesis, Internal reports, pharmaceutical industry files)

Checking reference lists

Unpublished sources known to experts in the specialty (seek by personal communication)

Raw data from published trials

GENERATING A SEARCH STRATEGY تولید یک راهبرد جستجو

Multiple electronic databases and the internet using a range of Boolean search-terms

Foreign language searches

Include grey literature to avoid publication bias (see subsequent slides)

Search bibliographies and contact experts

Exclude irrelevant citations

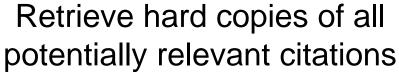
After screening all title & abstracts (n= #)

Exclude irrelevant studies

After detailed assessment of full text
(n= #)

Identify potentially relevant citations

From wide searching of electronic databases & hand searching of other appropriate resources (n=#)

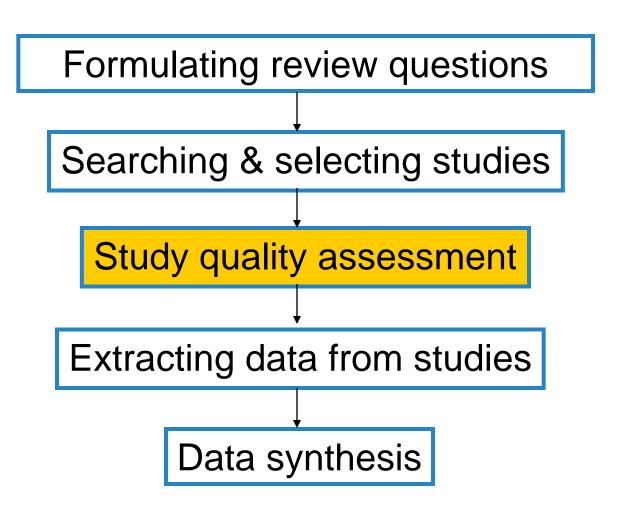


Identified through the above searches plus contact with experts, sifting through reference list & other resources

$$(n = \#)$$

Include studies in systematic review (n= #)

مراحل انجام مطالعه مروری نظام مند (۳)



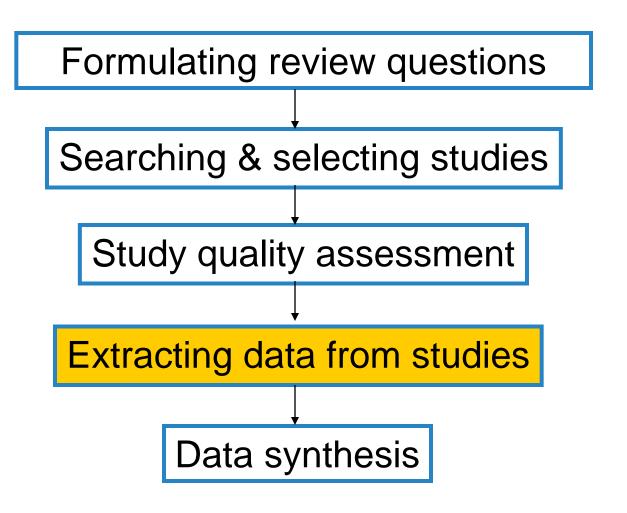
APPRAISING STUDY QUALITY

There is no such thing as a perfect study, all studies have weaknesses, limitations, biases

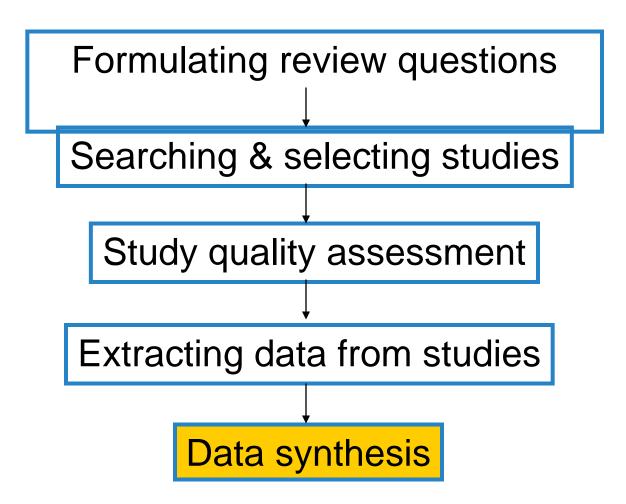
Interpretation of the findings of a study depends on design, conduct and analysis, as well as on the population, interventions, and outcome measures

The researchers in a primary study did not necessarily set out to answer your review question

مراحل انجام مطالعه مروری نظاممند (۴)



مراحل انجام مطالعه مروری نظاممند (۵)



META-ANALYSIS

when an overview incorporates a specific statistical strategy for assembling the results of several studies into a single estimate

