

## **A conversation with The Cochrane Collaboration on 03/05/13**

### **Participants**

- Mark Wilson — CEO, The Cochrane Collaboration
- David Tovey — Editor-in-Chief, The Cochrane Collaboration
- Kay Dickersin — Director, The US Cochrane Center
- Alexander Berger — Senior Research Analyst, GiveWell
- Elie Hassenfeld — Co-Executive Director, GiveWell

**Note:** This set of notes was compiled by GiveWell and gives an overview of the major points made by Mark Wilson, David Tovey and Kay Dickersin.

### **Summary**

The Cochrane Collaboration wrote a proposal highlighting potential areas for GiveWell and its users to consider for funding. GiveWell spoke with Cochrane to learn more about the components of the proposal and to place them in context.

The proposal has substantial content that's not discussed in these notes.

### **Cochrane's proposal for uses of funding**

Some areas that Cochrane proposes for the use of additional funding are:

1. The production of high priority, high value Cochrane systematic reviews
2. The development of increased capacity to produce Cochrane reviews in low and middle-income countries.
3. Advocacy and outreach (including education).

Cochrane will eventually do work in each of these three areas regardless of how much philanthropic support it receives, but financial support would speed up the process and increase the scope and scale of the work.

If Cochrane were to receive unrestricted funding, the particular activities that it would use it for would depend on the size and regularity of donations. If a funder were to specify a proposal for the amount to be donated and the regularity with which funding were provided, Mark Wilson and David Tovey would make a recommendation and present it to the Cochrane Steering Group for approval. Cochrane is currently in the process of formulating a new strategic plan to 2020 which will guide the allocation of resources across these areas. It expects the plan to be completed within 6 months.

### **Systematic review production**

*Training in the developed world* — The US Cochrane Center has run two training workshops in Baltimore per year for authors of Cochrane reviews. There are always waiting lists for these workshops. With more funding, the US Cochrane Center could host training workshops in more locations (such as San Francisco) so as to reach participants who would otherwise not be able to attend.

*Methodological hubs* — It's often the case that review authors don't have all of the skills required for the reviews that they're writing and so need help from specialists. A couple of examples of these skills are statistical analysis and how to search through the academic literature. With additional funding, Cochrane could set up support centers to help review authors with these skills.

*A funding entity for high priority reviews* — Cochrane intends to create a centrally-managed fund designed to finance the production of high priority Cochrane reviews. This fund would identify critical reviews that haven't been done and offer funding to aid review authors so that the reviews are completed in a timely fashion.

Cochrane is hoping to attract \$750k-\$1.5m per year for this purpose. If a foundation or other funder were to provide this amount of funding for five years, it would have a large positive impact on Cochrane's work.

## **Capacity development in low- and middle-income countries**

*Current status* — Cochrane has committed funding to four centers in low- and middle-income countries (LMICs) to train authors and produce systematic reviews. They ran a competitive application process and there were other credible applications from potential centers that they were not able to fund.

*Additional activities* — Cochrane has received a grant from Canada's International Development Research Center to produce an environmental scan of evidence synthesis producers and users so that a more detailed plan can be established, which they expect to be completed in the next few months. After that scan is complete, Cochrane will have more of a sense of what the appropriate next steps are.

## **Advocacy work**

*Informing guidelines* — Cochrane has partnered with the World Health Organization (WHO) to work on making the WHO's guidelines more evidence based. Cochrane has also partnered with the Guidelines International Network to create evidence-based guidelines.

*Additional activities* — Cochrane is seeking funding to:

1. Produce additional systematic reviews to inform the WHO guidelines.
2. Support the use of GRADE tables to assess the strength of the evidence

summarized by a given Cochrane review, so that policymakers can contextualize the reviews' conclusions and give them proper weight when creating guidelines.

3. Work with the creators of guidelines in other countries to make them more evidence based.

*Reaching the broader public* — Cochrane hopes that its advocacy work will raise public awareness of issues connected with evidence based medicine. It wants to build on the momentum generated by Ben Goldacre's book, *Bad Pharma: How Drug Companies Mislead Doctors and Harm Patients*, in which it is featured.

*Promoting the publication of all research* — Cochrane's work is central to the creation of the AllTrials Initiative (<http://www.alltrials.net/>), which works to encourage the publication of the results of all clinical trials conducted by medical researchers. Cochrane is involved in the Initiative and wants to take a much more active role to advance further this cause.

## **Linked Data Project**

Cochrane is interested in creating meta-data for its reviews to make it easier for users to access the information that they're looking for. For example, Cochrane reviews will often use the generic name of a drug rather than the brand name, and the meta-data would allow users to find the reviews relevant to the drug by searching for the brand name.

## **Other Topics**

### **Strategic reserve**

Over the last decade Cochrane has accrued a strategic reserve fund of about \$4.5m; approximately the size of Cochrane's annual operational expenses. It plans to spend some of this to invest in key parts of its business to build greater long-term sustainability (though leaving a significant portion as an emergency reserve).

### **Cochrane's recruitment of authors**

The process by which Cochrane recruits review authors varies. Cochrane recommends that for any given review, one coauthor should be a methodologist and another coauthor have clinical knowledge of the topic that the review is on.

The US Cochrane Center is hoping that once the collection of Cochrane review authors reaches a critical mass, being a Cochrane reviewer will carry prestige, and so more people will want to write Cochrane reviews.

*All GiveWell conversations are available at <http://www.givewell.org/conversations>*