

# The best of the UK? A report on the value and future of UK databases in the health and social care fields: a systematic map protocol

Chris Cooper,<sup>1</sup> Alison O'Mara-Eves,<sup>2</sup> Morwenna Rogers,<sup>3</sup> Alison Bethel,<sup>3</sup> Jenny Lowe,<sup>1</sup> Louise Crathorne,<sup>1</sup> Alan Gomersall<sup>4</sup>

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► Prepublication history and additional materials for this paper are available online. To view these files please visit the journal online (<http://dx.doi.org/10.1136/bmjopen-2012-001411>).

Dissemination: The review's findings will be disseminated through the publication of a final report and a conference paper.

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<sup>1</sup>PenTAG, University of Exeter, Exeter, UK  
<sup>2</sup>EPPI-Centre, Social Science Research Unit, Institute of Education, University of London, London, UK  
<sup>3</sup>PenCLAHRC, University of Exeter, Exeter, UK  
<sup>4</sup>King's College, London, UK

## Correspondence to

Chris Cooper;  
[chris.cooper@pcmd.ac.uk](mailto:chris.cooper@pcmd.ac.uk)

## ABSTRACT

**Introduction:** This protocol covers the first part of a two-part project funded by the Health Libraries Group and the University Health and Medical Librarians Group. It details the proposed methodology for a systematic map of the literature relating to UK bibliographic databases in the fields of health and social care. The aim of this mapping exercise is to consider ways in which UK bibliographic databases are described, considered and discussed in the published and unpublished literature. In doing so, we hope to gain a clearer sense of the ways in which UK bibliographic databases are used and viewed by the research community. It also enables the identification of any gaps in the literature for further research and discussion. This topic is important because UK databases are generally underused by researchers in the UK context and some databases are at risk of closure. A lack of access to UK databases means that researchers may miss relevant UK evidence when identifying an evidence base.

**Method:** Systematic Map.

**Analysis:** The authors will present a narrative description of the literature relating to UK bibliographic databases in the fields of health and social care. They will use tables to present descriptive information about the literature (eg, frequency tables) and use cross-tabulations to demonstrate intersecting themes. Separately, guidance on how to use the resources (eg, areas of unique content, updating frequencies, unique truncation symbols) will be sought from stakeholders and reported alongside the report narrative as a guide to usage.

## BACKGROUND

Led by Chris Cooper, researchers at the Peninsula Medical School (PenTAG, University of Exeter) and King's College, London, responded to a call for proposals by the Health Libraries Group (HLG) and the University Health and Medical Librarians Group for the bi-annual 'Research In the Workplace Award'.

## ARTICLE SUMMARY

### Article focus

- Producing a systematic map of the literature relating to UK databases in the fields of health and social care.
- Analysis of the way in which UK databases are used in the fields of health and social care.

### Key messages

- This protocol details the methods proposed to produce a systematic map of literature relating to health and social care databases in the UK.

### Strengths and limitations of this study

- This work will produce the first map of literature relating to UK databases in the fields of health and social care.

The proposal submitted was to review the status of UK bibliographic databases in the fields of health and social care, through a review (Part 1) and interviews (Part 2), drawing together both parts in one final study.

### Part 1

The overarching aim of the first part of the project is to map the literature, showing the ways in which UK bibliographic databases are referenced and discussed in the published and unpublished literature in the fields of health and social care.

### Part 2

The main aim of the second part of the project—a series of qualitative interviews with stakeholders of UK bibliographic databases (not covered by this protocol)—is to consider the value and future of these unique resources and discuss the findings of the systematic map.

### Rationale

The primary rationale for the study is an observation that a number of UK

bibliographic databases have closed, many more are small and run with only limited funding and we have reason to believe that others are at imminent risk of closure.<sup>1</sup> Losing these UK databases will mean losing access to a seam of truly unique UK material, that is, relevant to answering health and social care questions peculiar to the UK context.<sup>2</sup>

Additionally, we believe that these databases are extremely valuable, yet underused resources in health and social care research. This underuse can lead to serious problems in research, particularly for research with guidance, policy or practice implications intended for UK settings. By missing available UK evidence (eg, by only searching non-UK databases that do not have broad coverage of UK material and sources), a bias towards non-UK evidence is created in the resulting evidence base. This bias can be further exacerbated when research findings from countries outside of the UK have to be translated into the UK context, in the absence of valid UK material, which has been missed. The degree and effect of transferability is often difficult to assess.

### Proposal

A systematic mapping of the evidence base is appropriate as it will draw together such literature as exists on the bibliographic databases in question, doing so in a clear and systematic way. This will, in turn, demonstrate where there is evidence and expose gaps in the literature, for discussion in the qualitative interviews.

When completed, the study will provide published guidance on UK bibliographic databases in the fields of health and social care. Through dissemination of this project, it is hoped that we can collectively raise awareness of these resources thereby demonstrating them as highly original and unique tools for UK research.

### FUNDING

This review has been funded by the HLG and the University Health and Medical Librarians Group through the 'Research in the Workplace Award'. For further information, please see: <http://www.cilip.org.uk/get-involved/special-interest-groups/health/awards/Pages/research-in-the-workplace.aspx> (website accessed Thursday, 29 March 2012).

### REVIEW QUESTION

What are the ways in which UK bibliographic databases in the fields of health and social care are used and represented in the published and unpublished literature? (eg, usage, usability, etc.).

### METHODS

The methods for use in this review have been drawn from Centre for Reviews and Dissemination Handbook<sup>3</sup> and the EPPI centre methods for conducting systematic reviews.<sup>4</sup>

#### Study design

##### Systematic mapping review

A systematic mapping review has been chosen to identify the literature on UK bibliographic databases. Not only will

this review aim to provide a robust picture of the evidence that exists on this topic, but it will also highlight the gaps in this evidence base and thereby help to propose research directions leading on from this project.<sup>4</sup>

#### Search approach

The search approach for this review will be systematic and broad.

#### Database searching: strategy

The search strategy will be operationalised on the population for this review, the UK bibliographic databases under review (see Inclusion section below).

The search syntax will use the named title of the database (eg, British Education Index), any commonly used acronyms (eg, BEI—where possible) and any relevant alternate names (eg, Social Care Online as well as its previous name, CareData), please see supplementary file available online only.

#### Database searching: sources

The following bibliographic databases will be systematically searched:

1. Amed via Ebsco
2. Assia via CSA
3. British Education Index via DIALOG
4. British Humanities Index (BHI) via CSA
5. British Library Catalogue via <http://tinyurl.com/bl-Catalogue>
6. British Nursing Index via ProQuest
7. Campbell Library via <http://www.campbellcollaboration.org/library.php>
8. CINAHL via Ebsco Host
9. Cochrane Library (all) via <http://www.thecochrane-library.com/view/0/index.html>
10. Embase via OVID
11. ERIC via CSA
12. Health Management Information Consortium (HMIC) via OVID
13. International Bibliography of Social Sciences (IBSS) via CSA
14. Library Information Science Abstracts (LISA) via CSA
15. Library, Information Science & Technology Abstracts (LISTA) via EBSCO Host
16. Medline in Process via OVID
17. Medline via OVID
18. National Criminal Justice Reference Service Abstracts NCJRS via CSA
19. Open Grey via <http://www.opengrey.eu/>
20. PsycINFO via OVID
21. Social Policy and Practice (SPP) via OVID
22. Social Services Abstracts via CSA
23. Social Work Abstracts via CSA
24. Sociological Abstracts via CSA
25. Web of Science via ISI

Notes (using the numbering scheme above):

5. The British Library Catalogue will be hand-searched;

12. HMIC will be searched as this resource indexes from the King's Fund Library and the Department of Health;

21. Social Policy and Practice includes: SCIE on-line, ChildData, AgeINFO and sections of Planex and Ubadoc and

25. This includes access to Conference Proceedings Citation Index.

### Website searching: strategy

Website searching will focus on a PDF search of Google and a search of the meta-search engine, Dogpile (<http://www.dogpile.com/>). The focus of this search is to locate any web-based, or formally unpublished, material.

The websites of all the databases under consideration will be hand searched. The following specific websites will also be searched, as below.

### Website searching: sources

- ▶ Google Advanced Search (with a PDF filter applied);
- ▶ Dogpile;
- ▶ Chartered Institute of Library and Information Professionals (CILIP) via <http://www.cilip.org.uk/Pages/default.aspx>
- ▶ ASLIB: The Association for Information Management via <http://www.aslib.co.uk/>
- ▶ Society of College, National and University Libraries (SCONUL) via <http://www.sconul.ac.uk/>.

### Other sources: supplementary search methods

The following supplementary search methods will be used to locate information for this review.<sup>5</sup>

### Citation chasing

Forwards and Backwards citation chasing will be applied on items included after full-text screening. Backwards chasing will be conducted manually, through the bibliography of the item in question. Forwards citation chasing will be conducted using Web of Science (via ISI). Items located by either method will be recorded in the review annex, de-duplicated against the database searches and then screened to the inclusion/exclusion criteria (below).

### Related article searching

Related article searching will be conducted in Google Scholar to a depth of one time. Any items identified will be screened manually for inclusion with records of numbers and decisions made being kept in the annex.

### Hand searching

The Health Information and Libraries Journal will be hand searched (2000-Current) using the table of contents. The European Association for Health Information and Libraries will be hand searched (2005-Current) through <http://www.eahil.net/journal/>.

The following organisations' conference publications will be hand searched: HLG, European Association for Health Information and Libraries, The Cochrane Colloquium and The Campbell Colloquium.

### Expert contact

Authors of items included on full text will be contacted. The professional bodies searched in the web searching (3:6—above) will also be contacted with a view to locating unpublished or grey literature.<sup>6 7</sup>

### Dissemination

In addition to the publication of this protocol, research updates are to be disseminated via the monthly newsletter of the King's College Evidence Network: a newsletter with an audience of approximately 2500 recipients. These methods aim to stimulate contact with researchers in the field.

### Search limits

Searches will be date limited 1990-Current to maintain relevancy and focus of search returns. The searches will not be limited by language,<sup>8</sup> population or country of origin.

### Recording the search

The searches will be recorded to PRISMA standards in their own fully annotated annex.<sup>9</sup> This will include the following information: resource name and host, data parameters (where known), number of items retrieved and the search strategy applied. Each search will include a narrative detailing any particulars of the search in question.<sup>10</sup>

### Screening

Inclusion criteria will be piloted on a random sample of 30 studies, prior to the start of the full-screening process. This piloting will help to ensure the clarity of the criteria and ensure a consensus understanding within the review team of what the criteria entail.

A randomly selected initial sample of 10% of records returned will be screened by two reviewers independently and inter-rater agreement will be monitored on an ongoing basis. Where abstracts meet all the criteria or if it is unclear from the abstract whether it meets the inclusion criteria, the full text will be retrieved and screened.

Full-text screening will be carried out by two reviewers independently and any differences resolved by discussion.

### Inclusion/exclusion criteria

Inclusion criteria will be constructed hierarchically using a process to screen for relevant items within the record returned (please see supplementary file, available online only).

For the purposes of this review, a bibliographic database is a resource that can be searched and returns citations of bibliographic details (including title and abstract), examples include British Nursing Index or Social Policy and Practice.<sup>i</sup>

<sup>i</sup>Resources such as Child Health Specialist Library, Dementia Catalogue, Ethnicity & Health Specialist Library and Health Improvement Network were considered in scoping but we did not, for the purposes of this map, consider them to be databases.

**Inclusion**

This mapping review aims to consider the published and unpublished literature relating to the state and usage of UK bibliographic resources in the fields of health and social care.

Inclusion will be operationalised on the population of this review, where the record being screened deals with a UK database as the topical point/focus of the record being screened in the title, abstract and/or keyword.

The ‘population’ list below will be crossed checked with the interviewees in part 2 to highlight any omissions (*post-hoc*) that will then be discussed and reviewed by the team.

The databases of interest are:

1. Age INFO
2. Alcohol concern
3. AMED/Allied and Complementary Medicine
4. ASSIA/Applied Social Sciences Index and Abstracts (Previously British)
5. Bibliomap
6. BL Direct (zetoc)
7. British Education Index (BEI)
8. British Humanities Index (BHI)
9. British Nursing Index (BNI)
10. ChildData
11. Community Abstracts/Community Wise
12. Database of Abstracts of Reviews of Effects (DARE)
13. DOHPER/Database of Promoting Health Effectiveness Reviews
14. DrugData
15. Health Management Information Consortium (HMIC)
16. Health Scotland Evaluation database
17. HEED/Health Economic Evaluations Database
18. Index to British theses
19. International Bibliography of the Social Sciences (IBSS: Previously British)
20. NHS Economic Evaluation Database
21. NHS Evidence (Health development agency)/national library for health
22. NSPCC electronic library/NSPCC Inform
23. ORB Children’s database
24. Planex/IDO/Planning Exchange
25. PROSPERO
26. Research Register for Social Care
27. RiP Evidence Bank
28. SCIE—social care online/caredata
29. Scottish Health Information Network/Scottish Health Libraries/ShelCAT
30. Social Policy and Practice (SPP)
31. TRIP database
32. TROpHI
33. Ubadoc/Urbaline/accompline.

Any study design/item type (eg, review, editorial or opinion piece) will be included in any setting with any population. Any outcome(s) is/are of initial interest.

**Exclusion**

Any item that does not include a UK database will be excluded. Items that make a passing reference to a UK database, for example, where a UK database has been searched as a part of a systematic review, will be excluded.

Items that fall outside of the topic area of health or social care will be excluded.

**Mapping**

A mapping tool will be designed to code and extract data from studies included after full-text screening. Sample mapping areas include:

Author (eg, Information Specialist, Reviewer)  
 Type of evidence (eg, editorial, conference publication)  
 Target audience (eg, information specialists, clinicians)  
 discipline.

Database in question: (eg, HMIC)  
 Topic or focus of the document in relation to UK databases (eg, usage, usability)

An initial pilot of 25% of included studies (or until agreement is reached) will be reviewed by two reviewers. The remaining evidence will be single coded.

Evidence tables for all included studies will be created and included as appendices to the final review report.

**Data synthesis and write-up**

For each database, where information has been identified and included after full-text screening, we will produce a narrative synthesis, using tables to present descriptive information about the evidence base, where possible.

Separately, we also propose producing formal guidance on each resource, listing information gathered from the database producer, for example, frequency of information updating, unique features, indexing.

**Dissemination**

As a condition of the funding, the findings of this report will be made available through a freely published report. Anticipated publication is presently April 2013.

**RESEARCH TEAM**

Name	Position
Chris Cooper (PenTAG)	Principal Investigator/Lead Reviewer/Information Specialist
Morwenna Rogers (PenCLAHRC)	Information Specialist
Alison Bethel (PenCLAHRC)	Information Specialist
Jenny Lowe (PenTAG)	Information Officer
Alison O’Mara-Eves (EPPI Centre)	Research Officer
Alan Gomersall (King’s College, London)	Senior Research Fellow



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**Contributors** CC wrote the initial bid and the protocol document. AO'M-E co-wrote the protocol and provided input into the design of the project. MR commented on the initial bid and the protocol. AB, LC, JL and AG provided comments and feedback on the protocol.

**Funding** Health Libraries Group and the University Health and Medical Librarians Group, through the 'Research In the Workplace Award'.

**Competing interests** CC has previously received funding from Social Policy and Practice to cover transport costs in attendance of a meeting. AG is an unpaid specialist adviser to the Social Policy and Practice consortium.

**Provenance and peer review** Not commissioned; internally peer reviewed.

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The Best of the UK? A Report on the Value and Future of UK Databases in the Health and Social  
Care Fields: A Systematic Map Protocol

Supplementary File 1

Database: Medline

Host: OVID

Data Parameters: 1946 to April Week 3 2012

Date Searched: Tuesday, May 1st 2012

Searcher: CC

Strategy Checked By: AG

Strategy:

1. ("ageinfo").ti,ab.
2. ("alcohol concern").ti,ab.
3. ("Allied and Complementary Medicine" or "amed").ti,ab.
4. ("Applied Social Sciences Index and Abstracts" or ASSIA).ti,ab.
5. ("Bibliomap").ti,ab.
6. ("BL Direct" or "British Library Direct" or "zetoc").ti,ab.
7. ("British education index").ti,ab.
8. ("British Humanities Index").ti,ab.
9. ("British Nursing Index" or BNI).ti,ab.
10. ("ChildData").ti,ab.
11. ("Community Abstracts" or "CommunityWise").ti,ab.
12. ("Database of Abstracts of Reviews of Effects" or DARE).ti,ab.
13. ("Database of Promoting Health Effectiveness Reviews" or "DOHPER").ti,ab.
14. ("drugdata").ti,ab.
15. ("Health Economic Evaluations Database" or HEED).ti,ab.
16. ("Health Management Information Consortium" or "HMIC").ti,ab.
17. ("Health Scotland Evaluation database").ti,ab.
18. ("Index to British theses" or "Index to Theses").ti,ab.
19. ("International Bibliography of the Social Sciences" or "IBSS").ti,ab.
20. ("NHS Economic Evaluation Database" or "NHS EED").ti,ab.
21. ("NHS Evidence" or "Health development agency" or "national library for health").ti,ab.
22. ("NSPCC library" or "NSPCC Inform").ti,ab.
23. ("ORB Children's database").ti,ab.
24. ("Planex" or "IDOX" or "Planning Exchange").ti,ab.
25. ("Prospero").ti,ab.
26. ("Research Register for Social Care").ti,ab.
27. ("RiP Evidence Bank").ti,ab.
28. ("SCIE" or "Social Care Institute for Excellence" or "social care online" or "Caredata").ti,ab.
29. ("Scottish Health Information Network" or "Scottish Health Libraries" or "ShelCAT").ti,ab.
30. ("Social Policy and Practice").ti,ab.
31. ("TRIP database").ti,ab.
32. ("TROpHI").ti,ab.
33. ("Urbadoc" or "Urbaline" or "acompline").ti,ab.
34. Or/1-33
35. Limit 34 to yr="1990 -Current"

Hits: 3131

Notes: N/A

File Name: Medline Endnote RIS

The Best of the UK? A Report on the Value and Future of UK Databases in the Health and Social Care Fields: A Systematic Map Protocol

Supplementary File 2: Inclusion/Exclusion Codes



Criterion	Decision	Guidance notes
1. YEAR: Was the document published during or after 1990?	If yes or unclear, proceed to 2.  If no, use EX1 – NOT YEAR	Exclude if Item is published before 1990
2. TOPIC: Does the document focus on a British database?	If yes or unclear, proceed to 3.  If no, use EX3 – NOT TOPIC	See attached list of databases that are definitely relevant. Exclude if a British database is not the topical focus of the article (e.g., studies simply saying 'we searched BNI, Medline etc' should be excluded). The item being screened should do more than just deal with the database in passing.
3. HEALTH/SOCIAL CARE: Is the document relevant to the field of health and/or social care?	If yes or unclear, proceed to 4.  If no, use EX4 – HEALTH/SOCIAL CARE	This might be vague so hedge towards include. Things like mining and engineering are out, for example but if in doubt, proceed to 5.
4. INCLUDE	Retrieve full-text document.  End of criteria.	To get to this stage, and therefore be included in the review, the item should <ul style="list-style-type: none"> <li>• be about any of the resources listed below – e.g. an editorial of HEED, or review of BNI, etc, or</li> <li>• discuss any of the resources listed (i.e. indexing, comprehensiveness of content, effectiveness of retrieving RCTs – e.g. is BNI better than Medline, a comparison of AMED and Medline etc), or</li> <li>• be vague or have no abstract and so full-text document must be retrieved.</li> </ul>

## **Includable Resources**

1. Age INFO
2. Alcohol concern
3. AMED/ Allied and Complementary Medicine
4. ASSIA/ Applied Social Sciences Index and Abstracts (Previously British)
5. Bibliomap
6. BL Direct (zetoc)
7. British Education Index (BEI)
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31. TRIP database
32. TROPHI
33. Urbadoc/Urbaline /accompline



# PRISMA 2009 Checklist

Section/topic	#	Checklist item	Reported on page #
<b>TITLE</b>			
Title	1	Identify the report as a systematic review, meta-analysis, or both.	1
<b>ABSTRACT</b>			
Structured summary	2	Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings; systematic review registration number.	1/2
<b>INTRODUCTION</b>			
Rationale	3	Describe the rationale for the review in the context of what is already known.	3
Objectives	4	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).	3
<b>METHODS</b>			
Protocol and registration	5	Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and, if available, provide registration information including registration number.	Whole Document is the protocol
Eligibility criteria	6	Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale.	7
Information sources	7	Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched.	4-6
Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.	Supp. file 1
Study selection	9	State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis).	7 + supp. file 2
Data collection process	10	Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators.	8
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	8
Risk of bias in individual studies	12	Describe methods used for assessing risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.	Not Applicable for this Methodology Type



# PRISMA 2009 Checklist

Summary measures	13	State the principal summary measures (e.g., risk ratio, difference in means).	Not Applicable for this Methodology Type
Synthesis of results	14	Describe the methods of handling data and combining results of studies, if done, including measures of consistency (e.g., $I^2$ ) for each meta-analysis.	9

Page 1 of 2

Section/topic	#	Checklist item	Reported on page #
Risk of bias across studies	15	Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, selective reporting within studies).	Not Applicable for this Methodology Type
Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified.	Not Applicable for this Methodology Type
<b>RESULTS</b>			
Study selection	17	Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally with a flow diagram.	n/a as this is protocol
Study characteristics	18	For each study, present characteristics for which data were extracted (e.g., study size, PICOS, follow-up period) and provide the citations.	n/a as this is protocol
Risk of bias within studies	19	Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12).	n/a as this is protocol
Results of individual studies	20	For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot.	n/a as this is protocol
Synthesis of results	21	Present results of each meta-analysis done, including confidence intervals and measures of consistency.	n/a as this is protocol
Risk of bias across studies	22	Present results of any assessment of risk of bias across studies (see Item 15).	n/a as this is protocol



# PRISMA 2009 Checklist

Additional analysis	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]).	n/a as this is protocol
<b>DISCUSSION</b>			
Summary of evidence	24	Summarize the main findings including the strength of evidence for each main outcome; consider their relevance to key groups (e.g., healthcare providers, users, and policy makers).	n/a as this is protocol
Limitations	25	Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomplete retrieval of identified research, reporting bias).	n/a as this is protocol
Conclusions	26	Provide a general interpretation of the results in the context of other evidence, and implications for future research.	n/a as this is protocol
<b>FUNDING</b>			
Funding	27	Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review.	2

From: Moher D, Liberati A, Tetzlaff J, Altman DG, The PRISMA Group (2009). Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement. PLoS Med 6(6): e1000097. doi:10.1371/journal.pmed1000097

For more information, visit: [www.prisma-statement.org](http://www.prisma-statement.org).