

Online Library Umbrella Reviews Evidence Synthesis With Overviews Of Reviews And Meta Epidemiologic Studies Free Download Pdf

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Improving the Utility of Evidence Synthesis for Decision Makers in the Face of Insufficient Evidence Jul 12 2022 **BACKGROUND:** Healthcare decision makers strive to operate on the best available evidence. The Agency for Healthcare Research and Quality Evidence-based Practice Center (EPC) Program aims to support healthcare decision makers by producing evidence reviews that rate the strength of evidence. However, the evidence base is often sparse or heterogeneous, or otherwise results in a high degree of uncertainty and insufficient evidence ratings. **OBJECTIVE:** To identify and suggest strategies to make insufficient ratings in systematic reviews more actionable. **METHODS:** A workgroup comprising EPC Program members convened throughout 2020. We conducted iterative discussions considering information from three data sources: a literature review for relevant publications and frameworks, a review of a convenience sample of past systematic reviews conducted by the EPCs, and an audit of methods used in past EPC technical briefs. **RESULTS:** Several themes emerged across the literature review, review of systematic reviews, and review of technical brief methods. In the purposive sample of 43 systematic reviews, the use of the term "insufficient" covered both instances of no evidence and instances of evidence being present but insufficient to estimate an effect. The results of the literature review and review of the EPC Program systematic reviews illustrated the importance of clearly stating the reasons for insufficient evidence. Results of both the literature review and review of systematic reviews highlighted the factors decision makers consider when making decisions when evidence of benefits or harms is insufficient, such as costs, values, preferences, and equity. We identified five strategies for supplementing systematic review findings when evidence on benefit or harms is expected to be or found to be insufficient, including: reconsidering eligible study designs, summarizing indirect evidence, summarizing contextual and implementation evidence, modelling, and incorporating unpublished health system data. **CONCLUSION:** Throughout early scoping, protocol development, review conduct, and review presentation, authors should consider five possible strategies to supplement potential insufficient findings of benefit or harms. When there is no evidence available for a specific outcome, reviewers should use a statement such as "no studies" instead of "insufficient." The main reasons for insufficient evidence rating should be explicitly described.

Methodological Briefs on Evidence Synthesis Brief 4: Collating and Analysing Studies for Synthesis Jul 20 2020 **Evidence Synthesis Methods for Continuous Outcomes** Feb 07 2022

Two Examples of Bayesian Evidence Synthesis with the Hierarchical Meta-Regression Approach Dec 05 2021 This is the Information Age. We can expect that for a particular research question that is empirically testable, we should have a collection of evidence which indicates the best way to proceed. Unfortunately, this is not the case in several areas of empirical research and decision making. Instead, when researchers and policy makers ask a specific question, such as "What is the effectiveness of a new treatment?", the structure of the evidence available to answer this question may be complex and fragmented (e.g. published experiments may have different grades of quality, observational data, subjective judgments, et cetera).

Evidence Synthesis for Decision Making in Healthcare Feb 19 2023 In the evaluation of healthcare, rigorous methods of quantitative assessment are necessary to establish interventions that are both effective and cost-effective. Usually a single study will not fully address these issues and it is desirable to synthesize evidence from multiple sources. This book aims to provide a practical guide to evidence synthesis for the purpose of decision making, starting with a simple single parameter model, where all studies estimate the same quantity (pairwise meta-analysis) and progressing to more complex multi-parameter structures (including meta-regression, mixed treatment comparisons, Markov models of disease progression, and epidemiology models). A comprehensive, coherent framework is adopted and estimated using Bayesian methods. Key features: A coherent approach to evidence synthesis from multiple sources. Focus is given to Bayesian methods for evidence synthesis that can be integrated within cost-effectiveness analyses in a probabilistic framework using Markov Chain Monte Carlo simulation. Provides methods to statistically combine evidence from a range of evidence structures. Emphasizes the importance of model critique and checking for evidence consistency. Presents numerous worked examples, exercises and solutions drawn from a variety of medical disciplines throughout the book. WinBUGS code is provided for all examples. Evidence Synthesis for Decision Making in Healthcare is intended for health economists, decision modelers, statisticians and others involved in evidence synthesis, health technology assessment, and economic evaluation of health technologies. **Systematic Reviews and Evidence Synthesis of Complex Interventions: Traditional Methods and Potential Future Directions** May 30 2021 *Mixed Methods Approach to Evidence Synthesis* Dec 25 2020 *Introduction to Evidence Synthesis for Decision Making* Sep 02 2021 **STORIES Statement: Publication Standards for**

[Healthcare Education Evidence Synthesis](#) Apr 16 2020 Evidence synthesis techniques in healthcare education have been enhanced through the activities of experts in the field and the Best Evidence Medical Education (BEME) collaborative. Despite this, significant heterogeneity in techniques and reporting of healthcare education systematic review still exist and limit the usefulness of such reports. The aim of this project was to produce the STORIES (STRUCTURED approach to the Reporting In healthcare education of Evidence Synthesis) statement to offer a guide for reporting evidence synthesis in health education for use by authors and journal editors. Proceeds from the sale of this book go to support an elderly disabled person. *Quantitative Evidence Synthesis Methods for the Assessment of the Effectiveness of Treatment Sequences for Clinical and Economic Decision-making* Mar 28 2021

A Resource for Developing an Evidence Synthesis Report for Policy-making Dec 17 2022 Evidence syntheses use multidisciplinary and intersectoral sources of evidence to support policy-making. The Health Evidence Network (HEN) has supported and strengthened the use of evidence in health policy-making in the WHO European Region since 2003. The HEN synthesis report series responds to public health questions by summarizing the best available global and local findings from peer-reviewed and grey literature as well as policy options and proposes general directions strategies and actions for consideration. This resource has been developed to outline key approaches methods and considerations for a HEN evidence synthesis to support the systematic and routine use of the best available evidence for decision-making relevant to the needs of public health decision-makers. It proposes approaches that hold both scientific rigour and practical applicability for individuals and institutions that perform commission review and/or publish evidence syntheses.

Qualitative Evidence Synthesis Sep 14 2022 Qualitative evidence synthesis can be defined as the systematic and thoughtful pulling together of research insights generated in primary qualitative research papers reporting on similar topics of interest. This entry introduces researchers from a range of different disciplines to the methodological area of meta-level qualitative research. It showcases the many options available to review authors and offers some guidance on how to make sense of the multiple epistemological, theoretical, and methodological interpretations of meta-synthesis. In addition, it outlines a stepwise procedure on how to conduct a meta-synthesis of qualitative research studies and what potential choices review authors need to make, either on a protocol level or during the process of conducting a review.

Umbrella Reviews Jan 18 2023 This book is an ideal guide to umbrella reviews, overviews of reviews, and meta-epidemiologic studies for evidence synthesis. Research is conducted at different levels: primary research consists of original studies while secondary research comprises qualitative reviews, systematic reviews, and meta-analyses. Recently, a novel further level of research has been introduced, based on the analysis and pooling of reviews

and meta-analysis. This book is the first to focus solely on this new type of research design, which permits a comprehensive and powerful synthesis of scientific evidence in medicine as well as in many other fields in order to inform decision-making. All aspects are covered, including review design and registration, the searching, abstracting, appraisal, and synthesis of evidence, the appraisal of moderators and confounders, and state of the art reporting. Case studies in a range of medical specialties are then presented. The hands-on approach of the book, written by a multinational team of experts, will enable the reader to interpret and independently conduct umbrella reviews. *Evidence Synthesis in the Baseline Natural History Model /Updated* Feb 13 2020

Evidence Synthesis for Prognosis and Prediction Nov 11 2019

Synthesizing Evidence Aug 13 2022 Following the theme of the first two presentations, this presentation will focus on the choices available for research synthesis when summarizing research evidence. The presenters will describe the current research synthesis practice of the What Works Clearinghouse (WWC) as well as several alternative models, including inverse-variance weighted fixed effect and random effects meta-analysis and Bayesian meta-analysis. The presenters will begin with an overview of the context of the WWC's intervention reports, with specific attention to the method used to synthesize the results of multiple studies and the context in which synthesis occurs. The data used for the illustration will be derived from published WWC intervention reports in which at least one synthesis across two or more studies was reported. Given that most of the syntheses that the public-policy clearinghouses do involve only a very small number of studies, they could consider not doing any syntheses at all unless the number of studies reaches some minimum threshold (e.g., five studies). However, consumers really would like to know something about the typical effect, even if the number of studies is small, and are likely to adopt idiosyncratic rules to help them do this. Alternatively, the clearinghouses could take a different approach to synthesis either in place of or as an adjunct to current practice.

[Evidence Synthesis for Health Policy and Systems](#) Mar 08 2022

Network Meta-Analysis Jun 11 2022 Network meta-analyses and mixed treatment comparisons represent the uppermost level in the evidence hierarchy for decision making, in medicine as well as in other scholarly fields. They combine and exploit data from direct (i.e. head-to-head) randomized trials and combine them, when appropriate, with indirect estimates, in order to obtain more precise and robust estimates of effect to determine which management strategy is the safest, most effective, or cost-effective. They have been developed recently thanks to the current widespread availability of high power computers, but have already succeeded in becoming a highly read and impactful type of research design. Several important examples of network meta-analyses with pivotal practical implications are available, spanning from stents for coronary revascularization to psychiatric drugs. This book, the first devoted solely to this topic, aims to cover briefly but poignantly the

main topics which should be mastered to critically read and interpret as well as, if deemed worthwhile, perform and report independently a network meta-analysis and mixed treatment comparison. The editorial team represents a veritable Who's Who of worldwide experts in these topics, and everyone involved in the collection has strived to provide correct and sound yet practical advice. This book includes dozens of tables and illustrations to guide visually the reader in understanding the basics as well as the more refined details of network meta-analyses. Quoted references are per se a uniquely useful component of this book, as they provide a commented guidance to the best and most informative papers on mixed treatment comparisons. Thus, this book will be uniquely useful to students or scholars interested in these topics, including clinical researchers and practitioners, as well as statisticians, epidemiologists, psychologists and sociologists.

Methodological Briefs on Evidence

Synthesis Brief 2: Introduction Dec 13 2019

[Evidence Synthesis for Policy](#) Apr 28 2021

Data Sharing and Transparency Oct 03 2021

A Prospective Comparison of Evidence

Synthesis Search Strategies Developed with and Without Text-mining Tools Feb 24 2021

BACKGROUND: In an era of explosive growth in biomedical evidence, improving systematic review (SR) search processes is increasingly critical. Text-mining tools (TMTs) are a potentially powerful resource to improve and streamline search strategy development. Two types of TMTs are especially of interest to searchers: word frequency (useful for identifying most used keyword terms, e.g., PubReminer) and clustering (visualizing common themes, e.g., Carrot2). OBJECTIVES: The objectives of this study were to compare the benefits and trade-offs of searches with and without the use of TMTs for evidence synthesis products in real world settings. Specific questions included: (1) Do TMTs decrease the time spent developing search strategies? (2) How do TMTs affect the sensitivity and yield of searches? (3) Do TMTs identify groups of records that can be safely excluded in the search evaluation step? (4) Does the complexity of a systematic review topic affect TMT performance? In addition to quantitative data, we collected librarians' comments on their experiences using TMTs to explore when and how these new tools may be useful in systematic review search creation. METHODS: In this prospective comparative study, we included seven SR projects, and classified them into simple or complex topics. The project librarian used conventional "usual practice" (UP) methods to create the MEDLINE search strategy, while a paired TMT librarian simultaneously and independently created a search strategy using a variety of TMTs. TMT librarians could choose one or more freely available TMTs per category from a pre-selected list in each of three categories: (1) keyword/phrase tools: AntConc, PubReMiner; (2) subject term tools: MeSH on Demand, PubReMiner, Yale MeSH Analyzer; and (3) strategy evaluation tools: Carrot2, VOSviewer. We collected results from both MEDLINE searches (with and without TMTs), coded every citation's origin (UP or TMT respectively), deduplicated them, and then sent the citation

library to the review team for screening. When the draft report was submitted, we used the final list of included citations to calculate the sensitivity, precision, and number-needed-to-read for each search (with and without TMTs). Separately, we tracked the time spent on various aspects of search creation by each librarian. Simple and complex topics were analyzed separately to provide insight into whether TMTs could be more useful for one type of topic or another. RESULTS: Across all reviews, UP searches seemed to perform better than TMT, but because of the small sample size, none of these differences was statistically significant. UP searches were slightly more sensitive (92% [95% confidence intervals (CI) 85-99%]) than TMT searches (84.9% [95% CI 74.4-95.4%]). The mean number-needed-to-read was 83 (SD 34) for UP and 90 (SD 68) for TMT. Keyword and subject term development using TMTs generally took less time than those developed using UP alone. The average total time was 12 hours (SD 8) to create a complete search strategy by UP librarians, and 5 hours (SD 2) for the TMT librarians. TMTs neither affected search evaluation time nor improved identification of exclusion concepts (irrelevant records) that can be safely removed from the search set. CONCLUSION: Across all reviews but one, TMT searches were less sensitive than UP searches. For simple SR topics (i.e., single indication-single drug), TMT searches were slightly less sensitive, but reduced time spent in search design. For complex SR topics (e.g., multicomponent interventions), TMT searches were less sensitive than UP searches; nevertheless, in complex reviews, they identified unique eligible citations not found by the UP searches. TMT searches also reduced time spent in search strategy development. For all evidence synthesis types, TMT searches may be more efficient in reviews where comprehensiveness is not paramount, or as an adjunct to UP for evidence syntheses, because they can identify unique includable citations. If TMTs were easier to learn and use, their utility would be increased.

Systematic Reviews for Occupational Safety and Health Questions Apr 09 2022 "This report introduces systematic reviews of the literature as a research methodology to summarize the existing evidence with a transparent, reliable, and valid approach. It covers the systematic review steps: (1) define the question, (2) create a protocol, (3) conduct a literature search and screen for inclusion, (4) document and assess included studies, and (5) evaluate and interpret the body of evidence. The report also provides resources for drawing conclusions and developing recommendations based on the systematic review. We performed a literature review and consulted with producers and consumers of systematic reviews over the course of the project to identify available resources. National Institute for Occupational Safety and Health (NIOSH) staff provided a draft systematic review framework and continuous input to ensure relevance and applicability to occupational safety and health questions. The report draws on key general existing guidance for systematic reviews as well as identified resources specific to occupational safety and health evidence synthesis. Occupational safety and health is an extensive multidisciplinary field and encompasses a broad

spectrum of issues that affect the health and safety of individuals in the workplace. Standard systematic review tools and methods may need to be adapted to fit the unique requirements of evidence synthesis for occupational safety and health questions. The report provides practical guidance to execute a systematic review as well as considerations specific to evidence synthesis for occupational safety and health questions"-- Publisher's description.

Evidence-Based Review in Policy and Practice, an Issue of Nursing Clinics Jun 30 2021 Evidence synthesis is the evaluation or analysis of research evidence and opinion on a specific topic to aid in decision-making in health care. Although the science of evidence synthesis has developed most rapidly in relation to the meta-analysis of numerical data linked to theories of cause and effect, the further development of theoretical understandings and propositions of the nature of evidence, its role in health care delivery, and the facilitation of improved global health have increased rapidly since 2000. The articles appearing in this issue examine the role of evidence synthesis in nursing and health care and are written by expert translational scientists from across the world. Three introductory articles overview evidence synthesis and its role in evidence-based health care; methods, issues, and trends in the systematic review of health care evidence; and the development of a robust evidence base for nursing. Subsequent articles explore the impact of systematic reviews on policy and practice in a variety of settings, including perioperative care, pediatrics, rehabilitation and long-term/continuing care, mental health, and public health. The final articles discuss the impact of evidence on health policy and practice and the complexities of translating evidence into policy and practice. These articles show the importance of synthesizing evidence and translating policy and practice into action in our quest to improve health care and health outcomes.

Steps for Identifying Psychological Health Evidence Synthesis Topics May 10 2022 This case study describes the decision points and considerations required to produce an unbiased list of priority topics appropriate for evidence synthesis. Standard processes to facilitate research translation are needed to manage the multitude of steps involved in moving research into practice. Evidence synthesis is a key aspect of research translation, because it establishes the effectiveness and translation readiness of a given research topic. Evidence synthesis is resource intensive, and decisions about what evidence to synthesize should be made systematically so that resources are used efficiently. Here, we detail the multistep approach we took to identify research gaps, to assess stakeholder priorities, and to determine the feasibility and need of pursuing an evidence synthesis for each high-priority topic. We identified and reviewed authoritative sources and collated research gaps, translated research gaps into topics that could be readily prioritized, identified stakeholders and developed a prioritization rating system, and determined synthesis needs by establishing how feasible and non-duplicative efforts were to pursue evidence synthesis of the high-priority topics.

Systematic Reviews Jan 06 2022 The use and

creation of systematic reviews, with a discussion on their value, and information on how to locate, appraise and use them, and on state-of-the-art methods for conducting them.

Methodological Briefs on Evidence Synthesis Brief 7: Resources and Tools for Evidence Synthesis Nov 23 2020

Evidence Synthesis in Healthcare Nov 16 2022 Evidence Synthesis in Healthcare - a Practical Handbook for Clinicians is the first book to reveal the field of Evidence Synthesis, by combining multiple sources of quantitative/qualitative data to derive the best evidence for use in healthcare. Through the use of clearly explained examples and practical explanations, Evidence Synthesis in Healthcare - a Practical Handbook for Clinicians describes the practical tools, techniques, uses and policy considerations of evidence synthesis techniques in modern healthcare practice.

Evidence Synthesis Using Advanced Meta-analysis Methods for Controversies in Pancreatic Diseases Jan 26 2021

Introduction to Evidence Synthesis for Decision Making Jun 18 2020

The Adoption and Effectiveness of Automation in Health Evidence Synthesis Oct 11 2019

Network Meta-analysis Oct 15 2022 Network meta-analyses and mixed treatment

comparisons represent the uppermost level in the evidence hierarchy for decision making, in medicine as well as in other scholarly fields. This book covers the main topics which should be mastered to critically read and interpret as well as, if deemed worthwhile, perform and report independently a network meta-analysis and mixed treatment comparison. The text includes dozens of tables and illustrations to guide visually the reader in understanding the basics as well as the more refined details of network meta-analyses.

VA Evidence Synthesis Program Evidence Briefs May 18 2020

Moving beyond effectiveness in evidence synthesis : methodological issues in the synthesis of diverse sources of evidence Nov 04 2021

Acknowledging a 'dual Heritage' for Qualitative Evidence Synthesis Jan 14 2020 Qualitative

evidence synthesis, an umbrella term that includes all forms of secondary qualitative synthesis and analysis including qualitative systematic review, has emerged from the confluence of conventional systematic review methods with methods for primary qualitative research. With such a 'mixed heritage', and the juxtaposition of quite different epistemological positions, it is inevitable that the resultant tensions have generated considerable creative energy and significant methodological frictions. These tensions have created an environment within which I have sought to make a contribution. Working with colleagues within the School of Health and Related Research (SchARR), University of Sheffield, and collaborators at other institutions, including fellow co-convenors of the Cochrane Collaboration Qualitative Methods Group, I have examined the state of qualitative synthesis methods (Paper M1). I have traced and examined the respective contributions of the two components of the mixed heritage through five methodological papers that examine the stages of the systematic review process; searching (Paper M2), quality assessment

(Paper M3), framework and thematic synthesis (Paper M4) and exploring heterogeneity (Paper M5) through to consideration of reporting standards (Papers M1-M3). This Thesis explores these issues through five case studies (Case Studies 1-5) to which I have contributed as lead methodologist. While, initially at least, the legacy of conventional systematic review methods could be seen to enjoy dominance, an emerging imperative to review systematically different types of evidence to explore different review questions, coupled with reduced time and resource envelopes within which to address time-critical questions from policy and practice, has opened up a more versatile and pragmatic toolkit. The Thesis concludes by identifying key methodological issues that require further investigation. I contend that many outstanding methodological challenges may derive their most productive insights from a more detailed consideration of corresponding solutions from

primary qualitative research. The five papers in this body of work, therefore, make an original contribution to knowledge by establishing and demonstrating methodological principles by which flexible and context sensitive application of the versatile 'systematic review model' can be used to meet the pragmatic demands of health services research and technology assessment.

Statistical and Graphical Evidence Synthesis Methods in Health Technology Assessment Sep 21 2020

Methodological Briefs on Evidence Synthesis Brief 5: Commissioning and Managing an Evidence Synthesis Project Aug 21 2020

Multi-parameter Evidence Synthesis Aug 01 2021

Evidence Synthesis in the Baseline Natural History Model Mar 16 2020 This Technical Support Document reviews synthesis issues

that arise on the construction of a baseline natural history model. The intention is to cover both the absolute response to treatment on the outcome measures on which comparative effectiveness is defined, and also other elements of the natural history model, which are usually "downstream" of the shorter-term effects reported in trials. The TSDs provide a review of the current state of the art in each topic area, and make clear recommendations on the implementation of methods and reporting standards where it is appropriate to do so. They aim to provide assistance to all those involved in submitting or critiquing evidence as part of NICE Technology Appraisals, whether manufacturers, assessment groups or any other stakeholder type.

Methodological Briefs on Evidence Synthesis Brief 3: Developing and Designing an Evidence Synthesis Product Oct 23 2020