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[P162] The need to collaborate for updating systematic reviews

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### **Abstract**

**Background:** Evidence for the effects of a drug may change rapidly and requires a regular update of systematic reviews. A systematic review on erythropoietin in cancer patients was produced by the Cochrane Haematological Malignancies Group (Cologne, Germany) and published in the Cochrane Library in 2004. Data included covered the period 1985 to May 2002. Recent clinical evidence and Cochrane policy required a review update. In parallel a critical appraisal for the use of erythropoietin was commissioned by the National Institute of Clinical Excellence (NICE), UK.

**Objectives:** To avoid duplication of efforts and to provide the most updated information within a short time.

**Methods:** The first Cochrane review on erythropoietin was used as basis for an NICE critical appraisal by an independent review team at the University of Birmingham. Methods, such as search strategy, data extraction and quality assessment were similar to the methods used in the original Cochrane Review. Searching for studies published since May 2002 was undertaken by researchers at the University of Birmingham. Data extraction was shared between the teams in Cologne and Birmingham. Subsequent research tasks were performed in close collaboration to produce both an authoritative NICE document and an updated Cochrane Review.

**Results:** The original Cochrane review included 27 trials. For the update 17 additional studies, published between May 02 and September 04, were identified and included. Data for the updated Cochrane Review will be available by summer 2005. The time lag between the inclusion of the new studies and the publication of the updated systematic review will be much shorter than for the original review.

**Conclusion:** Updating systematic reviews may involve the inclusion of large numbers of studies. International collaboration avoids duplication of efforts, improves the quality of systematic reviews and provides updated information with better timeliness.