Cochrane reviews: relevant more than ever

In The Review Trish Greenhalgh\(^1\) refers back to the halcyon days of editorials and opinion pieces in medical journals that relied on an author’s bias, speculation, and conjecture that passed for academic debate in the mid-1980s. She decries Cochrane reviews as narrow, boring articles that seldom answer the ‘messy context’ of clinical practice. Sorry, but we don’t agree. Using narrative reviews that do not systematically identify, assess, and synthesise information produces evidence that is biased, misleading, and may harm patients.\(^3\)

Surely informed clinical practice means telling our patients about what we know is effective, what we know is ineffective, and what we are uncertain about?\(^4\) The Cochrane Collaboration and other useful sources of synthesised evidence such as the BMJ publishing group’s Clinical Evidence demarcate uncertainty and allow us to use regularly updated evidence when helping our patients. What is wrong with this? Every doctor, irrespective of their clinical discipline, cannot possibly keep up with the burgeoning medical literature. In 2009 1.5 million articles were published in 25 400 medical journals. In narrower disciplines than general practice (diagnostic imaging in cardiology) it is estimated a doctor would have to read 95 articles every day to keep up to date.\(^5\)

One of several solutions lies with clinical practice. Cochrane reviews remain key components for GPs who wish to remain safe and effective doctors.

Tom Fahey, HRB Centre for Primary Care Research, Department of General Practice, RCSI Medical School, 123 St Stephens Green, Dublin 2, Republic of Ireland.

E-mail: tomfahey@rcsi.ie

Susann M Smith, HRB Centre for Primary Care Research, Department of General Practice, Dublin, Republic of Ireland.

Floris van de Laar, Department of General Practice, Radboud University Nijmegen Medical Centre, Nijmegen, the Netherlands.

Tim Kenealy, Department of General Practice and Primary Health Care, The University of Auckland, New Zealand.

Bruce Arroll, Department of General Practice and Primary Health Care, The University of Auckland, New Zealand.

Competing interests All authors are active members of the Cochrane Primary Health Care Field and Cochrane Collaborative Review Groups.

REFERENCES


DOI: 10.3399/bjgp13X660643

Beyond skin: the need for a new approach to the management of psoriasis in primary care, and Iona Heath’s Harveian Oration

It is becoming my habitual response as a GP commissioner to take issue with