Cochrane Rehabilitation
Knowledge Translation Activities for different Stakeholders

Carlotte Kiekens, Coordinator
Physical and Rehabilitation Medicine, UZ Leuven, Belgium
ISRPM WHO Liaison committee chair

@CarlotteK
@CochraneRehab

Trusted evidence.
Informed decisions.
Better health.
Nothing to disclose
A world of improved health where decisions about health and health care are informed by high-quality, relevant and up-to-date synthesized research evidence.
What does Cochrane do?

Cochrane gathers and summarizes the best evidence from research producing systematic reviews and meta-analysis including only Randomized Controlled Trials (RCTs).

Cochrane does not accept commercial or conflicted funding.
Cochrane Organization

**Review Groups**: systematic reviews (56)

**Methods Groups**: development of methods for reviews (17)

**Centres**: local knowledge translation
- >52 countries & regions

**Fields**: knowledge translation for a specific health community other than a condition (11)
56 Cochrane Review Groups

>20 reviews of rehab interest
>1 review of rehab interest

1. Acute Respiratory Infections Group
2. Airways Group
3. Anaesthesia, Critical and Emergency Care Group
4. Back and Neck Group
5. Bone, Joint and Muscle Trauma Group
6. Breast Cancer Group
7. Childhood Cancer Group
8. Cochrane Response
9. Colorectal Cancer Group
10. Common Mental Disorders Group
11. Consumers and Communication Group
12. Covidence Review Group
13. Cystic Fibrosis and Genetic Disorders Group
14. Dementia and Cognitive Improvement Group
15. Developmental, Psychosocial and Learning Problems Group
16. Drugs and Alcohol Group
17. Effective Practice and Organisation of Care Group
18. ENT Group
19. Epilepsy Group
20. Eyes and Vision Group
21. Fertility Regulation Group
22. Gynaecological, Neuro-oncology and Orphan Cancer Group
23. Gynaecology and Fertility Group
24. Haematological Malignancies Group
25. Heart Group
26. Hepato-Biliary Group
27. HIV/AIDS Group
28. Hypertension Group
29. IBD Group
30. Incontinence Group
31. Infectious Diseases Group
32. Injuries Group
33. Kidney and Transplant Group
34. Lung Cancer Group
35. Metabolic and Endocrine Disorders Group
36. Methodology Review Group
37. Movement Disorders Group
38. Multiple Sclerosis and Rare Diseases of the CNS Group
39. Musculoskeletal Group
40. Neonatal Group
41. Neuromuscular Group
42. Oral Health Group
43. Pain, Palliative and Supportive Care Group
44. Pregnancy and Childbirth Group
45. Public Health Group
46. Schizophrenia Group
47. Skin Group
48. STI Group
49. Stroke Group
50. Test CRG
51. Tobacco Addiction Group
52. Upper GI and Pancreatic Diseases Group
53. Urology Group
54. Vascular Group
55. Work Group
56. Wounds Group
Cochrane Fields

Focus on dimensions of health care other than a condition or topic

• the setting of care (primary care)
• the type of consumer (children, older people)
• or the type of provider (nursing).

Cochrane Rehabilitation focuses on a specific health strategy.
Role of Cochrane Fields:
a bridge, knowledge translation

- facilitate work of Cochrane Review Groups
- ensure that Cochrane reviews are both relevant and accessible to their fellow specialists and consumers
Vision of Cochrane Rehabilitation

All rehabilitation professionals can apply Evidence Based Clinical Practice

Decision makers will be able to take decisions according to the best and most appropriate evidence
Mission of Cochrane Rehabilitation

Allow all rehabilitation professionals to combine the best available evidence as gathered by high quality Cochrane systematic reviews, with their own clinical expertise and the values of patients.

Improve the methods for evidence synthesis, to make them coherent with the needs of disabled people and daily clinical practice in rehabilitation.
Organigram

Executive Committee
- Chair: W. Levack (NZL)
  - Co-chair: F. Rathore (PAK)
- Chair: A. Malmivaara (FIN)
  - Co-chair: T. Meyer (DEU)
- Chair: J. Patrick Engkasan (MYS)
  - Co-Chair: E. Illieva (BGR)
- Chair: F. Gimigliano (ITA)
  - Co-Chair: C. Kiekens (BEL)
- Chair: A. Oral (Tur)
  - Co-Chair: F. Grubisic (HRV)
- LMIC: W. Levack (NZL)
  - Rehabilitation Professionals: T. Howe (GBR)

Coordinators
- C. Kiekens (BEL)

Advisory Board
- 5 World and 4 Regional Scientific Societies,
- 12 Journals, 4 Experts
- 4 Representatives
- 3 Cochrane Groups

Partners
- To start in 2018

Contributors
- 254 contributors from 54 countries of all continents

Headquarters
- IRCCS Don Gnocchi & University of Brescia

Treasurer
- R. Frischknecht (CHE)

Fundraiser
- A. Haig (USA)

Director
- S. Negrini (ITA)
The Executive Committee

1. Stefano Negrini, MD (Italy) – Director
2. Carlotte Kiekens, MD (Belgium) – Coordinator
3. Francesca Gimigliano, MD, PhD (Italy) – Communication Com
4. Frane Grubisic, MD (Croatia) – Publication Com
5. Tracey Howe, PT (United Kingdom) – Professional representative
6. Elena Ilieva, MD, PhD (Bulgaria) – Education Com
7. William Levack, PT, PhD (New Zealand) – Reviews Com
8. Antti Malmivaara (Finland) – Method Com
9. Thorsten Meyer, Psy, PhD (Germany) – Method Com
10. Aydan Oral, MD (Turkey) – Publication Com
11. Julia Patrick Engkasan, MD (Malaysia) – Education Com
12. Farooq Rathore, MD (Pakistan) – Reviews Com; LMIC representative
Knowledge Translation strategy

- Improve climate / building demand
- Prioritisation and co-production
- Exchange
- Packaging / push
- Facilitating pull
- Effective and Sustainable KT
Packaging, push and support to implementation

Ensuring our users receive and can act on our reviews and products

Review Committee
- Review selection and website database

Communication Committee
- Website and social media

Publication Committee
- Cochrane Corners

Ebook (in production)
Reviews Committee

Tagged all the Cochrane reviews from 1996 to Agust 2018
Ongoing process to constantly update the results

Levack WM, Rathore FA, Pollet J, Negrini S.

One in 11 Cochrane reviews are on rehabilitation interventions, according to pragmatic inclusion criteria developed by Cochrane Rehabilitation.

List of Cochrane reviews of rehabilitation interest. Updated at 31/08/2018

By subtopic:
- Health Conditions (1104)
  - Cardiac (17)
  - Gynaecology or Urology (49)
  - Mental Health (23)
  - Neurological (325)
  - Older Adults (>65 years) (82)
  - Oncology (45)
  - Orthopaedic or musculoskeletal (incl. pain conditions) (385)
- Other (59)
- Paediatrics (<18 years) (69)
- Respiratory (54)
- Vocational (1)
- Professionals (1273)
  - Clinical Psychologist (59)
  - Occupational Therapist (117)
  - Orthotist or Prosthetist (5)
  - Physical and Rehabilitation Medicine physician (405)
  - Physiotherapist (459)
## Communication Committee

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<td>Blogshots</td>
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Blogshots

Cochrane Rehabilitation

Yoga for stroke rehabilitation
We are uncertain whether yoga improves quality of life, balance, gait, depression, anxiety and disability in stroke survivors. Whether or not yoga has any adverse effects is also uncertain.
Cochrane Review; two studies with 72 people comparing yoga vs waiting-list control in adults with stroke.
Cochrane Review by: Cochrane Stroke Group

Vocational rehabilitation for enhancing return-to-work in workers with traumatic upper limb injuries
We are uncertain whether vocational rehabilitation improves workers' ability to return to work after traumatic upper limb injuries. Effects on functional status and quality of life are also uncertain. EVIDENCE GAP.
Cochrane Review; no eligible studies found.
Cochrane Review by: Cochrane Work Group

Fitness training for cardiorespiratory conditioning after traumatic brain injury
Cardiorespiratory exercise programmes may improve cardiorespiratory fitness in people after traumatic brain injury. It is uncertain whether they improve depression, cognition or fatigue or whether there are any adverse effects.
Cochrane Review; 8 studies with 396 people with traumatic brain injury of any age or severity, comparing cardiorespiratory exercise prescribed alone vs usual care; a non-exercise intervention or no intervention.
Cochrane Review by: Cochrane Injuries

Treatment of fatigue in amyotrophic lateral sclerosis/motor neuron disease
It is uncertain whether modafinil; breathing exercises, exercises with weights, or magnetic brain stimulation are safe and effective at improving fatigue in people with amyotrophic lateral sclerosis (also known as motor neuron disease). EVIDENCE GAP.
Cochrane Review; 4 studies with 88 people with amyotrophic lateral sclerosis, comparing pharmacological and non-pharmacological treatments vs placebo.
Cochrane Review by: Cochrane Neuromuscular
Blogshots translations

Cochrane Rehabilitation

Elektro- en robotondersteunde training van de arm voor het verbeteren van activiteiten van het dagelijks leven, functie en spierkracht van de arm na een hersenbloeding.

Elektromechanische en robotondersteunde training, vergeleken met alle andere interventies, verbeteren activiteiten van het dagelijks leven en functie en spierkracht van de arm bij volwassenen na een hersenbloeding aan het einde van de behandeling.

Cochrane Review: 45 studies met 1613 vollazen naar een hersenbloeding, vergelijken elektromechanische en robotondersteunde training van de arm vs. alle andere interventies.
Cochrane Review door: Cochrane Stroke Group

Cochrane Rehabilitation

Rehabilitación cardíaca basada en ejercicio para personas con dispositivos de asistencia ventricular implantables

Es incierto que la rehabilitación cardíaca basada en ejercicio reduzca la mortalidad, la re-hospitalización y la infección en personas con dispositivos de asistencia ventricular implantables en comparación con el cuidado usual.

EVIDENCIA EN LA EVIDENCIA

Revie de Cochrane; 2 estudios que incluyeron 40 adultos con dispositivos de asistencia ventricular implantables, que compararon la rehabilitación cardíaca basada en el ejercicio vs. el cuidado usual.
Revie de Cochrane por: Cochrane Heart Group

Cochrane Rehabilitation

Vježbanje kod reumatoidnog artritisa šaka

Vježbanje poboljšava snagu i jačinu pincetnog hrvata oboj žake, što može povećati funkciju žake i suradnjivost pacijenta te može srednjoročno i dugoročno umanjiti bol. Nema izvještaja o nuspojavanje vježbanja.

Autori pregleda nisu sigurni da li vježbanje poboljšava funkciju žake, snagu i jačinu pincetnog hrvata samo ljeve ili desne žake te djeluje li na kratkoročno i dugoročno smanjenje boli.
Cochrane pregled; 7 studija u koje je uključena 841 odrasla osoba s reumatoidnim artritism, usporedba sa stanjem bez vježbanja.
Cochrane sustavni pregled izradila: Cochrane grupa za mišićno-kožnim sustav.

Cochrane Rehabilitation

La Riabilitazione vocazionale favorisce il ritorno all’attività lavorativa dopo lesioni traumatiche agli arti superiori

Non siamo sicuri che la riabilitazione vocazionale migliori le abilità per il ritorno all’attività lavorativa dopo lesioni traumatiche agli arti superiori. Anche gli effetti sullo stato funzionale e sulla qualità della vita risultano incerti.

EVIDENCE GAP

Revisione Cochrane; non sono stati trovati studi idonei
Cochrane Review by: Cochrane Work Group
Publication Committee
Cochrane Corners
Facilitating pull

Growing our users’ capacity to find and use our reviews

Education Committee

- Workshops
- Courses and video-presentations on EBM and Cochrane
- Scientific presentations and lectures
Improving climate

Advocating for evidence informed health decision-making

Methodology Committee

• surveys
• discussion and position papers
Effective and Sustainable Knowledge Translation

Building a sustainable infrastructure for knowledge translation

Contributors
- Calls

Partners
- Tasks and Projects
Calls

We are now looking for:

- Education Committee contributors
- Translators
- Bloggers
Rewards

Page on the website

Milestones badges according to work performed

Cochrane membership (50 hours of work)

<table>
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<tr>
<th>Betty Bellard O’Keefe, USA</th>
<th>Francesca Cecchi, Italy</th>
<th>Francesco Agostini, Italy</th>
<th>Alberto Giattini, Italy</th>
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<td>NL Contributor</td>
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<tr>
<td>Sara Laxe Garcia, Spain</td>
<td>Sabrina Paganoni, USA</td>
<td>David Morgenroth, USA</td>
<td>Saad Bindawas, Saudi Arabia</td>
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<tr>
<td>Trudy Bekkerings, Belgium</td>
<td>Sanobe Naz, Pakistan</td>
<td>Ana Poljicanin, Croatia</td>
<td>Alex Pollock, UK</td>
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<td>Susan Amijo Olivo, Canada</td>
<td>Augusto Fusco, Italy</td>
<td>Livia Pujjak, Croatia</td>
<td>Alexandra Chirica</td>
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<tr>
<td>Fateh Muhammad Al-Farabi</td>
<td>Paolo Patelli, Italy</td>
<td>Wajida Perveen</td>
<td>Catherine J. VanDerwerker</td>
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Cochrane Rehabilitation contributors of 2017.
**Exchange**

Engaging with our users to support their evidence informed decision making

Personal direct engagement with Scientific Societies

Advisory Board

Participation in main International and Regional Meetings

Partnerships

Memorandum of Understanding
Advisory Board

3 Cochrane Groups: Italy, Musculoskeletal, Stroke
5 World Scientific Societies: ISPO, ISPRM, WCPT, WFN, WFOT
4 Regional Scientific Societies: AMLAR, AOSPRM, ESPRM, UEMS-PRM Section
4 Experts: China, Colombia, Switzerland, USA
4 Representatives: consumers, LMIC (2), WHO

First meeting in Buenos Aires #ISPRM 2017
Second meeting in Paris #ISPRM 2018
Third meeting in Kobe #ISPRM2019
Knowledge Translation case-study: Cochrane Rehabilitation – Building partnerships with European national Societies of Physical and Rehabilitation Medicine to support the use of evidence in the Rehabilitation Field

Cochrane Rehabilitation, are a Cochrane Field with the aim to serve as a bridge between all the stakeholders in Rehabilitation and Cochrane. On one side we try to drive evidence and methods developed by Cochrane to the world of Rehabilitation and on the other we convey priorities, needs and specificities of Rehabilitation to Cochrane. In this case study we discuss our work to build a partnership with the International Society of Physical and Rehabilitation Medicine (ISPRM), one of the largest associations in our Field.

Cochrane Rehabilitation grew out of the European Society of Physical and Rehabilitation Medicine (ESPRM). It was an initiative of the Evidence Based Medicine Scientific Special Interest group that was founded in 2014. ESPRM is an association which represents all of the different European PRM (Physical and Rehabilitation Medicine) national societies. A letter of cooperation between Cochrane Rehabilitation and ESPRM was signed in 2016. In the past few years, as the role of Cochrane Rehabilitation has grown, we made a strategic decision to encourage formal partnerships with the individual national societies in the Field. The primary aim of these partnerships is to help us to disseminate and translate Cochrane evidence for stakeholders.

Working towards success
- Since we were already involved with the European Society, where each national society is represented by two delegates, we had existing relationships with them, so approaching them was easy.
Cochrane Rehabilitation has been signing Memoranda of Understanding in order to create partnerships with different Groups, Societies, Universities, Hospitals, Journals and other Rehabilitation stakeholders.

Partners are defined according to their relationships with Cochrane Rehabilitation as:

- Hosting and Financing
- Financing and Strategic
- Strategic
- Journals
- National Societies
- Universities, Hospitals, Research Centres and other organizations
Special projects

be4rehab

• with the World Health Organization to produce the WHO «Package of Rehabilitation Interventions»

Cochrane Rehabilitation ebook

• European PRM bodies (coauthors and financiers)
• Vanvitelli University of Naples – University Politecnica of Ancona

Prioritization Process

• Worldwide National PRM Societies

RCTRaCk
be4rehab: WHO-Cochrane Rehabilitation

be4rehab: Best Evidence for Rehabilitation

Data from selected best Guidelines (expertise and evidence) and from Cochrane Reviews on 20 health conditions to produce the Minimum Package of Rehabilitation Interventions for Ministries of Health

Cochrane rehabilitation role:

• co-responsible of the methodology
• recruitment and methodological overview of 10 out of 20 existing review groups
• Extraction of the best available evidence from Cochrane Systematic Reviews
Cochrane Rehabilitation ebook

“Live” e-book available for free in Internet to be constantly updated including all Cochrane reviews relevant to rehabilitation

Contents

• Titles
• Abstracts
• Plain language summary
• Summaries for the different audiences
  • Students, health managers & politicians, clinicians
• Blogshots and other relevant products
# Yoga treatment for chronic non-specific low back pain

**Reference:**

**DOI:** 10.1002/14651858.CD010671.pub2

**Authors:**
Wieland LS, Skotez N, Pilkington K, Yempati R, D'Adamo CR, Berman BM

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## Reference

### Plain language summary

Yoga interventions can be considered as a safe and effective complement for patients with chronic non-specific low back pain.

### Summary for clinicians

Yoga treatment for chronic non-specific low back pain is a promising complementary intervention but further research is required.

### Summary for students

Yoga may be beneficial for patients with chronic non-specific low back pain, but more research is needed.

### Summary for health managers

Yoga can be an effective complementary therapy for chronic non-specific low back pain.

### Summary for consumers

Yoga can be a useful complementary therapy for chronic non-specific low back pain, but more research is needed.

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### Diseases:
1. Musculoskeletal > 1.6 Back Pain/Radicular Low Back Pain

### Interventions:
- Exercises
- Education
- Others

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**More like this**

- Physical activity and exercise for chronic pain in adults: an overview of Cochrane Reviews
- Topical anesthetics for acute and chronic pain in adults - an overview of Cochrane Reviews
- Morphine for chronic neuropathic pain in adults
- Stretch for the treatment and prevention of contractures
- Yoga for improving health-related quality of life, mental health and cancer-related symptoms in women diagnosed with breast cancer
The content summaries

Production of the summaries for different **target audiences**

- PRM physicians and other rehabilitation professionals
- postgraduate PRM trainees and medical students
- Politicians
- consumers, with Cochrane

**Translation** into different languages

**Publication**

Continuous **updating**
Thank you ☺ ありがとう
Join us, follow us!

Receive Weekly Evidence in Rehabilitation
http://rehabilitation.cochrane.org
cochrane.rehabilitation@gmail.com
@CochraneRehab

Trusted evidence.
Informed decisions.
Better health.