

Compiling the best available evidence rapidly



Initially there was no research available about how COVID-19 affects rehabilitation needs, patients and services. Cochrane Rehabilitation used new approaches to get the best available evidence out quickly for rehabilitation teams and patients around the world.

What we did



Aim

Cochrane Rehabilitation is a global network. Our headquarters are in Italy, one of the first countries to be affected by the COVID-19 pandemic. Many experts published their opinions about the impact of COVID-19 on rehabilitation early on, but none were based on real-world experience. We wanted to share information rapidly as it emerged so rehabilitation services and patients around the world would know how the pandemic might affect them.



Activity

Since March 2020, we have been compiling the best evidence available into a **living rapid systematic review**. 'Living' means the review is updated monthly, incorporating all relevant new evidence as it becomes available.

We also developed an online **interactive living evidence map** which synthesises research relevant to the needs and priorities and provides an interactive access to the current results.



Collaboration

We are working with:

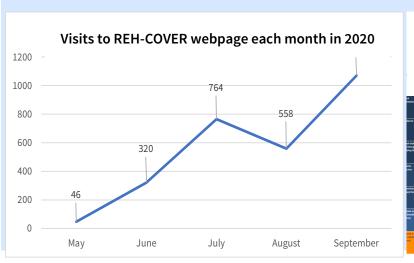
- The World Health Organization Rehabilitation Programme
- Cochrane Rehabilitation REH-COVER International Multiprofessional Steering Committee
- Cochrane Rehabilitation Advisory Board which includes clinicians, consumers, scientists and journal representatives from around the world, including low- and middle-income countries

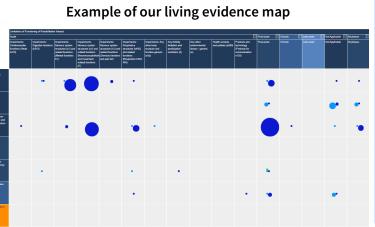
What we achieved

When the COVID-19 pandemic began, patients, family members and healthcare professionals needed information about what to expect: Cochrane Rehabilitation acted fast to share all the emerging evidence. At first this were stories about individual patients (case reports) or groups of patients (case series). We added more robust evidence as soon as it was available. We are continuing to summarise and map the latest evidence online, using easy-to-understand formats.

We worked with the World Health Organization Rehabilitation Programme to identify the highest research priorities. We jointly defined the topics for which to search the best available evidence about the impact of COVID-19. These were also used to develop a Cochrane Library Special Collection.

Rehabilitation professionals and decision-makers around the world confirmed/stated this is a good idea. Our website was visited almost 5,000 times in its first five months and the numbers continue to grow.





See more about REH-COVER (REHabilitation – COVID-19 Evidence-based Response) here: https://rehabilitation.cochrane.org/resources/cochrane-rehabilitation-versus-covid-19 https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD202002/full

What we learned

- It is possible to **compile some evidence to help decision-makers, even if little good quality research exists**. We have developed an approach that combines both 'rapid' and 'living' evidence.
- Cochrane is able to adapt quickly. At first, we focused on synthesising and mapping the best available evidence quickly, which was expert opinions and case reports. As better-quality evidence emerged, we were able to focus more on checking and improving our analysis and implications.
 - **Working with diverse stakeholders** helps to make sure evidence is relevant and accessible to many people. It is easier to build on existing relationships to progress quickly.



Learn more

For more information contact: cochrane.rehabilitation@gmail.com