



The University of Manchester



Cochrane
Wounds

Trusted evidence.
Informed decisions.
Better health.

Disseminating network meta-analyses

Podcasts, plain language summaries, blogs & blogshots

Gill Norman



Fitting the message to the medium

- Cochrane podcasts are very short

Podcast: Dressings and topical agents (gels, ointments and creams) for treating venous leg ulcers

Venous leg ulcers are the most common type of lower leg wound, affecting up to three people in every 1000 in some studies. Gill Norman from the University of Manchester in the UK, and colleagues, looked at the trials of dressings and topical agents in a new Cochrane Review in June 2018, and we asked Gill to outline their findings in this podcast.



[Download podcast](#) - [Read transcript](#)

John: Hello, I'm John Hilton, editor in the Cochrane Editorial and Methods department. Venous leg ulcers are the most common type of lower leg wound, affecting up to three people in every 1000 in some studies. Gill Norman from the University of Manchester in the UK, and colleagues, looked at the trials of dressings and topical agents in a new Cochrane Review in June 2018, and we asked Gill to outline their findings in this podcast.

Gill: Venous leg ulcers are open skin wounds caused by problems with the blood flow back up through the veins in the leg. They are often painful and slow to heal, and treatment often involves compression from stockings or bandages, which are usually combined with a wound dressing.



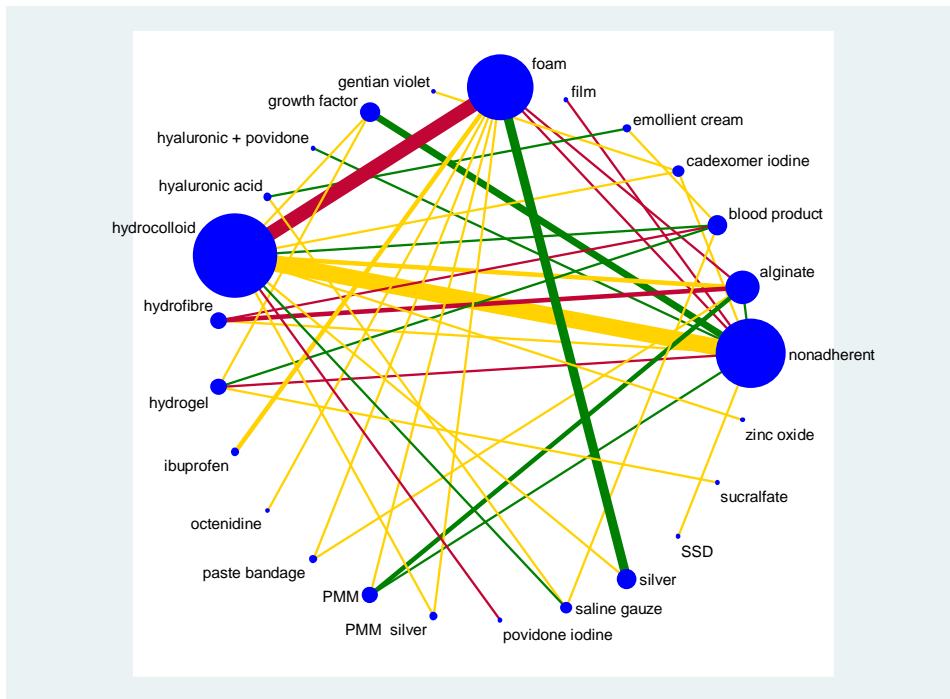
Targeting the audience

- If possible get feedback from a range of readers
- Assume listeners/readers may be very unfamiliar with NMA

“Most clinicians are not familiar with the methodology of systematic review network meta-analysis (NMA). Please provide a succinct description of the NMA in the methods section.”

Peer reviewer, clinical journal: December 2019

Limited space; non-technical language



- Complexity of methods
- Complexity of results

Possible approaches

- Explain the question and why you needed a network
- Have a clear take-home message – even if it's one of uncertainty
- Don't feel you have to summarise your whole abstract or SoFT



Summarising complexity in 400 words

- Question: Condition, available treatments, outcome
- Methods: “....we did a network meta-analysis to simultaneously compare multiple treatments across different studies.”
- What we found: RCTs, participants, treatments, network
- How good is the evidence: Certainty and its meaning
- Which treatment is likely to be best? Important caveats
- Summary



Other media to think about:

- Podcasts: ~ 400 words
- Cochrane plain language summaries: < 700 words
- Cochrane blogshots: < 100 words
- Evidently Cochrane blogs ~ 1000 words & figs
- All audiences likely to include non-methodologists



Blogshot of an NMA



Evidence for Everyday Nursing

Dressings and topical agents to treat pressure ulcers



The effectiveness of different dressings and topical agents for treating pressure ulcers remains unclear
EVIDENCE GAP



Cochrane review; 51 studies (2947 people), including a network meta-analysis of 21 dressings and topical agents (39 studies, 2127 people)

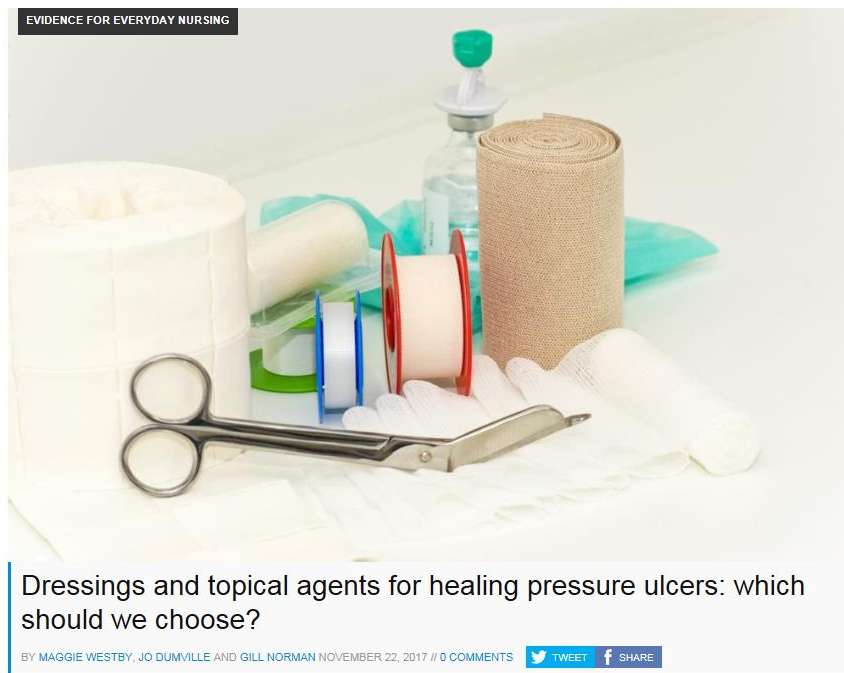




PLS of an NMA

- Structure supports focus on points used in podcast
- Consumer peer review
- Non-specialist input into writing

Bloggging an NMA



- Evidently Cochrane
- More space
- Figures – we included network
- Focus on clinical relevance

In this blog, three Cochrane Review authors share the latest evidence on dressings and topical agents for pressure ulcers. Using a technique (network meta-analysis) to compare each treatment with every other in the trials, are we any further forward in making informed choices about which to use?

We set out to answer this question by doing a systematic review and meta-analysis of the evidence on dressings and topical agents for healing pressure ulcers. The result is a Cochrane Review, which has been published recently. We think we have done a good review – but it is dealing with poor quality evidence, and because of that, there is a lot of uncertainty about the results.

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