

Cochrane Rehabilitation – Connecting Rehabilitation Professionals to Evidence

Cochrane is a global independent network that exists to help funders, providers, and consumers make better decision about healthcare. Cochrane is best known for its highly trustworthy and fiercely independent systematic reviews, which it publishes through the Cochrane Library. Importantly, access to all resources in the Cochrane Library is free for all people in Aotearoa New Zealand (<https://www.health.govt.nz/our-work/cochrane-library>). For physiotherapists in New Zealand, the Cochrane Library provides a practically endless resource for continued professional development.

Last year marked the fourth anniversary of Cochrane Rehabilitation – a field within Cochrane that was launched in December 2016 to connect the organisation to the rehabilitation community, that is, consumers, providers, researchers, funders, and policy makers of rehabilitation services (Arienti et al., in press). Cochrane Rehabilitation is a two-way bridge, in that it functions both to make Cochrane’s extensive resources accessible to rehabilitation stakeholders and to inform the work of Cochrane from the perspective of these stakeholders and their everyday needs (Negrini et al., 2018).

Over the past four years, Cochrane Rehabilitation has become a large organisation with over 15,000 active users in 174 countries. In addition to its Executive Committee, Advisory Committee, and Advisory Board, Cochrane Rehabilitation has five working areas that focus on activities that need regular updates and maintenance: review, publication, education, methodology, and communication. A common misunderstanding is that Cochrane Rehabilitation publishes its own systematic reviews: it does not. The production of systematic reviews is left to Cochrane’s many review groups. As a “field”, Cochrane Rehabilitation’s main job is translational: making the work of review groups more relevant, more accessible, and more applicable to the everyday activities of people involved in rehabilitation. For instance, the Review Working Group has now electronically “tagged” over 10,000 systematic reviews in the Cochrane Library to identify those most relevant to the practice of rehabilitation (Levack et al., 2019). This work has then been used to identify topics for summarisation and dissemination via Cochrane Corners, and these have now been published in 14 rehabilitation journals internationally (Arienti et al., in press); 53 were published in 2020 alone. The Review Working Group is now engaging with the Cochrane Library to make “rehabilitation” a quick filter to add to its search engine, based on this existing tagging work.

In addition to these working areas, Cochrane Rehabilitation also undertakes special projects. In 2020, a project was launched to improve access to evidence on rehabilitation for people with Covid-19. Called the “Rehabilitation – COVID-19 Evidence-based Response” (REH-COVER), the project has been organised around five main activities related to Covid-19 rehabilitation: production of rapid living systematic reviews, production of an interactive living evidence map, prioritisation of research topics on rehabilitation and Covid-19 in collaboration with the World

Health Organization (WHO), production of a Cochrane Library Special Collection on Covid-19 and rehabilitation for patients with functional consequences of acute illness, and lastly, collaboration with the COVID-19 Evidence Network to support decision-making (<https://rehabilitation.cochrane.org/resources/cochrane-rehabilitation-versus-covid-19>).

Cochrane Rehabilitation also works extensively with the WHO on its Rehabilitation 2030 strategy. This work has involved the development of a “package of intervention” for 16 of the most commonly disabling conditions (Rauch et al., 2019). These packages aim to set a benchmark for basic rehabilitation services for these conditions in all countries globally. Cochrane Rehabilitation is doing the work to collate the best evidence for rehabilitation to inform these packages.

A number of international projects have also been undertaken to further the development of research methods to improve the quality of evidence in rehabilitation. Guided by the Methods Working Area, this work began with a two-day symposium, funded in part by the Royal Society Te Āparangi, which resulted in the production of a special issue of the *European Journal of Physical & Rehabilitation Medicine* on systematic review methods for rehabilitation topics (Levack et al., 2019). More recently, the Methods Working Area has been developing a rehabilitation extension to the Consolidated Standards of Reporting Trials (CONSORT) statement, with the working title, Randomized Controlled Trial Rehabilitation Checklist (RCTRACK) (Negrini et al., 2020). The CONSORT statement is a list of criteria endorsed by all leading health science journals, including the *New Zealand Journal of Physiotherapy*, that describes a minimum level of reporting required in any published article on a clinical trial. The CONSORT statement ensures that when researchers publish findings from randomised controlled trials, all key information needed to evaluate the quality of the study and to apply it to clinical practice has been included in the report. The CONSORT statement has resulted in a measurable improvement in the quality of published research since it was first launched (Kane et al., 2007). However, this statement was initially created with medical and pharmaceutical research in mind, and it does not include all the standards that we need to produce informative, trustworthy, reproducible rehabilitation research. The work towards RCTRACK has been undertaken to address this gap – to improve the quality of reporting of rehabilitation trials and systematic reviews in order to produce better evidence to guide clinical practice.

Cochrane Rehabilitation has undertaken many other activities in many other areas (Arienti et al., in press): the production of a free online e-book on best evidence in rehabilitation; the publication of “blogshots” – short, rapid-fire posts about evidence in areas of rehabilitation practice disseminated in multiple languages via social media; the delivery of training in evidence-based rehabilitation at multiple conferences around the world; and the development of international consensus on an operational definition of “rehabilitation” to apply to all

of our work. If you want to know more about any of these projects or get involved in the work of Cochrane Rehabilitation, visit the Cochrane Rehabilitation website (<https://rehabilitation.cochrane.org/>), sign up for the newsletter, or follow Cochrane Rehabilitation on its Twitter, Facebook, Instagram, LinkedIn, or YouTube news feeds.

William Levack *PhD, MHealSc(Rehabilitation), BPhty, NZRP*
Stefano Negrini *MD*

William Levack is a professor of rehabilitation, and is dean and head of campus for University of Otago Wellington (UOW). He is president of the New Zealand Rehabilitation Association and affiliated with the Rehabilitation Teaching & Research Unit at UOW. William got involved in Cochrane Rehabilitation when it was first established in 2016, and he is currently chair of its Review Working Area and a member of its Executive Board.

Stefano Negrini is a full professor in physical and rehabilitation medicine at the University of Milan (Università degli Studi di Milano Statale) and director of the Evidence-Based Rehabilitation laboratory at IRCCS Istituto Ortopedico Galeazzi, Milan, Italy. He is director of Cochrane Rehabilitation, chief-editor of the *European Journal of Physical & Rehabilitation Medicine*, and scientific director of the Italian Scientific Spine Institute. In Cochrane, Stefano is a member of the Council, Knowledge Translation Advisory Board and Fields Executive.

Email: william.levack@otago.ac.nz

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