Cochrane Stories: making an impact on public health
Evidence Aid

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Conflicts of interest

• Evidence Aid has received funding from Wiley, Cochrane, Porticus UK, McCall MacBain Foundation, Unorthodox Prize, Lambert Family Foundation, 3ie, World Health Organisation, C&A Foundation, and various small personal donations.

• I am an academic researcher who needs to secure grant income and academic recognition.
March 2011: Japan hit by tsunami after massive earthquake

A massive earthquake has hit the north-east of Japan triggering a tsunami that has caused extensive damage.

Japan's TV showed cars, ships and even buildings being swept away in the Fukushima prefecture, after the 8.9 magnitude earthquake.

Officials said a wave as high as 6m (20ft) could strike the coast.

The quake struck about 250 miles (400km) from Tokyo at a depth of 20 miles, shaking buildings in the...
One of the largest earthquakes ever recorded has struck off the coast of north-east Japan, causing widespread destruction. Many casualties are feared.
The worst affected areas are thought to be Miyagi, Fukushima and Iwate prefectures. In Iwaki, Fukushima, water swept through the town.
The 8.9 magnitude quake triggered a huge tsunami which has swept across the sea threatening countries all around the Pacific Ocean.
Stunned and shaken evacuees gathered in the open spaces of Tokyo's Shinjuku Central Park until it was safe to attempt to travel home.
In Mito City, vehicles were crushed in a car park. Geologists say the disaster was caused by a “megathrust” quake, when one tectonic plane is pushed beneath another.
In pictures: Japan earthquake and tsunami

The quake was felt in the capital Tokyo, where workers evacuated swaying buildings, trains and underground services were halted, plants closed and the international airport temporarily shut.
• Millions of people are affected by disasters every year, and billions of dollars are spent by people and organisations involved in disaster risk reduction, resilience, planning, response and recovery.

• They want to do things that will lead to:
  • Better protection
  • Less death, injury and damage
  • Quicker recovery
• But, doing *something* is not enough.
• **It needs to do more good than harm.**
• Decision makers need to know what works (and by how much and for whom), what doesn’t work, what remains unproven and what, no matter how well meaning, might be harmful.
• **They need to make well informed choices and decisions.**
• They need access to reliable evidence.

Improving access to reliable information on the effects of relevant interventions to support well-informed choices, helping survivors receive the best care available and recover as quickly as possible.

Working with key influencers to get this information to decision makers and policy makers.

Entering a new phase, our third 5 years, with a core staff team, charitable status and an agreed strategy.
Evidence-based decision making

• Is not just about randomised trials
• Randomised trials, and systematic reviews of them, provide one component for evidence-based decision making: an estimate of the effects of interventions, actions and strategies
• Reliable evidence on which interventions are beneficial, which are harmful and which have little or no effect is vital to well informed decision making
• Reliable evidence needs to minimise chance and bias
Effectiveness

**Systematic reviews**

- Avoid undue emphasis on single studies.
- Identify relevant research, and appraise its quality.
- Make best use of research already done.
- Maximise the power of the conclusions.
- Identify gaps and suggest how best to fill these.
- Improve access to existing research.
Evidence Aid will

• Identify existing systematic reviews.
• Conduct new reviews and update existing ones, where necessary.
• Advocate and facilitate the conduct of reviews by others.
• Prepare contextual summaries.
• Bring all this together in a readily accessible, easily searchable knowledge repository.
• Help to resolve uncertainties.
There is no evidence that using tap water to cleanse acute wounds in adults increases infection and some evidence that it reduces it. However there is not strong evidence that cleansing wounds per se increases healing or reduces infection. In the absence of potable tap water, boiled and cooled water as well as distilled water can be used as wound cleansing agents.
There is no evidence that single-session individual psychological debriefing is a useful treatment for the prevention of PTSD after traumatic incidents. Compulsory debriefing of victims of trauma should cease.

After the 2004 tsunami, this evidence was incorporated into the counsellor training for the Nagapattinam district in India; one of the worst hit areas of Tamil Nadu, the state with the largest number of casualties in India. “Brief debriefing” was not used.
A new dawn, a new Director for international initiative, Evidence Aid
Resources following Typhoon Haiyan in the Philippines

Following the devastation caused by Typhoon Haiyan in the Philippines, Evidence Aid worked with colleagues in the disaster community to compile the following evidence-based resources that might help.

Evidence Aid Special Collections: Cochrane Library

The following four systematic reviews discuss the health impacts of windstorms and flooding, and ways to reduce these impacts. Short summaries of these are available here.

Health impacts of windstorms: Public Health 2013

Flooding and mental health: PLoS Currents Disasters 2012 May 30 / PDF of article

Infectious diseases and flooding: Disaster Health 2013;1(2):1-11 / PDF of article

Secondary stressors and extreme events and disasters: PLoS Currents Disasters 2012 Oct 29 / PDF of article

Disaster evacuation and medication: PLoS Currents Disasters 2014 Jul 18 / PDF of article

Power outages and extreme events and health: PLoS Currents Disasters 2014 Jan 02 / PDF of article

Disaster risk management for health: Fact sheets

Disaster needs assessment: MIRA Approach: Process, Methodologies and Tools Download bundle of the PDFs

Website for the Philippines response: philippines.humanitarianresponse.info

WHO Regional Office for Europe: Floods in the WHO European Region: Health effects and their prevention

Download bundle of the PDFs

Search our Resources here

What we’re tweeting

Tweets
Typhoon Haiyan

“Thank you ... for sharing this useful resources. I'll disseminate this to fellow librarians in the country.” Data Bank Senior Information Assistant, Southeast Asian Fisheries Development Center (SEAFDEC), Philippines

“Thanks so much for alerting us to this useful resource! I have just sent out a tweet and will include it in our next email update.” ALNAP

“The Evidence Aid package emailed out [...] is extremely useful. I will be circulating it to the team to bone up on over the next week or two. The kind of resources they produce are vital to relief efforts and are very, very practical and useful.” Medical Officer of Health, New Zealand

“Your work is excellent and very useful in critical emergency response. I will pass this message to some of the local NGOs I know in PHL, I have posted your message on my network to get wide coverage.” Manish Mehta, Philippines

“Thank you for sharing this- very useful. Our lean network of independent humanitarian responders can definitely use this.” Consultant, A Single Drop for Safe Water, Philippines
“I knew of Evidence Aid through your presentations at Cochrane Colloquium; when we had a faculty meeting a few days after the earthquake and tsunami, it occurred to me that it would help them/us. And we all agreed that it would be one of the many things we could do for the people who were suffering then as a school of public health in the same country. So I contacted Evidence Aid and we also set up a team to translate the information once we had the permission. On the way, however, we found that much of the information concerned situations with underdeveloped social infrastructure and would not be quite applicable to the regions afflicted this time in Japan. The part on post-traumatic stress however was applicable.”

Toshiaki A. Furukawa, MD, PhD
Dept of Health Promotion and Human Behavior & Dept of Clinical Epidemiology, Kyoto University, Japan
2011 flooding in Thailand

“We were supported in writing documents about common health problems during flood by the University Dean, who introduced us to Evidence Aid which we found very useful. We decided to translate some topics into Thai to provide this knowledge as widely as possible. Although flooding does not frequently happen in Thailand, once it happens it has a high resource costs. Information on evidence based interventions for managing various conditions that happen during floods is essential for healthcare people working in the field.”

Praew Kotruchin, MD
Department of Emergency Medicine
Faculty of Medicine, Khon Kaen University, Thailand
An international project to improve access to knowledge in disaster risk reduction, planning, response and recovery.

Available, needed and effective interventions
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