La rentrée de la méthodo

5ème édition

Lyon, 4 septembre 2024

Société Française de Pharmacologie et de Thérapeutique

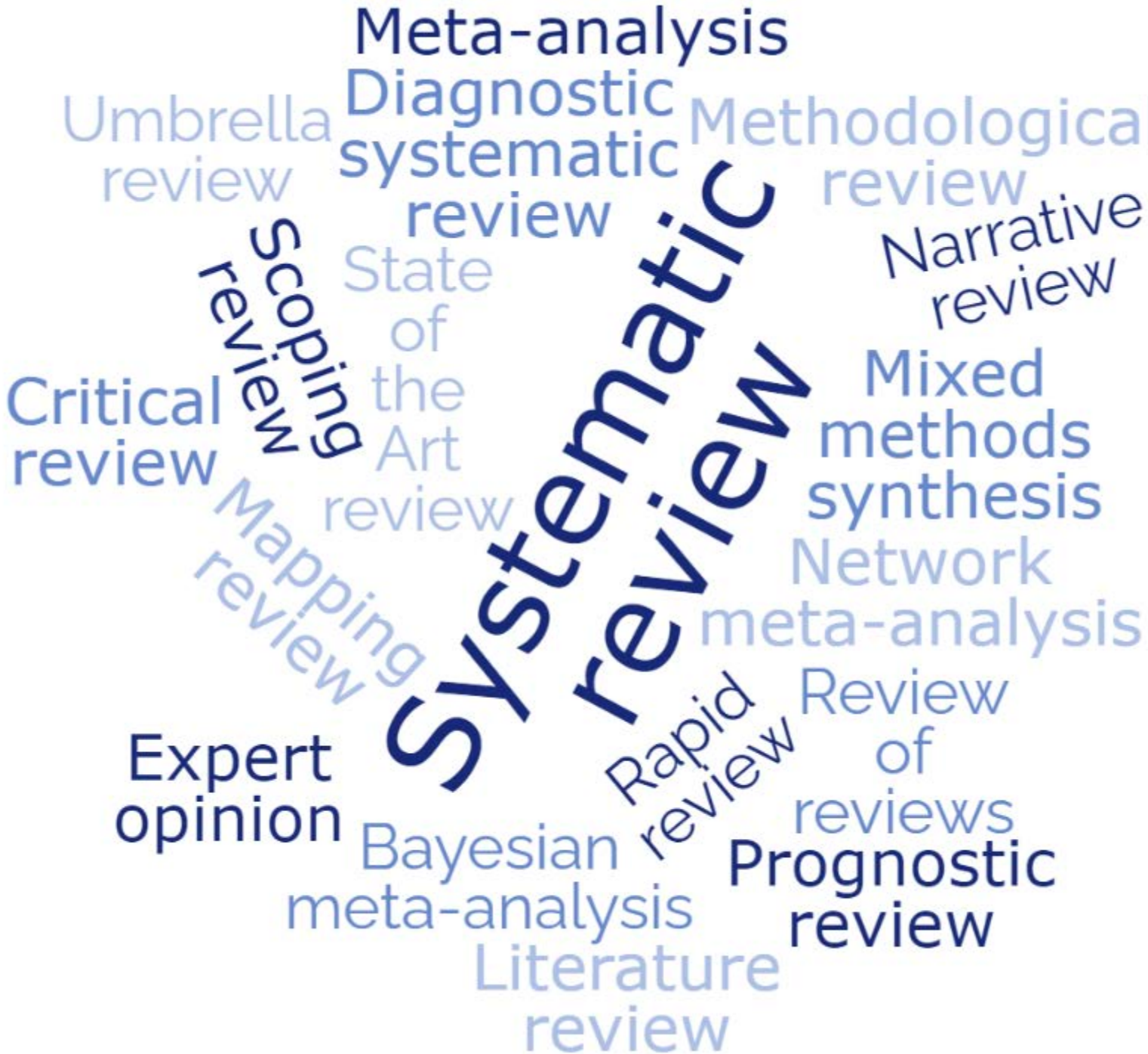
Les différents types de revues

Céline Chapelle

Service de Pharmacologie Clinique

Unité de Recherche Clinique

chu saint étienne


Meta-analysis
Diagnostic
Umbrella
review
systematic
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Methodological
review
Narrative
review
Scoping
review
State
of
the
Art
review
Critical
review
Systematic
review
Mixed
methods
synthesis
Mapping
review
Network
meta-analysis
Rapid
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Review
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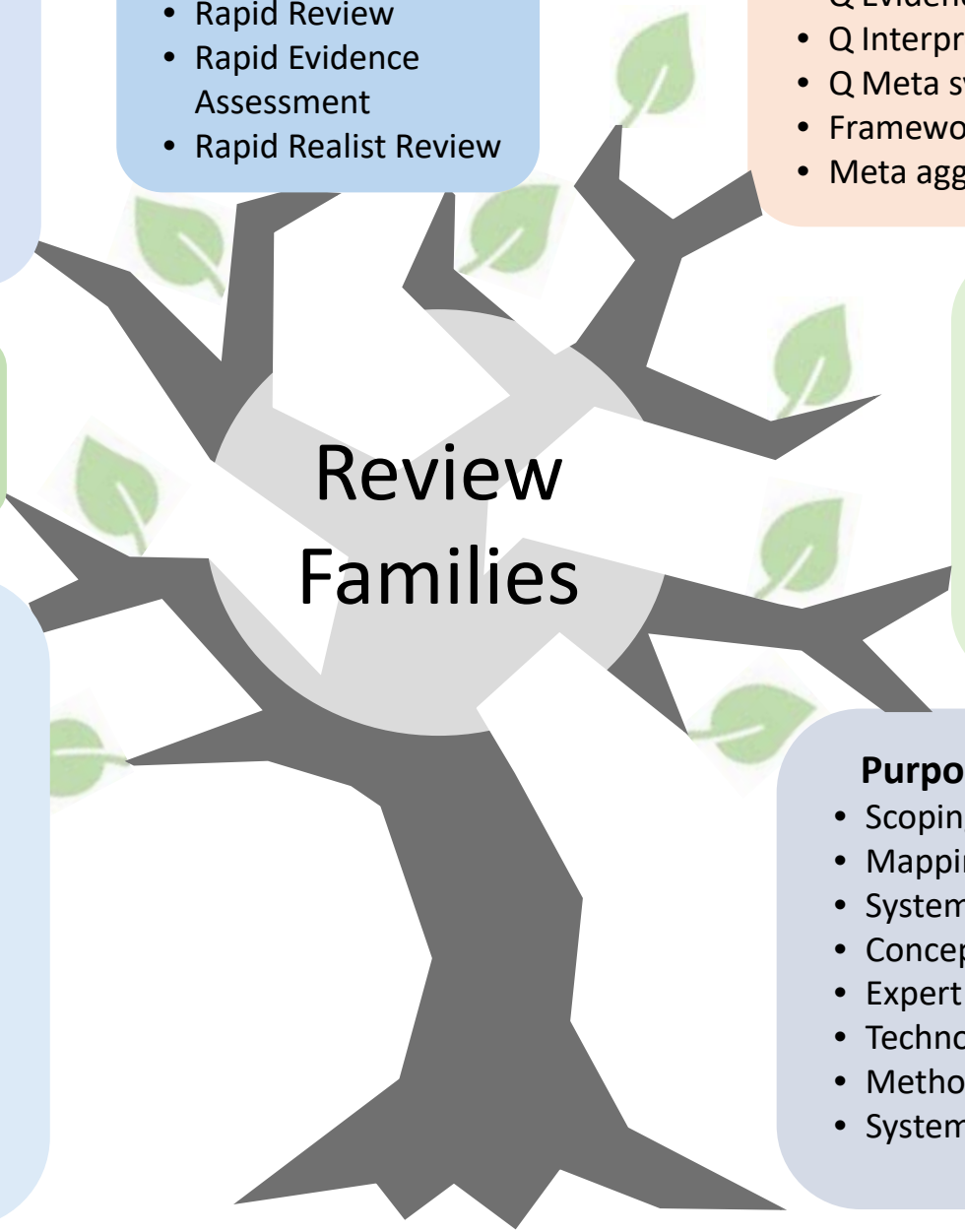
reviews
Expert
opinion
Bayesian
meta-analysis
Prognostic
review
Literature
review



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- Rapid Evidence Assessment
- Rapid Realist Review

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- Systematised Review
- Concept Synthesis
- Expert Opinion – Policy Review
- Technology Assessment Review
- Methodological Review
- Systematic Search and Review

Birkic, V., Celeste, T., & Cochrane, L. (2020). Which review is that? A guide to review types. Available from https://unimelb.libguides.com/whichreview

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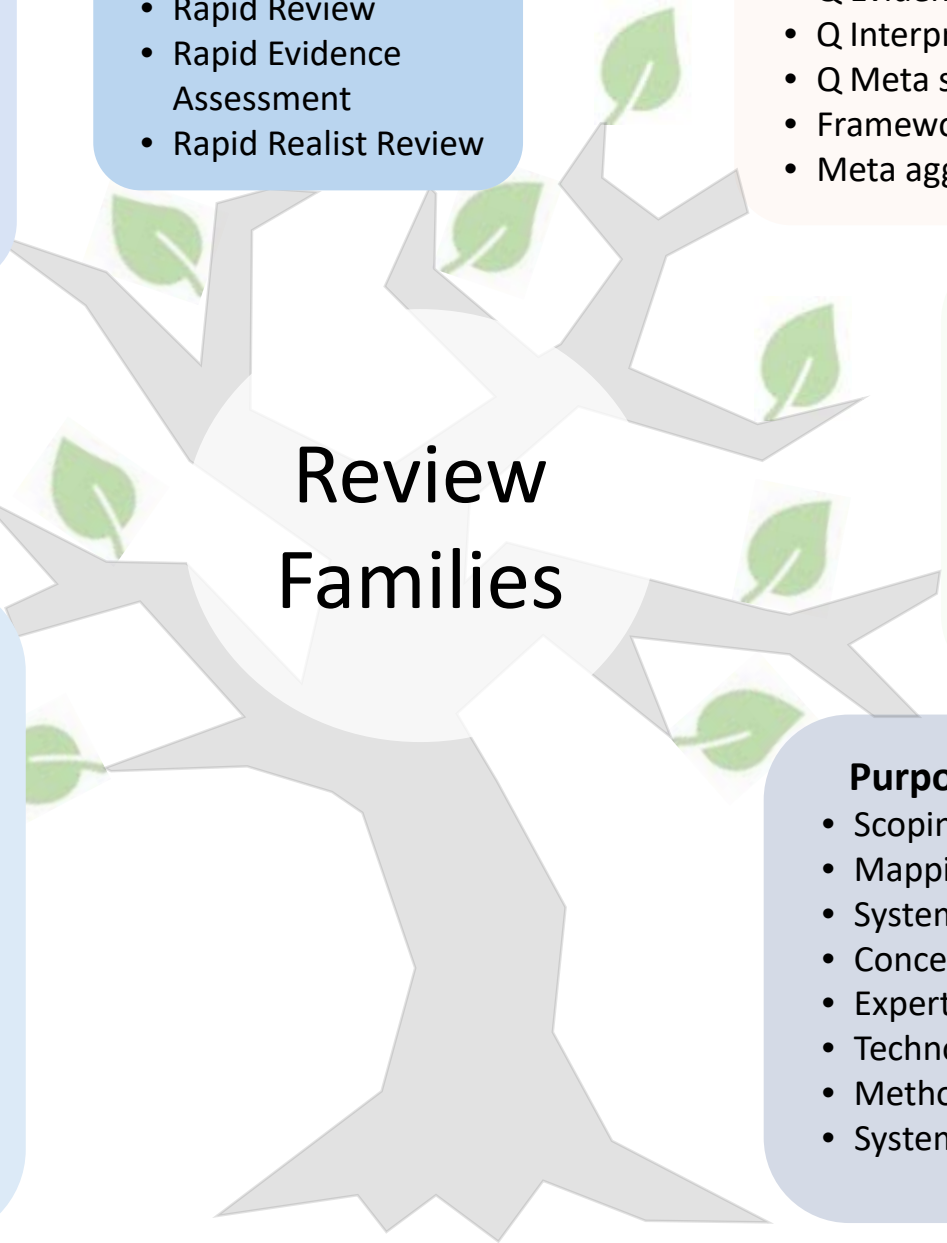

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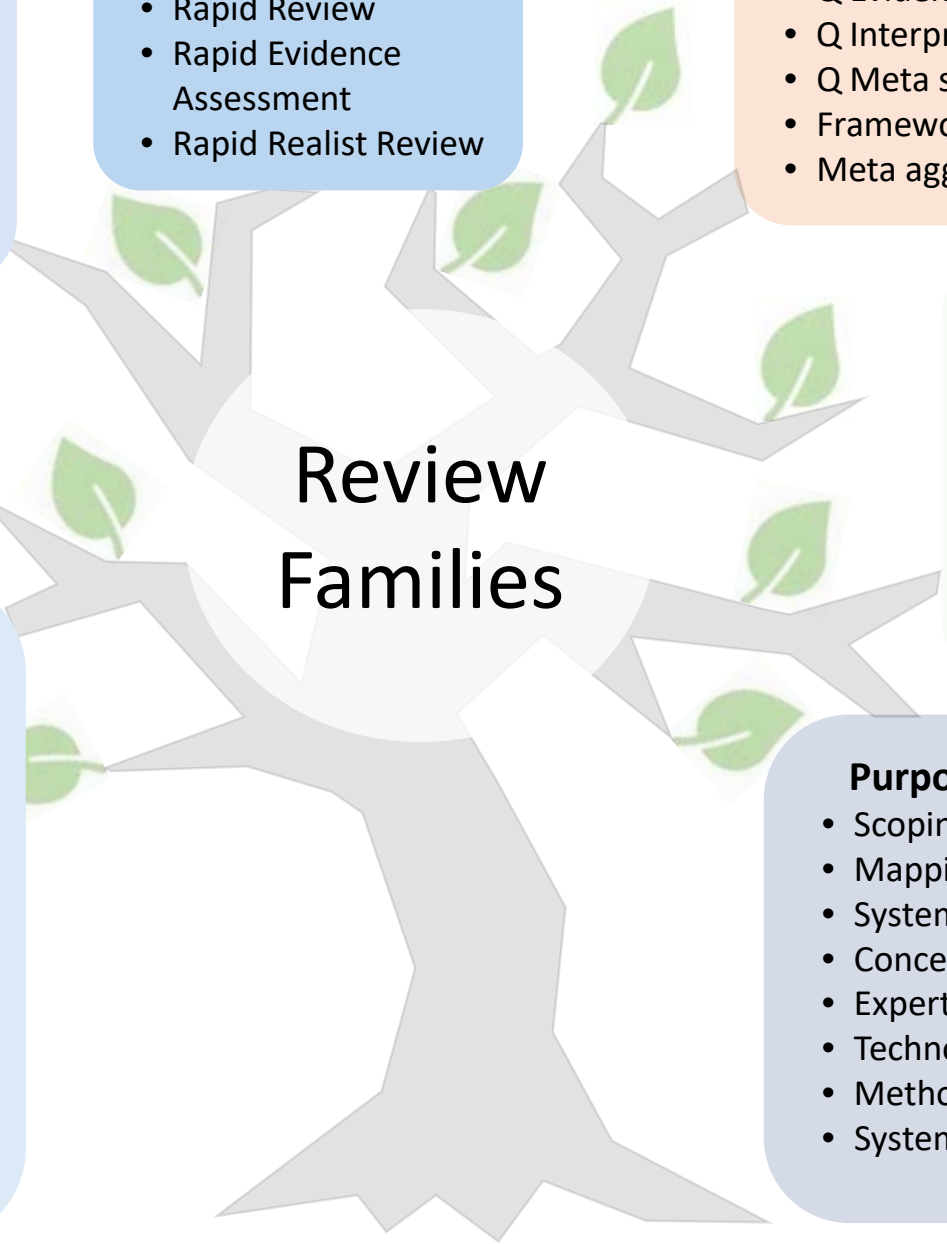

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Recherche Pubmed le 25/08/2024

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National Center for Biotechnology Information

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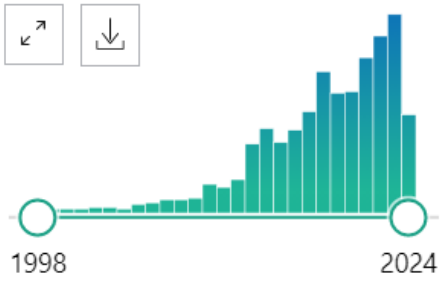
MY NCBI FILTERS

764 results

Page 1 of 4

RESULTS BY YEAR



TEXT AVAILABILITY

- Abstract
- Free full text
- Full text

1 Cite Share

Roles and Dynamics within Community Mental Health Systems During the COVID-19 Pandemic: A Qualitative Systematic Review and **Meta-Ethnography**.

Sim CSL, Asharani PV, Subramaniam M, Yi H.

Health Syst Reform. 2024 Dec 31;10(1):2314525. doi: 10.1080/23288604.2024.2314525. Epub 2024 Apr 10.

PMID: 38598726

Globally, COVID-19 had an immense impact on mental health systems, but research on how community mental health (CMH) systems and services contributed to the pandemic mental health response is limited. We conducted a systematic review and **meta-ethnography** to understa ...

2 Cite

Community-based strategies to increase coverage of intermittent preventive treatment of malaria in pregnancy with sulfadoxine-pyrimethamine in sub-Saharan Africa: a systematic review, meta-analysis, **meta-ethnography**, and economic assessment.

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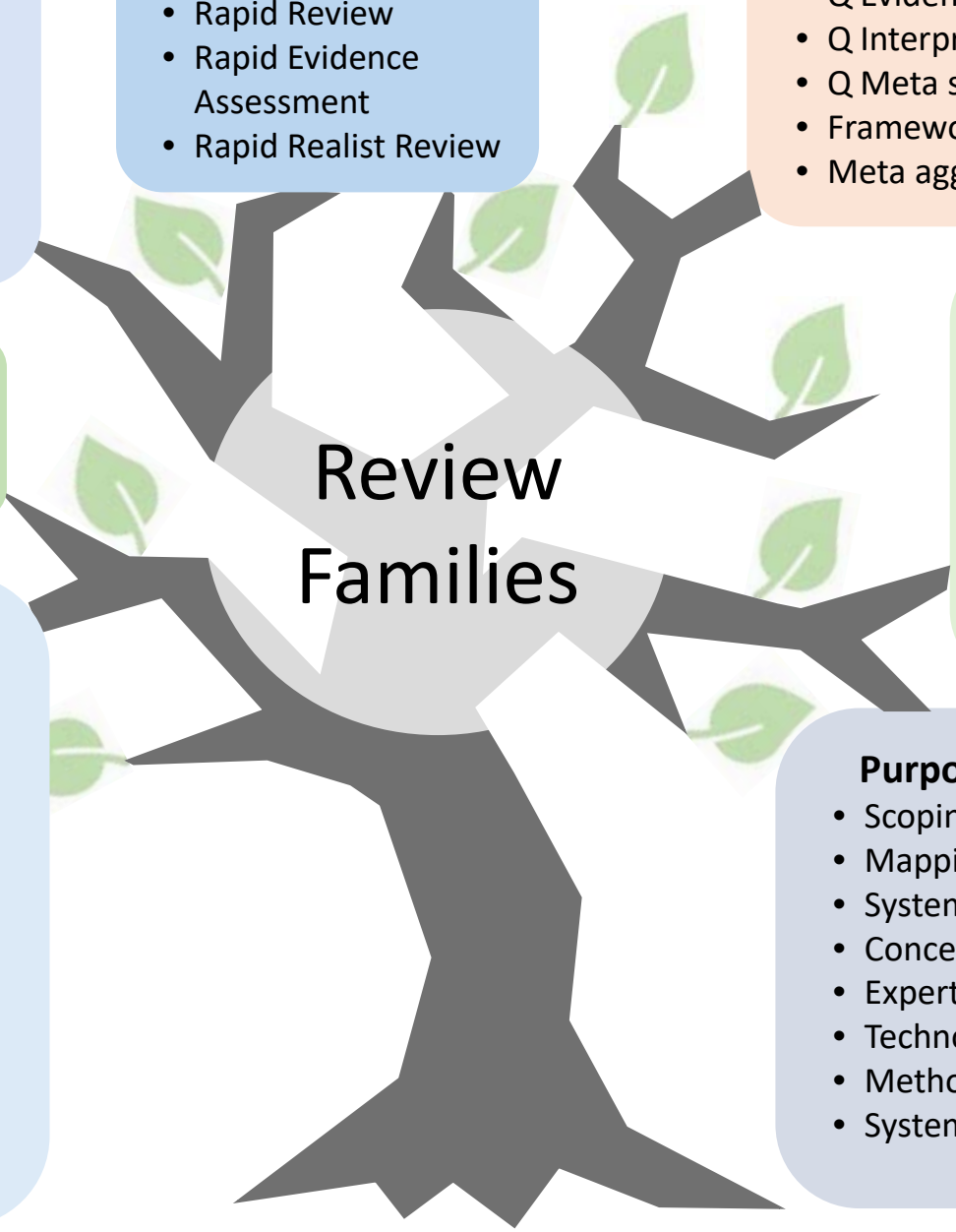
https://eppi.ioe.ac.uk/cms/

Better evidence for better decision-making: robust and responsive reviews informing policy and practice

The **Evidence for Policy & Practice Information Centre** is a team of researchers and professionals based at University College London who:

- Conduct systematic reviews across health, education, welfare and other public policy sectors.
- Work closely with policymakers, practitioners and the public to understand their needs.
- Value and encourage participation in all stages of systematic reviews by people with diverse perspectives.
- Study and develop methods to support the conduct of systematic reviews and their use in decision-making.
- Provide support, training and guidance for others seeking to undertake systematic reviews.
- Develop and maintain EPPI Reviewer software for conducting systematic reviews.



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Cochrane ?

ChatGPT ?

Peux-tu stp me faire une synthèse de la littérature concernant les AOD dans le traitement des thromboses associées au cancer ?

Les anticoagulants oraux directs (AOD) ont révolutionné la prise en charge des thromboses, y compris celles associées au cancer. Voici une synthèse de la littérature actuelle sur ce sujet.

Contexte et Importance des Thromboses Associées au Cancer

Les patients atteints de cancer sont particulièrement à risque de développer des thromboses veineuses, en raison de l'état hypercoagulable lié à la tumeur, ainsi que des traitements oncologiques eux-mêmes. La thromboembolie veineuse (TEV), comprenant la thrombose veineuse profonde (TVP) et l'embolie pulmonaire (EP), est une complication fréquente et grave chez ces patients, avec un impact majeur sur la morbidité et la mortalité.

Anticoagulants Orals Directs (AOD)

Les AOD, dont les principaux sont le rivaroxaban, l'apixaban, l'edoxaban et le dabigatran, ciblent spécifiquement les facteurs de coagulation Xa ou IIa. Contrairement aux traitements traditionnels comme les héparines de bas poids moléculaire (HBPM) et les antivitamines K (AVK), les AOD sont administrés par voie orale, ont un effet anticoagulant rapide, une demi-vie courte, et n'exigent pas de surveillance biologique systématique.

Efficacité et Sécurité des AOD chez les Patients Cancéreux

Études Cliniques

Les études récentes, notamment les essais HOKUSAI VTE Cancer, SELECT-D et CARAVAGGIO, ont évalué l'efficacité et la sécurité des AOD dans le traitement des TEV chez les patients atteints de cancer.

1. **HOKUSAI VTE Cancer** : Cette étude a comparé l'edoxaban à la dalteparine (une HBPM) et a montré que l'edoxaban n'était pas inférieur en termes de prévention des récidives de TEV. Cependant, il y avait un risque accru de saignements majeurs, en particulier au niveau gastro-intestinal.
2. **SELECT-D** : Ce trial a comparé le rivaroxaban à la dalteparine chez des patients cancéreux. Il a montré que le rivaroxaban réduisait significativement le risque de récidive de TEV, mais avec un risque plus élevé de saignements, en particulier gastro-intestinaux.
3. **CARAVAGGIO** : Cette étude a évalué l'apixaban par rapport à la dalteparine, et a conclu que l'apixaban n'était pas inférieur en termes d'efficacité et présentait un profil de sécurité similaire en matière de saignement majeur.

Synthèse des Résultats

Globalement, les AOD sont efficaces pour prévenir les récidives de TEV chez les patients cancéreux, mais le risque de saignement, surtout gastro-intestinal, est un facteur limitant. Les AOD sont souvent préférés pour leur commodité, mais la décision d'utiliser un AOD par rapport aux HBPM doit être individualisée, en tenant compte du type de cancer, du risque de saignement, et des préférences du patient.

Recommandations Actuelles

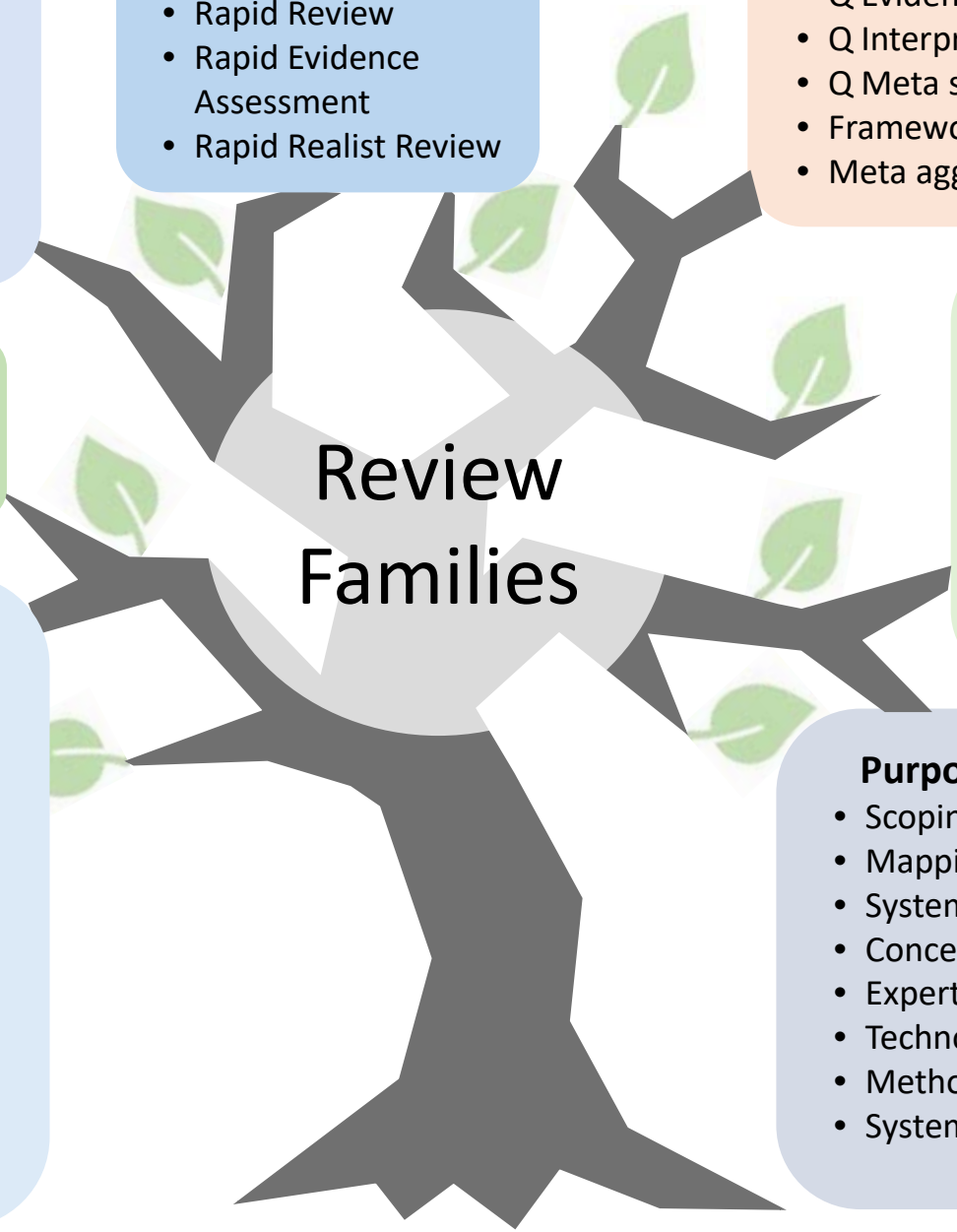
Les guidelines récents, notamment ceux de l'International Society on Thrombosis and Haemostasis (ISTH) et de l'American Society of Clinical Oncology (ASCO), recommandent l'utilisation des AOD comme une option possible pour le traitement des TEV chez les patients atteints de cancer, surtout pour ceux sans risque élevé de saignement gastro-intestinal.

Limites et Perspectives

Bien que les AOD offrent une option attrayante pour la prise en charge des TEV chez les patients cancéreux, il reste des incertitudes, notamment concernant leur utilisation chez les patients avec des tumeurs gastro-intestinales ou urologiques, où le risque de saignement est particulièrement élevé. Des recherches supplémentaires sont nécessaires pour affiner les indications et optimiser la gestion des risques.

Conclusion

Les AOD représentent une avancée significative dans la gestion des thromboses associées au cancer, offrant une alternative pratique aux HBPM. Cependant, leur utilisation doit être soigneusement évaluée en fonction du profil de chaque patient, en tenant compte des risques potentiels de saignement.



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Cochrane ?

ChatGPT ?

Living meta-analyses ?
- http://www.metaevidence.org/
- https://covid-nma.com/
- …

La revue systématique / *Systematic Review*

Objectif	Identifier, évaluer et synthétiser l'ensemble des études pertinentes (publiées ou non) en réponse à une question de recherche précise à l'aide d'une méthode rigoureuse, structurée et reproductible
Avantage	Utilise des méthodes systématiques et reproductibles pour produire une synthèse rigoureuse
Limite	Questions parfois trop ciblées Peu d'études de « bonne » qualité

Les étapes d'une revue systématique

Define the research question and objectives

Define the inclusion and exclusion criteria

Conduct a comprehensive literature search

Screen and select studies

Assessment of the quality of studies

Data extraction and quality assessment

Data synthesis, interpretation and discussion

Draw conclusions and publication of results

Inspiré de Karolinska Institutet University Library (https://kib.ki.se/en/search-evaluate/systematic-reviews)

Le reporting d'une revue systématique : PRISMA 2020

PRISMA = Preferred Reporting Items for Systematic reviews and Meta-Analyses (https://www.prisma-statement.org/)

Section and Topic	Item #	Checklist item	Location where item is reported
TITLE			
Title	1	Identify the report as a systematic review.	
ABSTRACT			
Abstract	2	See the PRISMA 2020 for Abstracts checklist.	
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of existing knowledge.	
Objectives	4	Provide an explicit statement of the objective(s) or question(s) the review addresses.	
METHODS			
Eligibility criteria	5	Specify the inclusion and exclusion criteria for the review and how studies were grouped for the syntheses.	
Information sources	6	Specify all databases, registers, websites, organisations, reference lists and other sources searched or consulted to identify studies. Specify the date when each source was last searched or consulted.	
Search strategy	7	Present the full search strategies for all databases, registers and websites, including any filters and limits used.	
Selection process	8	Specify the methods used to decide whether a study met the inclusion criteria of the review, including how many reviewers screened each record and each report retrieved, whether they worked independently, and if applicable, details of automation tools used in the process.	
Data collection process	9	Specify the methods used to collect data from reports, including how many reviewers collected data from each report, whether they worked independently, any processes for obtaining or confirming data from study investigators, and if applicable, details of automation tools used in the process.	
Data items	10a	List and define all outcomes for which data were sought. Specify whether all results that were compatible with each outcome domain in each study were sought (e.g. for all measures, time points, analyses), and if not, the methods used to decide which results to collect.	
	10b	List and define all other variables for which data were sought (e.g. participant and intervention characteristics, funding sources). Describe any assumptions made about any missing or unclear information.	
Study risk of bias assessment	11	Specify the methods used to assess risk of bias in the included studies, including details of the tool(s) used, how many reviewers assessed each study and whether they worked independently, and if applicable, details of automation tools used in the process.	
Effect measures	12	Specify for each outcome the effect measure(s) (e.g. risk ratio, mean difference) used in the synthesis or presentation of results.	
Synthesis methods	13a	Describe the processes used to decide which studies were eligible for each synthesis (e.g. tabulating the study intervention characteristics and comparing against the planned groups for each synthesis (item #5)).	
	13b	Describe any methods required to prepare the data for presentation or synthesis, such as handling of missing summary statistics, or data conversions.	
	13c	Describe any methods used to tabulate or visually display results of individual studies and syntheses.	
	13d	Describe any methods used to synthesize results and provide a rationale for the choice(s). If meta-analysis was performed, describe the model(s), method(s) to identify the presence and extent of statistical heterogeneity, and software package(s) used.	
	13e	Describe any methods used to explore possible causes of heterogeneity among study results (e.g. subgroup analysis, meta-regression).	
	13f	Describe any sensitivity analyses conducted to assess robustness of the synthesized results.	
Reporting bias assessment	14	Describe any methods used to assess risk of bias due to missing results in a synthesis (arising from reporting biases).	
Certainty assessment	15	Describe any methods used to assess certainty (or confidence) in the body of evidence for an outcome.	
RESULTS			
Study selection	16a	Describe the results of the search and selection process, from the number of records identified in the search to the number of studies included in the review, ideally using a flow diagram.	
	16b	Cite studies that might appear to meet the inclusion criteria, but which were excluded, and explain why they were excluded.	

Le reporting d'une revue systématique : PRISMA 2020

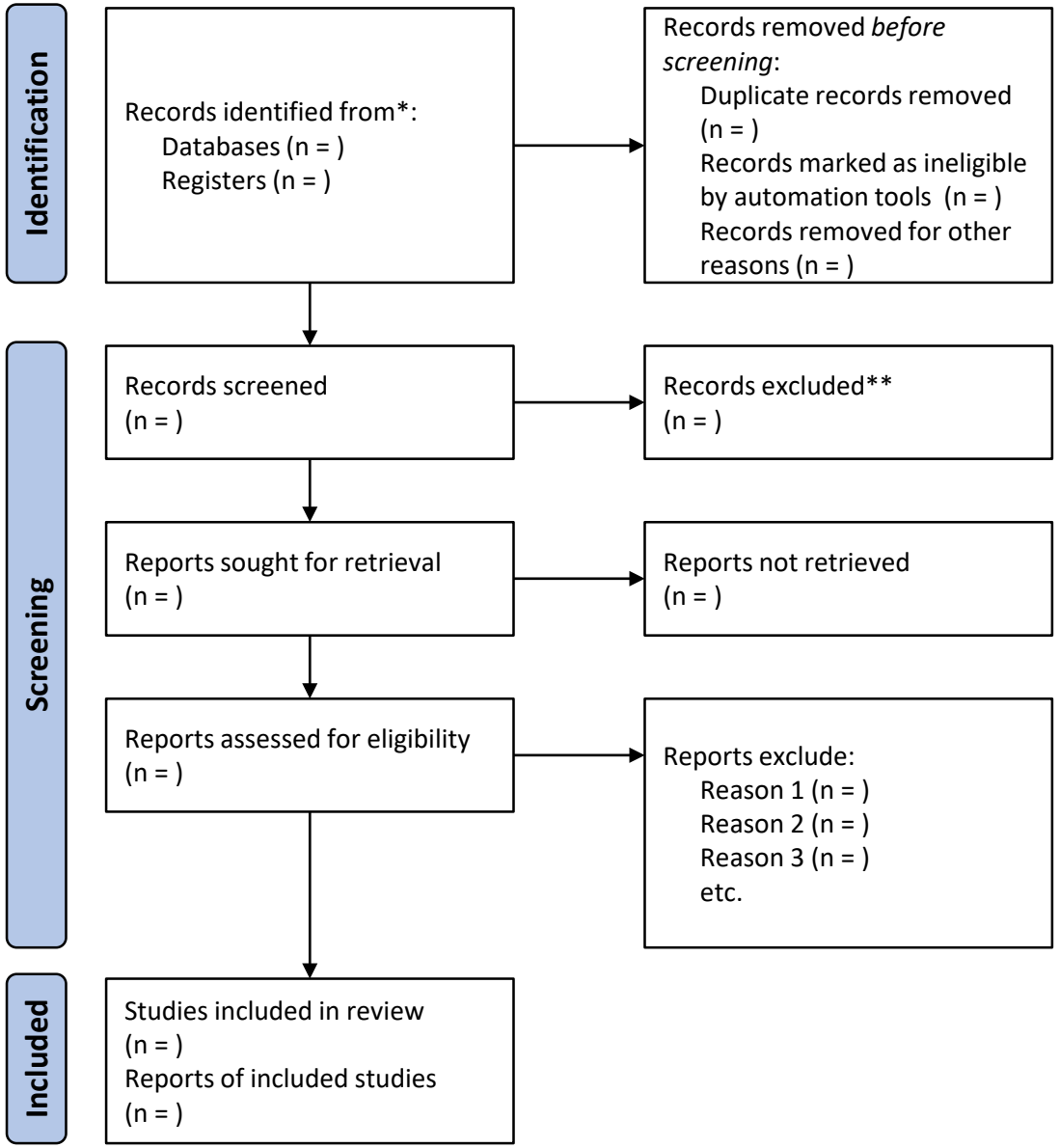
PRISMA Extensions

PRISMA 2020 Extensions Translations Endorsement

- PRISMA for Abstracts
- PRISMA for Acupuncture
- PRISMA for Chinese Herbal Medicines
- PRISMA for Complex Interventions
- PRISMA-COSMIN for Outcome Measurement Instruments
- PRISMA for Diagnostic Test Accuracy
- PRISMA for EcoEvo
- PRISMA Equity
- PRISMA Harms (for reviews including Harm outcomes)
- PRISMA Individual Patient Data
- PRISMA Moxibustion
- PRISMA for Network Meta-Analyses
- PRISMA for Protocols
- PRISMA for Scoping Reviews
- PRISMA Search

Le reporting d'une revue systématique : PRISMA 2020

PRISMA
Flow Chart



Identification des articles dans les différentes bases de données

Sélection et **récupération** des articles répondant aux critères d'éligibilité
+ raison d'exclusion pour les articles non retenus

Inclusion dans la revue

La revue systématique / *Systematic Review : exemple*

Received: 29 December 2023 | Revised: 18 April 2024 | Accepted: 19 May 2024
DOI: 10.1002/pbc.31131
Pediatric Blood & Cancer
REVIEW

Direct oral anticoagulant therapy in adolescent venous thromboembolism: A systematic review

Shaikha Alqahtani[1] | Karen DiValerio Gibbs[2] | Natalie A. Montanez[3] | Kate J. Krause[4] | C. Heleen van Ommen[5] | Lakshmi V. Srivaths[1,3]

3 | METHODS

We performed a comprehensive systematic search adhering to the PRISMA-S for Searching checklist.[13] We searched Ovid MEDLINE, Ovid EMBASE, Cpchrane CENTRAL, and Web of Science. Databases were initially searched from inception to September 22, 2022. The …/…

Ing Information. Our findings are reported in accordance with the PRISMA 2020 Preferred Reporting Items for Systematic Reviews and Meta-Analyses.

3.1 | Eligibility criteria

We included trials reporting on adolescent patients between the ages of 10 and 18 years who were treated with DOACs compared to standard anticoagulants for VTE. We included full reports and abstracts of …/…

3.2 | Selection process

After the initial search, Covidence software was used to screen the citations. Two of the principal investigators independently screened …/…

3.3 | Data extraction

For reports that met inclusion criteria, a data extraction form was used to collect information from the included studies on the following elements: type of study, publication types, inclusion, exclusion criteria, study methods, age, type of VTE, DOAC used, preceding anti-…/…

3.4 | Assessment of risk of bias in studies

We planned to use the Cochrane Risk of Bias tool (RoB-2) to assess the risk of bias of randomized control trials (RCTs) and the ROBINS-I for nonrandomized studies of interventions in our systematic review.[14,15] …/…

3.5 | Synthesis methods

We initially intended to perform a meta-analysis, but were unable to do so given the limited number of RCTs and heterogeneity in the interventions and measures. We identified and linked multiple reports of the …/…

3.6 | Summary of findings and overall certainty of evidence

A summary table of findings with all the relevant outcomes included in the review was generated using GRADEPro GDT, and the overall certainty of the evidence was determined using the grading of recommendations, assessment, development and evaluations (GRADE) approach …/…

Alqahtani S, et al. Pediatr Blood Cancer. 2024;71(9):e31131. PMID: 38899913.

La revue systématique / *Systematic Review : exemple*

4 | RESULTS

4.1 | Study selection

A total of 1507 articles were identified from the four databases. After reviewing the titles and abstracts, 138 articles were found to meet the inclusion criteria. Further examination of the full texts resulted in the inclusion of nine reports of five studies for final evaluation. There were …/…

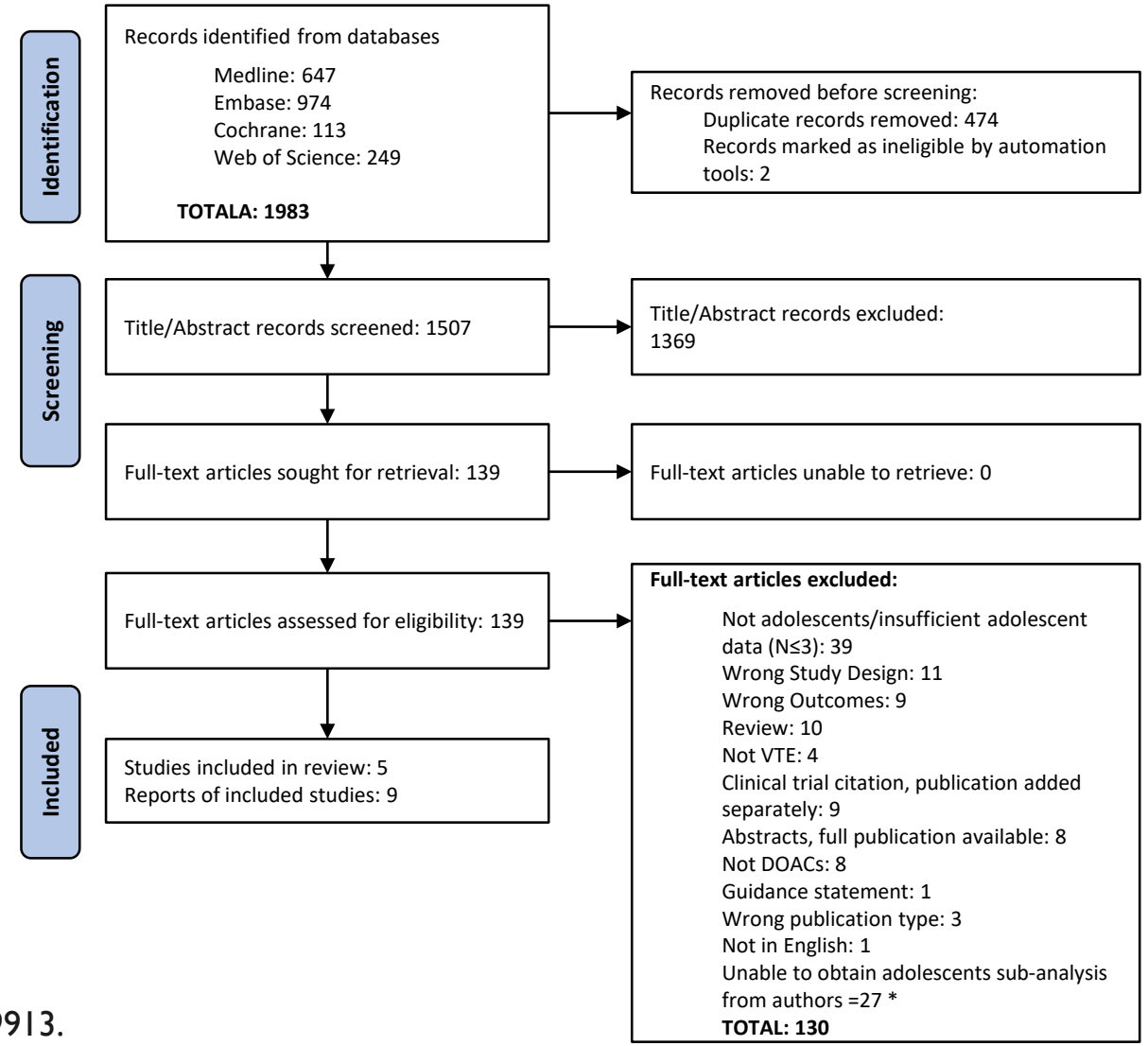
4.2 | Study characteristics

A total of nine reports of five studies were included in the final data extraction. Five were RCTs and four were cohort studies published between 2016 and 2022. Diagnosis of VTE was made using imaging …/…

TABLE 1 Characteristics of studies included in the systematic review.

Study/author/ type (year)	Single/ multicenter	Total number of subjects	Number of adolescents (% females)	Inclusion criteria
Randomized control trials				
DIVERSITY Halton Phase Iia (2016)[21]	Multiple	9	9 (66.6%)	Males or females aged 12 to <18 years with objective diagnosis of primary VTE, who had completed a planned treatment course with LMWH or DOACs for primary VTE

FIGURE 1 Prisma flow diagram.



Alqahtani S, et al. Pediatr Blood Cancer. 2024;71(9):e31131. PMID: 38899913.

La revue rapide / *Rapid Review*

Objectif	Identique à la revue systématique mais qui accélère le processus de réalisation : simplification ou omission de méthodes spécifiques afin de produire des données probantes d'une manière efficace en termes de temps et de ressources
Avantage	+++ pour des prises de décision ou des questions cliniquement urgentes
Limite	Moins rigoureuse qu'une revue systématique Limitée aux études principales ⇒ pas toujours exhaustive

La revue rapide / *Rapid Review : exemple*

Open access Special populations

openheart

Role of combining anticoagulant and antiplatelet agents in COVID-19 treatment: a rapid review

Kamal Matli,[1] Raymond Farah,[2] Mario Maalouf,[3] Nibal Chamoun,[4] Christy Costanian ,[3,5] Georges Ghanem[1]

ABSTRACT

Although primarily affecting the respiratory system, COVID-19 causes multiple organ damage. One of its grave consequences is a prothrombotic state that manifests as thrombotic, microthrombotic and thromboembolic events. Therefore, understanding the effect of antiplatelet and anticoagulation therapy in the context of COVID-19 treatment is important. The aim of this rapid review was to highlight the role of thrombosis in COVID-19 and to provide new insights on the use of antithrombotic therapy in its management. A rapid systematic review was performed using preferred reporting items for systematic reviews.

METHODS

This review was performed using a rapid review methodology in which the steps of a systematic review are streamlined or accelerated to produce evidence in a shortened time frame.[19] A comprehensive systematic literature search was conducted to examine the possible use of anticoagulation and antiplatelet therapies in reducing thrombotic events associated with COVID-19. Four major databases were searched: Ovid MEDLINE, Web of Science, PubMed and Google Scholar from March 2020 until January 2021. The following combination of key

Limitations

…/…

variants. Furthermore, this rapid review could be subject to study selection bias as search terms were not tailored to target specific types of antiplatelet or antithrombotic therapies. It is worthwhile to mention that rapid reviews are perishable quickly as new evidence will emerge continuously and its synthesis will require updating.

PRISMA

Matli K, et al. Open Heart. 2021;8(1):e001628. PMID: 34099529.

Les revues exploratoires : scoping/mapping reviews

Objectif commun « Cartographier » (donner une vue d'ensemble) d'un domaine de recherche ou d'un sujet plus vaste afin d'identifier les potentielles lacunes en matière de connaissance et de formuler des recommandations pour la recherche future

Revue de la portée/Scoping review	**Revue de cartographie/Mapping review**
Fournir des aspects généraux sur un sujet et aider à clarifier les concepts clés	Cartographier et classer la littérature existante

Pas d'évaluations de la qualité des études examinées

Scoping Review : exemple

Differences in quality of anticoagulation care delivery according to ethnoracial group in the United States: A scoping review

Sara R. Vazquez[1] · Naomi Y. Yates[2] · Craig J. Beavers[3,4] · Darren M. Triller[3] · Mary M. McFarland[5]

4 Research Questions

Access to guideline-based anticoagulation
Prescription of anticoagulant for a guideline-based indication
Utilization of DOACs 1st-line
Treatment persistence

Quality of anticoagulation therapy management
INR control
Appropriate anticoagulant dosing
Management by AMS/Utilization of PST/PSM

Clinical outcomes
Bleeding
Thromboembolism
Hospitalizations/Mortality

Humanistic/educational outcomes
Patient satisfaction
Quality of life
Drug/disease state knowledge

Research Opportunities

- Underrepresented ethnoracial groups, acute care settings, and indications other than AF
- Why non-White patients receive anticoagulation for AF or DOAC 1st-line less often than White patients
- Contemporary studies of warfarin TTR, access to AMS, PST, PSM across ethnoracial groups
- Clinical outcomes across ethnoracial groups other than those associated with AF
- Quality of life and patient satisfaction with anticoagulation across all indications, anticoagulation knowledge and education

Vazquez SR, et al. J Thromb Thrombolysis. 2024;57(6):1076-1091. PMID: 38733515.

Mapping Review : exemple

Anticancer Drugs Compared to No Anticancer Drugs in Patients with Advanced Hepatobiliary Cancer: A Mapping Review and Evidence Gap Map

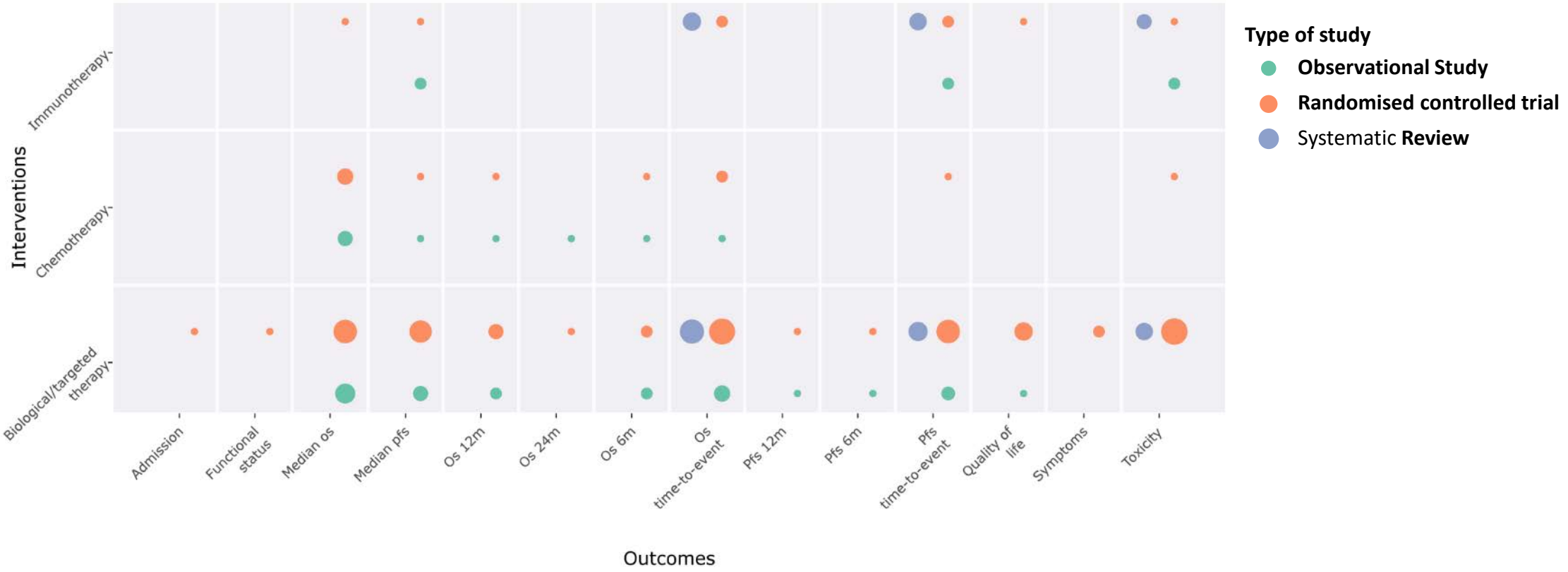


Figure 2 Evidence map for ACD in advanced liver cancer. The size of each dot represents the number of studies that address the intervention/outcome relationship. The color of each dot represents the methodological design of the study group.

Requeijo C, et al. Clin Epidemiol. 2023;15:1069-1085. PMID: 38025841.

La revue narrative / *Narrative Review*

Objectif	Présenter un état de connaissances, une synthèse, une information de base ou une vue d'ensemble de la littérature scientifique publiée sur un sujet spécifique
Avantage	S'applique bien aux questions larges et sujets complexes
Limite	N'est pas nécessairement systématique et exhaustive Avis d'experts, ne peut pas tirer des conclusions

La revue narrative / *Narrative Review* : exemples

Thrombosis Research 231 (2023) 135–140

Contents lists available at ScienceDirect

Thrombosis Research

journal homepage: www.elsevier.com/locate/thromres

Inappropriate prescriptions of direct oral anticoagulants (DOACs) in hospitalized patients: A narrative review

S.F.B. van der Horst[a,*], N. van Rein[b,c], T.E. van Mens[a,d], M.V. Huisman[a], F.A. Klok[a]

van der Horst SFB, et al. Thromb Res. 2023;231:135-140. PMID: 37005194.

Adv Ther (2023) 40:41–66
https://doi.org/10.1007/s12325-022-02333-9

REVIEW

Risk and Management of Bleeding Complications with Direct Oral Anticoagulants in Patients with Atrial Fibrillation and Venous Thromboembolism: a Narrative Review

Stefano Ballestri · Elisa Romagnoli · Dimitriy Arioli · Valeria Coluccio · Alessandra Marrazzo · Afroditi Athanasiou · Maria Di Girolamo · Cinzia Cappi · Marco Marietta · Mariano Capitelli

Ballestri S, et al. Adv Ther. 2023;40(1):41-66. PMID: 36244055.

Received: 12 April 2022 | Revised: 24 May 2023 | Accepted: 27 May 2023

DOI: 10.1111/cts.13569

REVIEW

Anticoagulant therapy in COVID-19: A narrative review

Zeinab Mohseni Afshar[1] | Ali Tavakoli Pirzaman[2] | Rezvan Hosseinzadeh[2] | Arefeh Babazadeh[3] | Mohamad Ali Taghizadeh Moghadam[4] | Seyed Rouhollah Miri[5] | Terence T. Sio[6] | Mark J. M. Sullman[7,8] | Mohammad Barary[9] | Soheil Ebrahimpour[3]

Mohseni Afshar Z, et al. Clin Transl Sci. 2023;16(9):1510-1525. PMID: 37326220.

La revue critique / *Critical Review*

Objectif	Démontrer que l'auteur a effectué des recherches approfondies sur la littérature et a évalué sa qualité de manière critique (lacunes ou incohérences dans les études antérieures…)
Avantage	Examine les aspects positifs et négatifs des différents points de vue
Limite	N'est pas nécessairement systématique et exhaustive Subjectivité selon les valeurs et les convictions des auteurs

La revue critique / *Critical Review* : exemple

EXPERT REVIEW OF NEUROTHERAPEUTICS
2024, VOL. 24, NO. 1, 55–76
https://doi.org/10.1080/14737175.2023.2296610

Taylor & Francis
Taylor & Francis Group

REVIEW

Considerations for hormonal therapy in migraine patients: a critical review of current practice

Romy van Lohuizen[a*], Jakob Paungarttner[b*], Christian Lampl[b,c], Antoinette MaassenVanDenBrink[a] and Linda Al-Hassany[a]

ABSTRACT

Introduction: Migraine, a neurovascular headache disorder, is a leading cause of disability worldwide. Within the multifaceted pathophysiology of migraine, hormonal fluctuations play an evident triggering and exacerbating role, pointing toward the need for identification and proper usage of both existing and new hormonal targets in migraine treatment.

Areas covered: With a threefold higher incidence of migraine in women than in men, the authors delve into sex hormone-related events in migraine patients. A comprehensive overview is given of existing hormonal therapies, including oral contraceptives, intrauterine devices, transdermal and subcutaneous estradiol patches, gnRH-agonists, oral testosterone, and 5α reductase inhibitors. The authors discuss their effectiveness and risks, noting their suitability for different patient profiles. Next, novel evolving hormonal treatments, such as oxytocin and prolactin, are explored. Lastly, the authors cover hormonal conditions associated with migraine, such as polycystic ovary syndrome, endometriosis, and transgender persons receiving gender affirming hormone therapy, aiming to provide more personalized and effective solutions for migraine management.

Expert opinion: Rigorous research into both existing and new hormonal targets, as well as the underlying pathophysiology, is needed to support a tailored approach in migraine treatment, in an ongoing effort to alleviate the impact of migraine on individuals and society.

van Lohuizen R, et al. Expert Rev Neurother. 2023;24(1):1-21. PMID: 38112066.

La revue de l'état de l'Art / *State of the Art Review / SotA Review*

Objectif	Faire le point sur l'état des connaissances actuelles et proposer des orientations pour des recherches futures. 3 parties : où nous en sommes, comment nous en sommes arrivés là, où nous devrions aller.
Avantage	Vue d'ensemble de la connaissance et mise en évidence des limites actuelles du domaine de recherche
Limite	N'est pas nécessairement systématique et exhaustive Subjectivité selon les valeurs et les convictions des auteurs

La revue de l'état de l'Art / *SotA Review* : exemple

THE PRESENT AND FUTURE

JACC STATE-OF-THE-ART REVIEW

When Direct Oral Anticoagulants Should Not Be Standard Treatment

JACC State-of-the-Art Review

Antoine Bejjani, MD,[a,b,c,*] Candrika D. Khairani, MD, MMSc,[a,b,*] Ali Assi, MD, MBA,[d] Gregory Piazza, MD, MS,[a,b,d] Parham Sadeghipour, MD,[e,f] Azita H. Talasaz, PharmD,[g,h] John Fanikos, RPH, MBA,[i] Jean M. Connors, MD,[j] Deborah M. Siegal, MD, MSc,[k] Geoffrey D. Barnes, MD, MSc,[l] Karlyn A. Martin, MD, MS,[m] Dominick J. Angiolillo, MD, PhD,[n] Dawn Kleindorfer, MD,[o] Manuel Monreal, MD, PhD,[p] David Jimenez, MD, PhD,[q] Saskia Middeldorp, MD, PhD,[r] Mitchell S.V. Elkind, MD, MS,[s,t] Christian T. Ruff, MD, MPH,[b] Samuel Z. Goldhaber, MD,[a,b] Harlan M. Krumholz, MD, SM,[u,v,w] Roxana Mehran, MD,[x] Mary Cushman, MD, MSc,[y,z] John W. Eikelboom, MBBS,[aa] Gregory Y.H. Lip, MD,[bb,cc] Jeffrey I. Weitz, MD,[dd,ee] Renato D. Lopes, MD, PhD,[ff,gg] Behnood Bikdeli, MD, MS[a,b,r,hh]

FIGURE 1 Where DOACs Are Preferred and Where They Fared Worse

	AF*	VTE	Mechanical Heart Valves	Rheumatic AF	Thrombotic APS	ESUS	TAVR‡	LVAD
Apixaban	6 Apixaban vs Warfarin	† 9,14 Apixaban vs Warfarin	42 Apixaban vs **Warfarin**	?	39 Apixaban vs **Warfarin**	49,50 Apixaban vs Aspirin	46 Apixaban vs Vitamin K Antagonist or antiplatelet	?
Rivaroxaban	5 Rivaroxaban vs Warfarin	† 10,13,15 Rivaroxaban vs Warfarin, Aspirin	?	40 Rivaroxaban vs **Vitamin K Antagonist**	36-38 Rivaroxaban vs **Warfarin**	47 Rivaroxaban vs **Aspirin**	44 Rivaroxaban vs **Aspirin, Clopidogrel**	?
Edoxaban	7 Edoxaban vs Warfarin	12 Edoxaban vs Warfarin	?	?	?	?	‡ 43,45 Edoxaban vs Aspirin and Clopidogrel, Vitamin K Antagonist	?
Dabigatran	4 Dabigatran vs Warfarin	† 11,16 Dabigatran vs Warfarin	41 Dabigatran vs **Warfarin**	?	?	48 Dabigatran vs **Aspirin**	?	92 Dabigatran vs **Phenpro-coumon and Aspirin**

✓ DOACs had demonstrable safety and efficacy compared with standard treatment

× DOACs lacked safety and/or efficacy compared with standard treatment§

DOACs did not show a net benefit compared with standard treatment

? No trial performed; unknown evidence

Bejjani A, et al. J Am Coll Cardiol. 2024;83(3):444-465. PMID: 38233019.

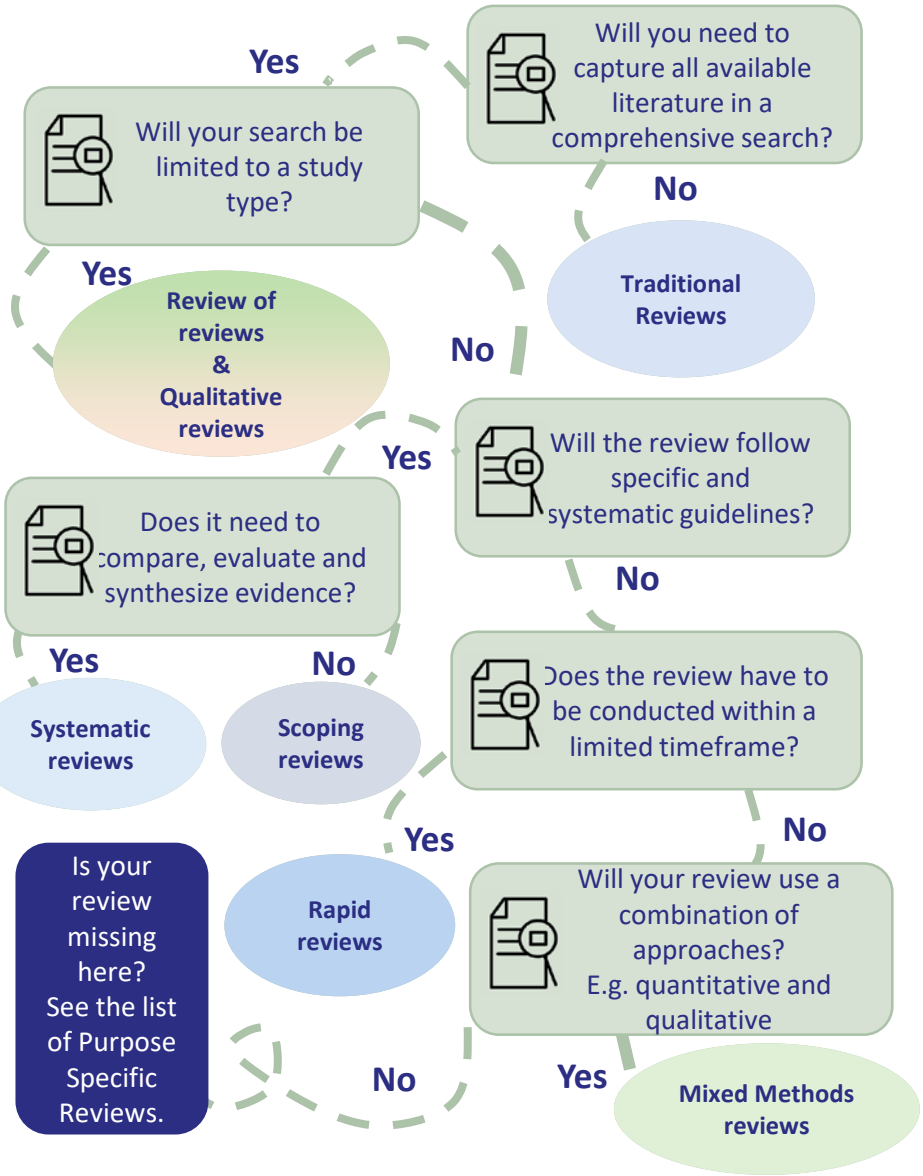
Quel type de revue choisir ?

Review of Reviews
- Umbrella Review
- Review of Reviews

Qualitative Reviews
- Q Evidence Synthesis
- Q Interpretive Meta-synthesis
- Q Meta synthesis
- Framework Synthesis
- Meta aggregation
- Meta ethnography
- Meta-interpretation
- Meta-Narrative Review
- Meta-study
- Meta-summary
- Thematic Synthesis

Systematic Reviews
- Systematic Review
- Meta-analysis
- Comparative Effectiveness Review
- Diagnostic Systematic Review
- Network Meta-analysis
- Prognostic Review
- Psychometric Review
- Review of Economic Evaluations
- SR of Epidemiology Studies

Purpose Specific Reviews
- Scoping Review
- Mapping Review



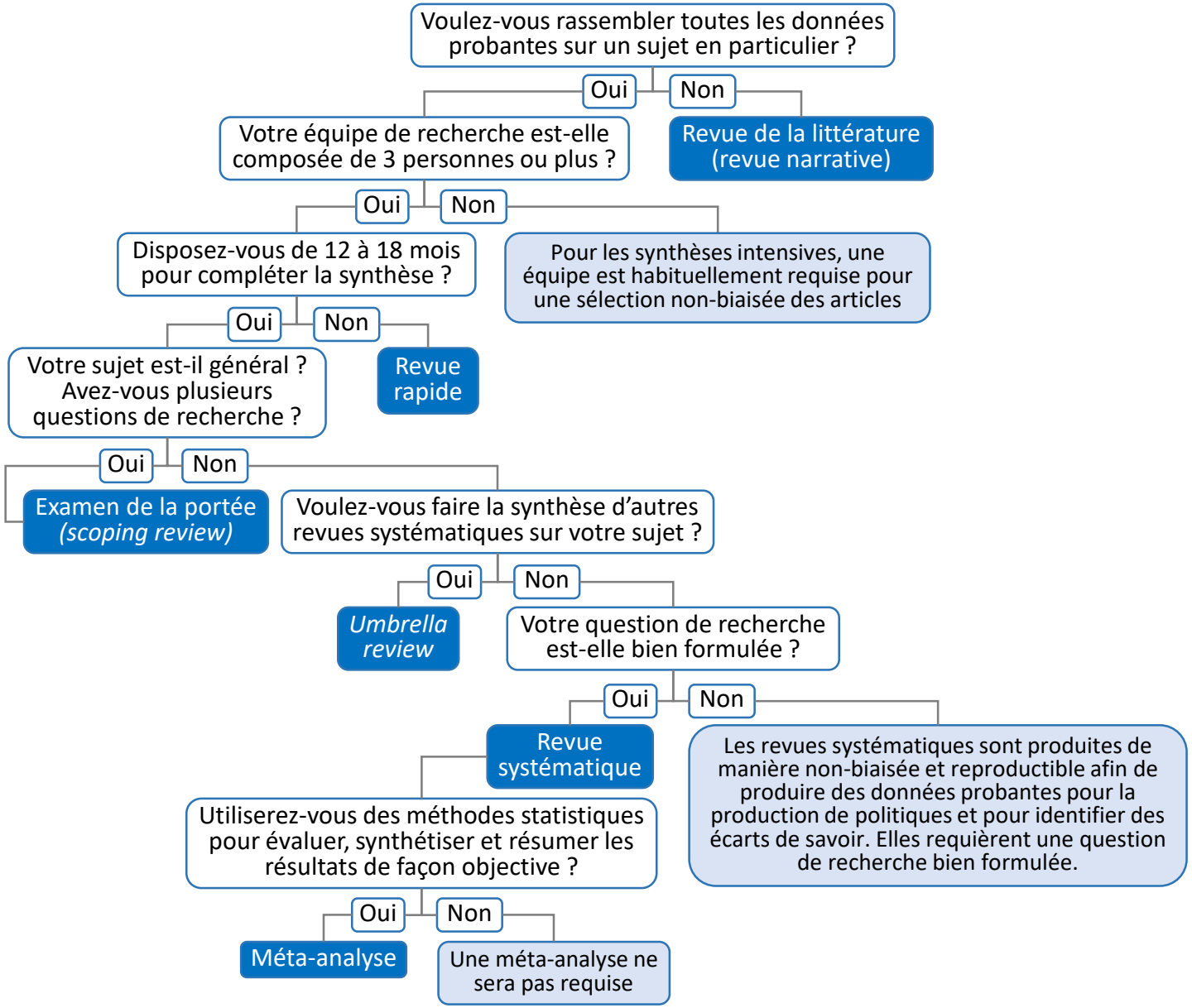
Traditional Reviews
- Critical Review
- Integrative Review
- Narrative Review
- State of the Art Review

Rapid Reviews
- Rapid Review
- Rapid Evidence Assessment
- Rapid Realist Review

Mixed Method Reviews
- Mixed Methods Synthesis
- Narrative Synthesis
- Meta-narrative Review
- Bayesian Meta-analysis
- EPPI Centre Review
- Critical Interpretive Synthesis
- Realist Synthesis

https://unimelb.libguides.com/whichreview

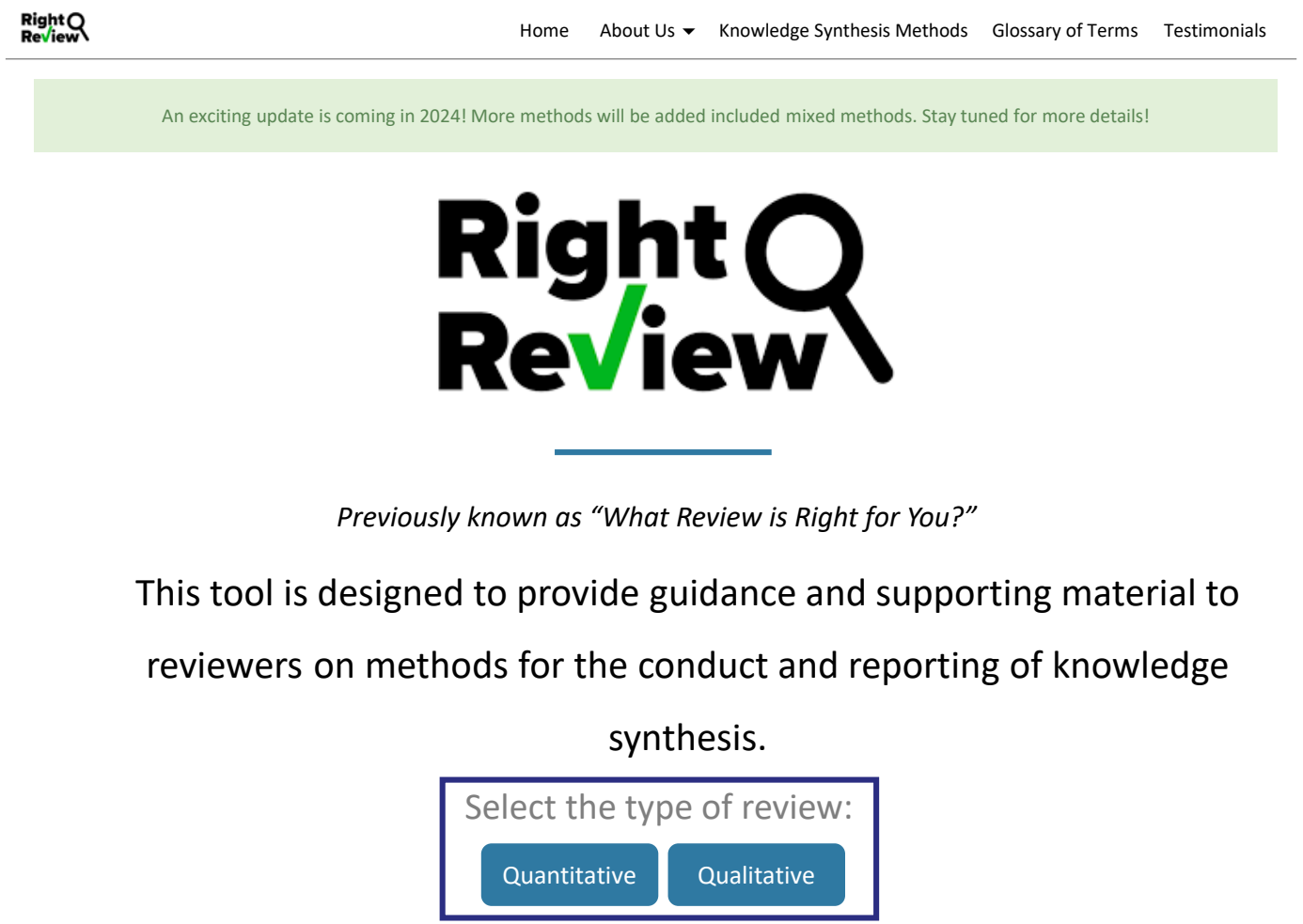
Quel type de revue choisir ?



https://bib.umontreal.ca/evaluer-analyser-rediger/syntheses-connaissances/revue-systematique/

Quel type de revue choisir ?

https://whatreviewisrightforyou.knowledgetranslation.net/



Quel type de revue choisir ?

Right Review: Quantitative Reviews

For guidance on using this tool, please refer to our Explanation and Elaboration document and/or the tool tips icon found beside each question.

1. What is your goal or objective?

- ● a. Assess the effectiveness and/or safety of interventions
- ○ b. Assess the burden of illness, monetary costs or the cost-effectiveness of interventions
- ○ c. Assess the epidemiology of a disease or health condition
- ○ d. Assess the prognosis of a disease or health condition
- ○ e. Assess a diagnostic test for precision and accuracy
- ○ f. Identify/clarify concepts, definitions, available research, and gaps in research

2. If your review is about interventions or diagnostic tests, how many?

- ● a. 2
- ○ b. > 2
- ○ c. Not applicable

3. What type of evidence will you be using?

- ○ a. Systematic reviews only
- ● b. Primary studies only
- ○ c. Both

4. What type of analysis will you conduct?

- ○ a. Descriptive analysis only
- ○ b. Quantitative synthesis only
- ● c. Both

5. Do you have time and/or cost constraints to complete your review?

- ○ a. Yes
- ● b. No

Submit

Results

<< Return to tool

Suggested Method: Systematic review of the effectiveness and/or safety of interventions with meta-analysis, if appropriate

Note: Relevant resources related to the recommended method are provided below as full citations and/or URLs. Some of the URL links may change over time as the resources are continuously updated; the links were last accessed in August 2020.

+ View answers

Systematic review

+ View definition

+ View conduct and reporting guidance

A form of knowledge synthesis that attempts to collate all empirical evidence that fits pre-specified eligibility criteria in order to answer a specific research question. Systematic reviews use explicit, systematic methods that are selected with a view to minimize bias, thus providing more reliable findings from which conclusions can be drawn and decisions made. [2]

Meta-analysis

+ View definition

+ View conduct and reporting guidance

In the context of a systematic review, a meta-analysis is a statistical technique for combining data from multiple studies [3]

Examples

+ View examples of methods

- **Conduct Guidance**
  - Deeks JJ, et al. Chapter 10: Analysing data and undertaking meta-analyses. In: Higgins JPT, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA (editors). Cochrane Handbook for Systematic Reviews of Interventions version 6.0 (updated July 2019). Cochrane, 2019
  - …/…
- **Reporting Guidance**
  - PRISMA for systematic review protocols (PRISMA-P)
  - Preferred Reporting Items for Systematic reviews and Meta-Analyses (PRISMA) Statement

Conclusions

- Prolifération des méthodes de synthèse de la littérature : difficulté pour choisir la « bonne » méthode

- Importance de comprendre les similitudes et différences entre les méthodes

- Type de synthèse va dépendre : question, recherche de la littérature, type d'étude à inclure, données (qualitatives et/ou quantitatives), analyse

- Outils d'aide à la décision pour choisir la méthode appropriée : arbres décisionnels, RightReview...

Conclusions

	Rapidité	**Détails méthodologiques**	**Risque de biais**	**Exhaustivité**
Revues traditionnelles	Dépend du domaine de recherche	Pas de méthodes	Élevé	Dépend de l'auteur
	Rapide	Peu de méthodes	Risque accru	Possiblement incomplète
Revue rapide				
Scoping/mapping review				
Revue systématique ± méta-analyse				
	Lent	Plus de méthodes explicites	Risque réduit	Complète

Inspiré de: https://libguides.csu.edu.au/review/Types

Références

- **Birkic V,** Celeste T, & Cochrane L (2020). *Which review is that? A guide to review types*. Available from https://unimelb.libguides.com/whichreview

- **Grant MJ**, Booth A. *A typology of reviews: an analysis of 14 review types and associated methodologies*. Health Info Libr J. 2009;26(2):91-108. PMID: 19490148.

- **Sutton A**, Clowes M, Preston L, Booth A. *Meeting the review family: exploring review types and associated information retrieval requirements*. Health Info Libr J. 2019;36(3):202-222. PMID: 31541534.

- **Campbell F,** Tricco AC, Munn Z, et al. *Mapping reviews, scoping reviews, and evidence and gap maps (EGMs): the same but different- the "Big Picture" review family*. Syst Rev. 2023;12(1): 45. PMID: 36918977.

- **Amog K**, Pham B, Courvoisier M, et al. *The web-based "Right Review" tool asks reviewers simple questions to suggest methods from 41 knowledge synthesis methods*. J Clin Epidemiol. 2022;147:42-51. PMID: 35314349.

- https://whatreviewisrightforyou.knowledgetranslation.net/

- https://www.prisma-statement.org/