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LETTER TO THE EDITOR

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FIRST BH COCHRANE SYMPOSIUM HELD

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ABSTRACT

The first BH Cochrane Symposium was held on 12 October 2015 in Sarajevo, Bosnia and Herzegovina (BH), organized by the Agency for Quality and Accreditation in Healthcare in Federation of BH (AKAZ) and Medical Faculty University of Sarajevo. A group of ten national and international experts presented the Cochrane organization and systematic reviews, as well as the IMPACT Observatory, development of guidelines in BH, and the role of AKAZ. Examples of the development and use of Cochrane reviews in evidence informed decision making in health as well as research integrity were presented and discussed. Major BH decision makers and interested professionals from all over BH participated in a symposium and its lively discussion, especially from the perspective of Cochrane and its activities in BH, and the collaboration with the Croatian Cochrane. It can be expected that this symposium will inspire further growth of participation and use of Cochrane in BH and increase the awareness of various aspects of evidence informed medicine and research integrity.

Key words: Cochrane Symposium, evidence informed medicine, IMPACT Observatory.

1. BACKGROUND

There is great news for evidence-informed medicine fans in Bosnia and Herzegovina (BH): the first BH Cochrane Symposium was held on 12 October 2015 in Sarajevo. This historic event was organized by the Agency for Quality and Accreditation in Healthcare in Federation of BH (AKAZ) and Medical Faculty University of Sarajevo. This has been a great achievement as numerous sympathizers gathered together from all over BH: Zenica, Sarajevo, Mostar, Tuzla. Furthermore, once again the support from Cochrane Croatia proved to be invaluable, as predicted in an article that circled the world in the Effective Healthcare Program's weekly article alert of the US Agency for Healthcare Research and Quality's Effective Healthcare Program's Scientific Resource Center (SRC) (1). Finally it is important to note the interest expressed by decision makers—as representatives of the Federal Ministry of Health, Federal Ministry of Education and Science and State Ministry of Civil Affairs of Bosnia and Herzegovina participated in the symposium.

Cochrane, previously known as Cochrane Collaboration, is an independent, non-profit, non-governmental international organization. There are 37,000 volunteers from more than 130 countries (www.cochrane.org, accessed 24 Jan 2016) working on organizing medical research information systematically in order to provide high quality unbiased

evidence for making decisions in health care. There are 14 centres and 19 regional branches operating, the nearest organized Cochrane centre to BH is Italian Cochrane, and the nearest Cochrane branch is Cochrane Croatia. BH has no formally organized Cochrane activity (yet), but Irena Zakarija-Grković, Cochrane Croatia Co-director stressed that there were some discussions (during the 23rd Cochrane Colloquium held in Vienna) that a Cochrane branch could be established in BH; Cochrane Croatia would become a centre.

Cochrane has already got into official regulatory framework in BH: knowledge on Cochrane Library use is listed as one of the skills in the Curriculum of Clinical Pharmacology specialization (2). Cochrane systematic reviews are also recognized as a valuable source of evidence for making decisions on health technology assessments.

The efficiency of using the Cochrane Library in setting priorities in making national reimbursement lists has already been proven both in BH and Croatia (3, 4). It has been demonstrated that the Cochrane Database of Systematic Reviews can brilliantly supplement the World Health Organization Essential Medicines List (WHO EML) in providing high quality evidence for making decisions on national medicines reimbursement lists.

Since its establishment in 2008, Cochrane Croatia has significant achievements, especially in the field of getting

evidence to physicians and lay audience, by distribution of evidence translated into Croatian. It is very convenient that languages of these neighbouring countries are similar and BH can and could benefit from the good work done in Croatia.

2. SYMPOSIUM

International speakers of the first BH Cochrane event were: Tom Jefferson (Italy)–via Skype, Mona Nasser (United Kingdom), Sylvia Minozzi (Italy) Karmela Krleža-Jerić (Canada and Croatia), and Dario Sambunjak, Ivica Grković, Irena Zakarija-Grković from Croatia. Several BH experts also spoke demonstrating that the idea is already present in BH. These are Nermin Salkić (Tuzla), Mersiha Mahmić-Kaknjo (Zenica), Filipa Markotić (Mostar), Fadila Serdarević (Sarajevo) and Ahmed Novo (Sarajevo).

Broad spectrum of themes connected to evidence informed medicine was covered from the basic information on Cochrane and systematic reviews to using systematic reviews to inform policies e.g. in making national reimbursement list, and to develop guidelines. Furthermore the role of AKAZ was presented. The audience got a very comprehensive review on Evidence based medicine (EBM): everything from Patient Intervention Comparison Outcome (PICO) to the publication bias assessment, specially emphasizing the heterogeneity issue, which can weaken the strength of systematic review evidence.

It is important to note that BH is one of rare European countries that has free access to Cochrane Library due to its middle income status. Cochrane Croatia's way to promote evidence-based medicine to the lay audience was presented. One of its first activities included a translation into Croatian of "Testing Treatments" by I. Evans, H. Thornton, I. Chalmers and P. Glasziou. Brimming with vivid examples, the *Testing Treatments* is expected to inspire both patients and professionals. It is about conventional medicine and there are a lot of examples of current understanding of effectiveness and safety of therapies. During the promotion of Croatian translation of the book, Cochrane Croatia received many questions about alternative medicine. To address such questions, a web portal *Evidence in Medicine* (Dokazi u medicini) was established in 2014. Citizens submit questions via web form, and then a team of volunteers – researchers and clinicians, analyze literature – MEDLINE, CDSR, DARE, CENTRAL, look for systematic reviews and RCTs, formulate conclusions, and their response gets published on the portal. The scientists answer the questions anonymously, and the whole team stands by the conclusions. This has been the most popular activity of Cochrane Croatia since its establishment in 2008 and so far more than 100 questions have been answered. Two scientists from BH participated in this portal: Mersiha Mahmić-Kaknjo and Filipa Markotić.

At the beginning, informed by the survey on physicians knowledge and attitudes (5), the Cochrane Croatia directed most of their activities at the physicians while later the focus has been shifted to the lay audience, using social networks which had excellent impact on promoting EBM (6).

Recently, a similar study was performed for BH, the findings were similar: awareness was low but the attitudes towards Cochrane and EBM were positive (7).



Figure 1. Presenters for the 1st Cochrane BH event, from right to left: Filipa Markotić, Ivica Grković, Karmela Krleža-Jerić, Irena Zakarija-Grković, Mersiha Mahmić-Kaknjo, Dario Sambunjak, Mona Nasser, Sylvia Minozzi, Ahmed Novo, Fadila Serdarević (Courtesy of Irena Zakarija-Grković)

In the second part of the symposium related initiatives were presented: The IMPACT Observatory and Guidelines development in BH.

The **IMPACT** (IMProving Access to Clinical Trial Data) **Observatory** is an international study funded by the New-FelPro fellowship (Marie Skłodowska-Curie and Croatian Government) (<http://ottawagroup.ohri.ca/disclosure.html>, accessed 24 Jan 2016). It aims to assess the impact of transitions of clinical trial (CT) data sharing on CTs. Observatories or natural experiments assess the impact of interventions not controlled by the observatory researcher(s), inform the process and indicate trends. The objective of the IMPACT Observatory is to increase the reliability of evidence gained by systematic reviews, contribute to increasing research efficiency and integrity and reduce waste. Its setting included development of a methodology for assessing the impact on trials of data sharing interventions of different stakeholders, including: regulators, funders, journals, researchers, consumers, academia and pharmaceutical industry, and establishing a network of collaborators.

It is led by Karmela Krleža-Jerić while Mersiha Mahmić-Kaknjo and Josip Šimić, from Zenica and Mostar, respectively, are BH members of its team.

The process of development of clinical practice guidelines in Federation of BH and implementation of EBM into clinical practice was presented (8), as well as the role of AKAZ.

AKAZ, Agency for Quality and Accreditation in Healthcare in Federation of Bosnia and Herzegovina, is the main federal centre for defining, measuring, monitoring and improving standards of clinical practice and management of services. AKAZ is also a federal centre for the definition, evaluation and dissemination of evidence based clinical guidelines for effective and efficient clinical practice.

Clinical practice guidelines (CPGs) are based on the best possible scientific evidence (9, 10, 11), expert opinion and professional consensus and they take into account patients and all key stakeholders. In the Federation CPGs have advisory character and as such have to be flexible so as to reconcile the most recent scientific and clinical achievements with what can realistically be achieved in the health sector



Figure 2. Karmela Krleža-Jerić as speaker at the First COCHRANE BH Symposium in Sarajevo, October 12th, 2015

of Bosnia and Herzegovina. Their development must be sustainable process, taking into account the limited resources. CPGs are developed by multidisciplinary teams of health professionals and other stakeholders fostering partnerships, cooperation, active participation and fair representation of all stakeholders. The value and usefulness of the guidelines will be evaluated using the AGREE II instrument. Guidelines will be updated regularly at specified intervals of time.

AKAZ provides health professionals with administrative support, development funding (the funding of projects and arrangements with health insurance funds), organization of the meetings, Education (EBM, Cochrane, and literature search), evaluation/assessment of CPG (AGREE II instrument) and distribution and dissemination of guidelines (e-mails, newsletters, web sites, CD-ROM, print, etc.).

Presentations triggered a very vivid discussion, which turned from Bosnian to Croatian into English and vice versa spontaneously, which demonstrated the interest of participants in evidence informed medicine.

3. CONCLUSION

Authors hope that this event will become established, and soon harvest more cooperation in disseminating and contribution in the production of evidence, and reducing waste in research (<https://twitter.com/monalisa1n/status/672448827421495297>, accessed Jan 24, 2016), (12). We also hope that Mona Nasser's prediction will come true: "By adopting this practice researchers in BH can bring their system in line with the best in the world and compete for global funding:" (<http://www.the-dentist.co.uk/article/4108/cochrane-principles-in-bosnia-herzegovina>, accessed Jan 24, 2016).

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