



News

Wanted: RCT evidence for education by GP's

Prof Flicker, Professor of Geriatric Medicine, University of Western Australia, is looking for any randomized trial evidence of an effect of education of GPs affecting health outcomes of their patients. He envisages that that the study design would be a cluster randomized trial with the GP (or the GP practice) as the unit of randomization. He is not interested in trials with process outcomes (e.g. more likely to investigate or vaccinate) or health behaviors of the patients (e.g. older people increasing their physical activity) but patients' health outcomes e.g. risk of depression, heart attacks, death, etc.

Please send your references to leon.flicker@uwa.edu.au

Cochrane Collaboration applied for official status in World Health Organization

Recently the Cochrane Collaboration submitted an application for status as a non-government organization (NGO) in official relations with WHO. The application will be discussed in the next Executive Board meeting of WHO (January 2011). Immediately after the meeting the Collaboration will know if the application has been successful. If the submission is successful, then the Cochrane Collaboration will be able to appoint a representative to participate in the World Health Assembly (WHA, held in Geneva in May each year), and make contributions to items on the WHA agenda that are related to the work of the Cochrane Collaboration.

Society for Clinical Trials - Trial of the Year

Each year the Society for Clinical Trials and Project ImpACT presents an award to the randomized clinical trial published (electronically or on paper) in the previous year that best fulfills the following standards:

- * It improves the lot of mankind.
- * It provides the basis for a substantial, beneficial change in health care.
- * It reflects expertise in subject matter, excellence in methodology, and concern for study participants.
- * It overcame obstacles in implementation.
- * The presentation of its design, execution, and results is a model of clarity and intellectual soundness.

The society is now accepting nominations for the outstanding Trial of the Year published (electronically or on paper) in 2010. The deadline for nominations is January 31, 2011, and the award will be presented at our annual meeting in Vancouver.

To nominate the trial you think best meets our standards, simply send an email to Dave Sackett sackett@bmts.com with its citation and the reasons why you think it deserves the award.

P.E.A.R.L.S.

practical evidence about real life situations

The New Zealand Guideline Group fund the Cochrane Primary Care Field to produce the P.E.A.R.L.S. (click [here](#) for the websitelink)

Access <http://www.cochraneprimarycare.org/> to view the PEARLS online.

The actual Cochrane abstracts for the P.E.A.R.L.S are at

182. [No evidence on best filling material for the treatment of caries in primary teeth in children](#)

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Colophon

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The Cochrane Primary Health Care Field is a collaboration between:

¹ New Zealand Branch of the Australasian Cochrane Centre at the Department of General Practice and Primary Health Care, University of Auckland and funded by the New Zealand Guidelines Group;

² Academic Department of Primary and Community Care in The Netherlands, The Dutch College of General Practitioners, and the Netherlands Institute for Health Services Research;

Abstracts

No evidence on best filling material for the treatment of caries in primary teeth in children

Clinical question	What are the most effective filling materials for the treatment of dental caries in primary teeth in children?
Bottom line	There were no significant differences in outcomes (pain relief, gingival health, restoration failure, patient satisfaction and aesthetics) between the materials tested. These included metal restorations, stainless steel crowns, glass ionomers, resin composites, and polyacid modified resin composites (compomers). The eligible trials enrolled young children (less than 12 years old), with tooth decay involving at least 1 tooth in the primary dentition which was symptomatic or symptom free at the start of the study.
Caveat	No studies were found that compared restorations versus extractions or no treatment as an intervention in children with childhood caries. The study periods ranged from 6 months to 3 years.
Context	Childhood caries (tooth decay) consists of a form of tooth decay that affects the milk teeth (also known as baby or primary teeth). This may range from tooth decay in a single tooth to rampant caries, affecting all the teeth in the mouth. Primary teeth in young children are vital to their development and every effort should be made to retain these teeth for as long as is possible. Dental fillings or restorations have been used as an intervention to repair damaged teeth.
Cochrane Systematic Review	Yengopal V et al. Dental fillings for the treatment of caries in the primary dentition. Cochrane Reviews 2009, Issue 2. Article No. CD004483. DOI: 10.1002/14651858.CD004483.pub2. This review contains 3 studies involving 81 participants.
PEARLS No. 182, July 2009, written by Brian R McAvoy	

[References]

Upright positions and walking beneficial in first stage of labour

Clinical question	Are upright positions and walking beneficial in the first stage of labour?
Bottom line	Upright positions and walking are associated with a reduction in the length of the first stage of labour (by approximately one hour), and women randomised to upright positions may be less likely to have epidural analgesia (NNT* 19 [11 to 97]). There was little evidence of differences for other outcomes, including length of the second stage of labour, mode of delivery, use of opioid analgesia or mothers' and babies' wellbeing. *NNT = number needed to treat to benefit 1 individual (95% confidence intervals)
Caveat	Little information on maternal satisfaction or outcomes for babies was collected, and none of the studies compared different upright or recumbent positions.
Context	It is more common for women in the developed world, and those in low-income countries giving birth in health facilities, to labour in bed. There is no evidence this is associated with any advantage for women or babies, although it may be more convenient for staff. Observational studies have suggested, if women lie on their backs during labour, this may have adverse effects on uterine contractions and impede progress in labour.
Cochrane Systematic Review	Lawrence A et al. Maternal positions and mobility during first stage labour. Cochrane Reviews 2009, Issue 2. Article No. CD003934. DOI: 10.1002/14651858.CD003934.pub2. This review contains 21 studies involving 3706 participants.
PEARLS No. 183, July 2009, written by Brian R McAvoy	

[References]

Limited evidence on effectiveness of maintenance treatments for opiate dependent adolescents

Clinical question	How effective are maintenance treatments for opiate dependent adolescents (13 to 18 years)?
Bottom line	One study of 37 participants compared methadone with levomethadyl acetate hydrochloride (LAAM) for

	<p>maintenance treatment. After 16 weeks of maintenance treatment the adolescents were detoxified. The two maintenance treatments gave similar improvements in social functioning. No side effects were reported. The second trial of 150 adolescents compared buprenorphine and naloxone as maintenance treatment, with buprenorphine detoxification over 14 days. The maintenance treatment for 9 weeks followed by tapered doses up to 12 weeks resulted, at 1 year, in more patients retained in treatment (NNT* 2 [2 to 3]); lower self-reported opioid use (NNT 5 [3 to 27]) but no change in the proportion with a positive urine test and no more enrolled in other addiction programmes. The most common side effect in both groups was headache. No participants left the study because of side effects. *NNT = number needed to treat to benefit 1 individual (95% confidence interval)</p>
Caveat	<p>It is difficult to draft conclusions on the basis of only 2 trials, one of which is very old (published 1973) and of very low quality. One of the possible reasons for the lack of evidence could be the difficulty of conducting trials with young people, due to practical and ethical reasons.</p>
Context	<p>Substance abuse among adolescents (13 to 18 years old) is a serious and growing problem. The most common drugs used by young people worldwide are cannabis and inhalants. Psycho-stimulants (ecstasy and amphetamines), cocaine, LSD, heroin and other opioids are also used. In adults, pharmacotherapy is a necessary and acceptable part of effective treatment for opioid dependence. Among adolescents, medications have been used infrequently and a choice has to be made between detoxification and maintenance treatment.</p>
Cochrane Systematic Review	<p>Minozzi S et al. Maintenance treatments for opiate dependent adolescent. Cochrane Reviews 2009, Issue 2. Article No. CD007210. DOI:10.1002/14651858.CD007210.pub2. This review contains 2 trials involving 187 participants.</p>
PEARLS No. 184, August 2009, written by Brian R McAvoy	

[References]

No evidence of benefit from cannabinoids in dementia

Clinical question	Are cannabinoids clinically effective in the treatment of dementia?
Bottom line	There was no evidence that cannabinoids are effective in the improvement of disturbed behaviour in dementia or in the treatment of other symptoms of dementia. Only 1 small study was included which was designed to focus on the effects of the cannabinoid dronabinol on anorexia in Alzheimer's disease. While improvement of anorexia is clearly an important outcome for patients and their carers, it was not a primary outcome of interest in this review. The study concluded that the cannabinoid dronabinol may be useful in the treatment of anorexia and to improve disturbed behaviour in people with Alzheimer's disease.
Caveat	Only 1 small study met the inclusion criteria. The lack of quantitative data and the unclear risk of bias in key domains of this study mean no useful conclusions can be drawn from this review.
Context	There is increasing evidence the cannabinoid system may regulate neurodegenerative processes, such as excessive glutamate production, oxidative stress and neuroinflammation. Neurodegeneration is a feature common to the various types of dementia and this has led to interest in whether cannabinoids may be clinically useful in the treatment of people with dementia. Recent studies have also shown cannabinoids may have more specific effects in interrupting the pathological process in Alzheimer's disease.
Cochrane Systematic Review	Krishnan S et al. Cannabinoids for the treatment of dementia. Cochrane Reviews 2009, Issue 2. Article No. CD007204. DOI: 10.1002/14651858.CD007204.pub2. This review contains 1 study involving 15 participants.
PEARLS No. 185, July 2009, written by Brian R McAvoy	

[References]

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