

# Evidence Insider

*Welcome to 'Evidence Insider',*

*a newsletter for the research evidence databases PEDro, OTseeker, PsycBITE and speechBITE.*

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## Final OTseeker workshops...



Two free workshops will be run again by the OTseeker team in April.

One workshop is an introduction to critical appraisal of randomised controlled trials, and the other is a workshop about implementing evidence in practice.

Both of these two workshops will be held in two locations:

- ◆ Coffs Harbour (NSW) Thursday 28th April
- ◆ Brisbane (QLD) Friday 29th April

Please contact Angela to register and find out more.

[angelav.ot@gmail.com](mailto:angelav.ot@gmail.com)

Do you have any questions or comments in regards to this newsletter? Would you like to add an item of news in the next issue? Please contact  
Christie Delaney  
on  
[c.delaney@uq.edu.au](mailto:c.delaney@uq.edu.au)



## Who supports these databases?

The Motor Accidents Authority is a statutory corporation that regulates the NSW Motor Accidents Scheme. Its vision is to lead and support a Compulsory Third Party Scheme that minimises the impact of motor vehicle accidents. The MAA also supports research about injury management and has generously supported the development and maintenance of all 4 databases.

Funding has also been received from many other sources for each of the databases. This information is available on the respective websites.



# Overview of PEDro & OTseeker

**PEDro**  
PHYSIOTHERAPY EVIDENCE DATABASE

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Simple search  
Advanced search

**English**

- Frequently asked questions
- Search help
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中文  
Portugués  
Deutsch  
Français

**Welcome to PEDro**

PEDro is the Physiotherapy Evidence Database. PEDro is a free database of over 13,000 randomised trials, systematic reviews and clinical practice guidelines in physiotherapy. For each trial, review or guideline, PEDro provides the citation details, the abstract and a link to the full text, where possible. All trials on PEDro are independently assessed for quality. These quality ratings are used to quickly guide users to trials that are more likely to be valid and to contain sufficient information to guide clinical practice. PEDro is produced by the Centre for Evidence-Based Physiotherapy at The George Institute for Global Health.

[More on PEDro](#)

**Search the PEDro database**

There are three search pages for the PEDro database. Two were designed for health professionals (simple search and advanced search). One was designed for consumers of physiotherapy and can be accessed via the Physiotherapy Choices web-site.

- [Begin a simple search](#)
- [Begin an advanced search](#)

**PEDro supporters**

The Centre for Evidence-Based Physiotherapy produces PEDro on a not-for-profit basis. Financial support is required to maintain and develop PEDro. Please [contact us](#) with offers of financial support.

[More on PEDro supporters](#)

**Physiotherapy Choices**  
WHICH TREATMENT IS BEST FOR ME?

**Latest updates**

Find out the latest updates that have been made to this PEDro database via a range of tailored feeds.

[More updates](#)

THE GEORGE INSTITUTE for Global Health  
Affiliated with THE UNIVERSITY OF SYDNEY

## PEDro

Physiotherapy Evidence Database  
[www.pedro.org.au](http://www.pedro.org.au)

In February 2011 update, PEDro contained **18,089 records**:

- ◆ 14,619 randomised controlled trials
- ◆ 2,641 systematic reviews
- ◆ 722 evidence-based clinical practice guidelines, and
- ◆ 107 records coded as both a practice guideline and systematic review.

### WHO USED PEDRO IN 2010?

In 2010 PEDro was used in over 120 countries to answer nearly 1.6 million clinical questions, with an average of 4,322 searches performed each day.

### RECENT PAPERS

Michaleff ZA, Costa LO, Moseley AM, Maher CG, Elkins MR, Herbert RD, Sherrington C. CENTRAL, PEDro, PubMed, and EMBASE Are the Most Comprehensive Databases Indexing Randomized Controlled Trials of Physical Therapy Interventions. *Phys Ther.* 2011 Feb;91(2):190-7 [see <http://www.ncbi.nlm.nih.gov/pubmed/21148259>]

Moseley AM, Herbert RD, Maher CG, Sherrington C, Elkins MR. Reported quality of randomized controlled trials of physiotherapy interventions has improved over time. *J Clin Epidemiol.* 2010 Dec 6; Epub ahead of print [see <http://www.ncbi.nlm.nih.gov/pubmed/21144705>]

## OTseeker Occupational Therapy Systematic Evaluation of Evidence [www.otseeker.com](http://www.otseeker.com)

In February 2011 update, OTseeker contained **7,100 records**:

- ◆ 5408 randomised controlled trials
- ◆ 1653 systematic reviews

New resources are regularly added to the **Injury Management Resource** within OTseeker.

In total there are now 1900 articles indexed in this specialised resource including :

- \* 200 articles about assessment of injury
- \* 1060 articles about injury management interventions
- \* 360 articles about the course of injuries
- \* 260 qualitative articles about patient experiences and
- \* 20 guidelines

### WHO USED OTSEEKER IN 2010?

In 2010 there were over 230,000 visits from over 120 countries to OTseeker

### RECENT PAPERS

McCluskey, A., BENNETT, S, Hoffmann, T, & Tooth, L. (2010). OTseeker helps library and allied health professionals to find quality evidence efficiently. *Health Information & Libraries Journal.* Health Information & Libraries Journal, Vol 27 (2), 106–113

Home Search About Questions Resources Acknowledgments Contact Links

**OTseeker**  
Occupational Therapy Systematic Evaluation of Evidence

**Welcome to OTseeker**

OTseeker is a database that contains abstracts of systematic reviews and randomised controlled trials relevant to occupational therapy. Trials have been critically appraised and rated to assist you to evaluate their validity and interpretability. These ratings will help you to judge the quality and usefulness of trials for informing clinical interventions. In one database, OTseeker provides you with fast and easy access to trials from a wide range of sources.

**Search:** Search the database. On the search page you will have the choice of doing a keyword and/or category search.

**About:** Read about the origin and development of the OTseeker database.

**Questions:** Find answers to questions such as "How are the trials rated?" and "How were the trials located?"

**Resources:** Learn about evidence-based practice and access power-point presentations, articles, and other resources.

**Acknowledgments:** See who has supported the development of OTseeker.

**Contact:** Find out how to contact us.

**Links:** Discover links to other sites about evidence-based practice.

**OTseeker Updates**

- [OTseeker brochure](#)
- [Newsletters](#)
- [OTseeker powerpoint tutorial](#)
- [Register for OTseeker email updates](#)

**Featured Resources**

- [Injury Management Resources](#) - This resource contains research and resources about injury management for people who have sustained injuries.
- [Implementing Evidence in Practice](#) - Do you want to know more about implementing evidence in practice?

**Did You Know?**

- [Shika education in emergency department impr read more...](#)
- [Long term benefits found for supported employment read more...](#)
- [Self management rehabilitation improves HCOL in P read more...](#)

# Overview of PsycBITE & speechBITE

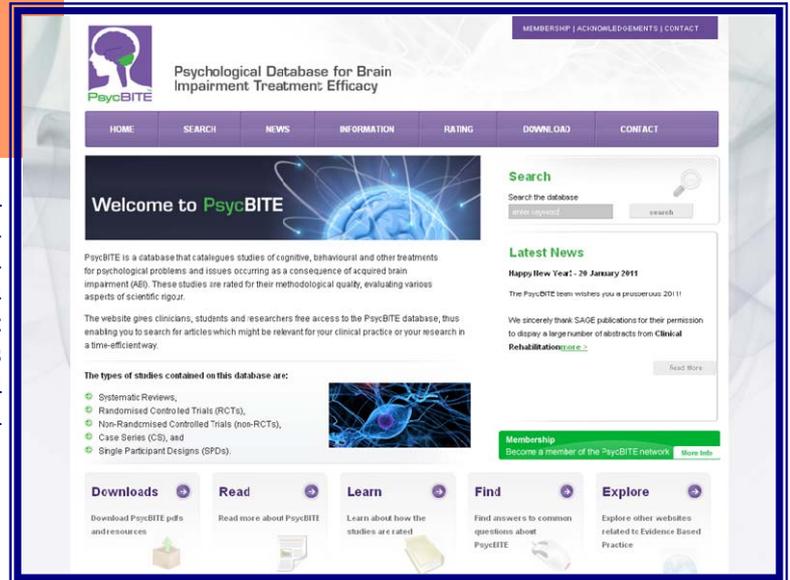
## PsycBITE

Psychological Database for  
Brain Impairment Treatment Efficacy  
[www.psycbite.com](http://www.psycbite.com)

**PsycBITE™** commenced in 2004 and catalogues studies of cognitive, behavioural and other treatments for psychological problems and issues occurring as a consequence of acquired brain impairment (ABI). The types of studies contained on this database are systematic reviews, randomised controlled trials non-randomised controlled trials, case series and single subject design.

As of January 2011 PsycBITE contained **3111 records** consisting of:

- ◆ 328 systematic reviews
- ◆ 702 randomised controlled trials
- ◆ 361 non-randomised controlled trials
- ◆ 662 case series
- ◆ 1058 single subject design studies



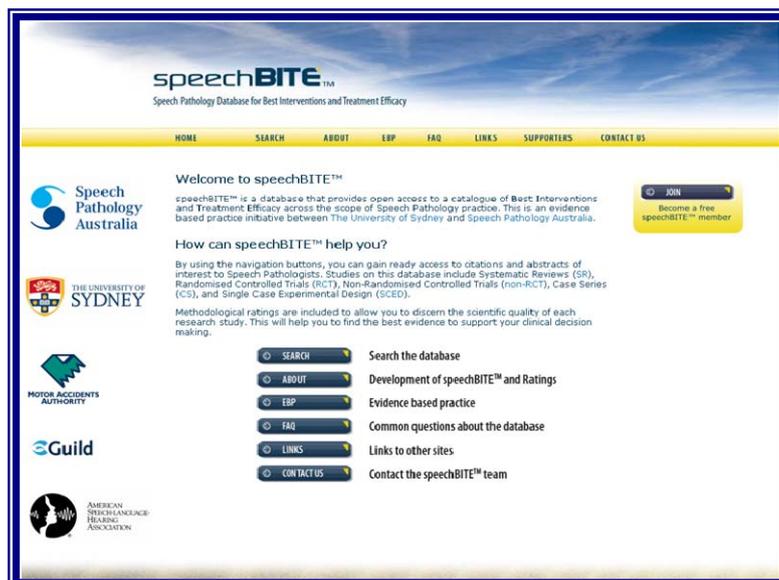
**All databases are accessible  
free of charge**

## speechBITE Speech Pathology Database for Best Interventions and Treatment Efficacy [www.speechbite.com](http://www.speechbite.com)

**speechBITE™** commenced in 2008 and provides open access to a catalogue of Best Interventions and Treatment Efficacy across the scope of Speech Pathology practice. speechBITE is an evidence based practice initiative between The University of Sydney and Speech Pathology Australia. speechBITE has 1141 subscribers from over 30 countries across the world.

As of February 2011 speechBITE contained **2315 records** relevant to speech pathology consisting of:

- ◆ 151 systematic reviews
- ◆ 334 randomised controlled trials
- ◆ 247 non-randomised controlled trials
- ◆ 484 case series
- ◆ 1099 single subject design studies



With an active network of raters, speechBITE now has PEDro ratings for 91% of the randomised and non-randomised controlled trials on the database.

### RECENT PAPERS

A recent article has been published that documents the development of the speechBITE database.

Smith K, McCabe P, Togher L, Power E, Munro N, Murray E & Lincoln M. (2010). An introduction to the speechBITE database: Speech pathology database for best interventions and treatment efficacy. *Evidence-Based Communication Assessment and Intervention* 4(3): 148 - 159

# Research Feature

## Recent research from randomised controlled trials



Use of a positive expiratory pressure device (conical-PEP) during exercise by people with chronic obstructive pulmonary disease is not only safe, but can decrease lung hyperinflation and increase exercise duration (Padkao, et al, 2010).

*Padkao, T., Boonsawat, W., & Jones, C. U. (2010 PT). Conical-PEP is safe, reduces lung hyperinflation and contributes to improved exercise endurance in patients with COPD: a randomised cross-over trial. J Physiother, 56(1), 33-39.*

For people with Parkinson's disease, increasing awareness of sensory feedback during exercise can improve motor symptoms, (Sage, et al 2010).

*Sage, M. D., & Almeida, Q. J. (2010 PT). A positive influence of vision on motor symptoms during sensory attention focused exercise for Parkinson's disease. Mov Disord, 25(1), 64-69.*



People who receive mindfulness-based cognitive therapy for cancer are more likely to experience a greater quality of life and a reduction in depression, anxiety and distress (Foley et al, 2010).

*Foley, E., Baillie, A., Huxter, M., Price, M., & Sinclair, E. (2010 OT). Mindfulness-based cognitive therapy for individuals whose lives have been affected by cancer: a randomized controlled trial. Journal of Consulting & Clinical Psychology, 78(1), 72-79.*

Comprehensive behavioral therapy compared with supportive therapy and education produced a greater reduction in symptom severity for children with Tourette Disorder, with continued benefit 6 months following intervention (Piacentini, et al 2010).

*Piacentini, J., Woods, D. W., Scahill, L., Wilhelm, S., Peterson, A. L., Chang, S., et al. (2010 OT). Behavior therapy for children with Tourette disorder: a randomized controlled trial. JAMA: Journal of the American Medical Association, 303(19), 1929-1937.*

People with epilepsy and co morbid depression who receive the home-based PEARLS program for managing depression, effectively reduces depressive symptoms (Ciechanowski, et al 2010).



*Ciechanowski, P., Chaytor, N., Miller, J., Fraser, R., Russo, J., Unutzer, J., et al. (2010 Psy). PEARLS depression treatment for individuals with epilepsy: a randomized controlled trial. Epilepsy Behav, 19(3), 225-231.*

Goal-orientated cognitive rehabilitation can help people with early-stage Alzheimer disease to improve their goal performance and satisfaction, (Clare, et al 2010).

*Clare, L., Linden, D. E., Woods, R. T., Whitaker, R., Evans, S. J., Parkinson, C. H., et al. (2010 Psy). Goal-oriented cognitive rehabilitation for people with early-stage Alzheimer disease: a single-blind randomized controlled trial of clinical efficacy. Am J Geriatr Psychiatry, 18(10), 928-939.*



For adults who stutter and are unable to access services, the telehealth delivery of the Camperdown Program is a viable treatment alternative. (Carey, et al 2010) .

*Carey, B., O'Brian, S., Onslow, M., Block, S., Jones, M., & Packman, A. (2010 SLP). Randomized controlled non-inferiority trial of a telehealth treatment for chronic stuttering: the Camperdown Program. Int J Lang Commun Disord, 45(1), 108-120.*

The use of augmented language intervention including parent coaching aids speech production abilities in young children with developmental delays, (Ronski, et al 2010)

*Ronski, M., Sevcik, R. A., Adamson, L. B., Cheslock, M., Smith, A., Barker, R. M., et al. (2010 SLP). Randomized comparison of augmented and nonaugmented language interventions for toddlers with developmental delays and their parents. J Speech Lang Hear Res, 53(2), 350-364.*

# Feedback from OTseeker Workshops 2010

## Implementing Evidence into Practice

A large number of allied health professionals attended the recent OTseeker workshops in Sydney. These events were funded by a grant from the Motor Accidents Authority of NSW. A total of 7 workshops are being held in NSW and Queensland over three years. Presenters included Dr Annie McCluskey from the University of Sydney, and Dr Sally Bennett from the University of Queensland.

A total of 67 participants attended including occupational therapists, physiotherapists, speech pathologists, dieticians, researchers, post graduate students, rehabilitation counsellors and music therapists.

The OTseeker team will hold a final 2 workshops in Coffs Harbour and Brisbane in April 2011

*If you would like to attend the next workshop please email the workshop coordinator **Angela Vratsistas** on [angelav.ot@gmail.com](mailto:angelav.ot@gmail.com)*

## Critical Appraisal of Randomised Controlled Trials Workshop

A total of 57 participants attended this workshop. The primary objective of this workshop was to teach allied health professionals how to critically appraise and interpret findings from randomised controlled trials (RCTs). The workshop provided an overview of the evidence databases: OTseeker, PEDro, PsycBITE™ and speechBITE™, and focused the discussion on methodological biases affecting the validity of study results. The workshop also provided information about the PEDro scale with specific reference to the criteria. Examples of RCTs were used throughout the presentation and in a practical exercise with participants to illustrate the application of the scale. Some of the comments by participants are presented below:

*"I feel I have a greater understanding of PEDRO [scale] and RCTs, and confident in applying my knowledge"*

*"Really great that such a high standard of course was free of charge. Thankyou"*

*"It was a great presentation. Very useful to thoroughly go over this topic as it has been a while since I've covered it"*

*"Presenter has great knowledge in the field"*

*"A great step-by-step look at critically appraising RCTs using the PEDro scale. Very useful for those who don't get to do this on a regular basis. Thanks!"*

## Implementing Evidence into Practice – Sydney, 22<sup>nd</sup> Nov 2010

A total of 67 participants attended this workshop which aimed to teach allied health professionals how to implement evidence into clinical practice. The workshops taught participants how to identify evidence-based interventions relevant to their area of practice; identify barriers and enablers that influence evidence uptake; audit current practice, to help identify evidence-practice gaps; and identify strategies to overcome the barriers to evidence uptake and close evidence-practice gap. Here is what some participants said about the workshop:

*"A very informative workshop. Thank you!"*

*"Presenters were great. Clearly very knowledgeable practitioners/researchers. Thank you for imparting your knowledge!"*

*"A lot of food for thought and challenge re trying to do more of this in our workplace"*

*"Identified new information today, so worthwhile reflecting on this area of interest once again"*

*"Has now got me thinking about how I can start implementing evidence into my practice"*

*"Has now got me thinking about how I can start implementing evidence into my practice"*

**Prepared by Angela Vratsistas, OTseeker workshop coordinator.**

# Feedback from PsycBITE Workshops about Single-Case Experimental Designs

PsycBITE has entered uncharted waters with the first training workshop for clinicians in the use of the Single-Case Experimental Design (SCED) scale. As we reported in the previous newsletter, single-subject research designs play an important role in the research of brain and speech impairments. However, recent developments indicate that, if employed appropriately, these designs will gain even greater popularity amongst researchers. The Oxford Centre of Evidence Based Medicine (CEBM) now classifies randomised single-subject designs as level 1 evidence for clinical decision-making (OCEBM Table of Evidence Working Group\*. "The Oxford 2011 Table of Evidence". Oxford Centre for Evidence-Based Medicine. <http://www.cebm.net/index.aspx?o=5653>)

With the provision of the SCED scale, PsycBITE offers a tool to evaluate the methodological quality of single-subject designs. Our first workshop proved to be a great success, and the participants scored 90% of the 11 SCED items correctly after attending the workshop.

*"Thank you, I gained knowledge, some confidence in SCED rating, and an awareness of SCD in general.*

*I enjoyed the session greatly!"*

*"Thank you for a very informative workshop. Lovely."*

*"Thank you, I learnt a great deal."*

*"Thanks for a great session. Good to get views of people from other areas as well e.g. speech, psych, OT, physio)."*

If you are interested in learning how to apply the SCED scale to single-subject designs, please contact Ulli by email: [urosenkoetter@med.usyd.edu.au](mailto:urosenkoetter@med.usyd.edu.au)