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.

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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

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**


**OTseeker**

Occupational Therapy Systematic Evaluation of Evidence

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**

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

PsycBITE Psychological Database for Brain Impairment Treatment Efficacy
www.psycbite.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:

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).


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


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).


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


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).


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).


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).


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

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, 22nd 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”

Prepared by Angela Vratsistas, OTseeker workshop coordinator.
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