Methodological Issue on Reporting of Systematic Review of Diagnostic Accuracy of Rapid Ultrasound in Shock

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Dear Editor,

We were interested to read a systematic review article that was recently published in the Bulletin of Emergency and Trauma journal (volume 6, issue 2) [1]. The aim of authors was to review the evidences to evaluate the effectiveness of the RUSH protocol in determining the exact types of shock in patients referred to the emergency department. We recognize that there are some incorrect approaches to reporting of this precious work. In our overview, authors presented data through literature search using the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) flowchart in the methods section. Data from literature search must be addressed to the result section. This data are not the subsections under the methods section.

Typically, describing number of studies screened, assessed for eligibility, and included in the review, with reasons for exclusion at each stage by a flow diagram should be a part of results section [2-4]. We noticed that, the flow diagram of details of the review process is incomplete and it’s not accordance with the PRISMA flow chart. No effort was made to discuss about number of studies included in qualitative and quantitative synthesis. In the methods section, authors did not report specific information about quality evaluation of included studies via proper checklists; they not provided explanation and a discussion on methodological quality of included studies in the results section. It is highly recommended that completed checklists and summary score of quality evaluation be addressed as a table in the article, or as a supplementary table [2-6]. As discussed, if these criteria are not met, reporting of a systematic review is less likely to be qualified.

A well conducted systematic review as a source of updated information on diagnoses, prognoses, and the effectiveness of healthcare interventions requires a clear and adequate reporting of available evidence obtained [3]. Thus, it is important that systematic reviews have well reported details of their methods, as a result, these articles are claimed to be the best types of studies for clinical decisions making [7]. In this letter, we discussed reporting issues on systematic review studies; thus it is of critical importance that investigators and journals adhere to use reporting guidelines such as the standards set forth by the Cochrane Collaboration and the Quality of Reporting of Meta-Analysis (QUOROM), which has recently been renamed as the PRISMA to improve quality of reporting of
systematic reviews. They will need new skills to use such guidelines.

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References


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