

Hoe organiseer ik een journalclub?

M. Suker
Arts-onderzoeker

Disclosure

- Geen belangenverstrengeling

Introductie

- Mustafa Suker
- Arts-onderzoeker (promovendus)
- Erasmus MC (prof. dr. van Eijck)
- Neoadjuvante behandeling bij pancreascarcinoom

Voorstellen

- Wie?
- Functie?
- Ziekenhuis
- Wetenschap?
- Doel?

Journalclub

- Wikipedia:
 - Individuelen
 - Regelmatig bijeenkomen
 - Kritisch evalueren van academische literatuur
- Eerste beschrijving
 - 1835 Sir James Paget, a British surgeon, "a kind of club ... a small room over a baker's shop near the Hospital-gate where we could sit and read the journals."

Doel

- Training in klinische besliskunde
- Kritisch
- EBM
- Richtlijnen
- Uitwisseling klinische problematiek
- Gezellig

Soorten

- Traditioneel:
 - Leraar – leerling structuur
 - Random
 - Hiërarchisch
- Probleemgericht
 - Vanuit kliniek
 - Met begeleiding
 - PICO
 - CAT
 - Feedback

CAT

Appendix III

JBI critical appraisal checklist for systematic review

1. Is the review question clearly and explicitly states?
2. Was the search strategy appropriate?
3. Were the sources of studies adequate?
4. Were the inclusion criteria appropriate for the review question?
5. Were the criteria for appraising studies appropriate?
6. Was critical appraisal conducted by two or more reviewers independently?
7. Were the methods used to minimize error in data extraction?
8. Were the methods used to combine studies appropriate?
9. Were the recommendations supported by the reported data?
10. Were the specific directives for new research appropriate?

Appendix III: JBI critical appraisal checklist for systematic review

Reviewer: _____ Date: _____
Author: _____ Year: _____
Record number: _____

Overall appraisal:	Include	Exclude	Seek further information
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Comments, reason for including or excluding:

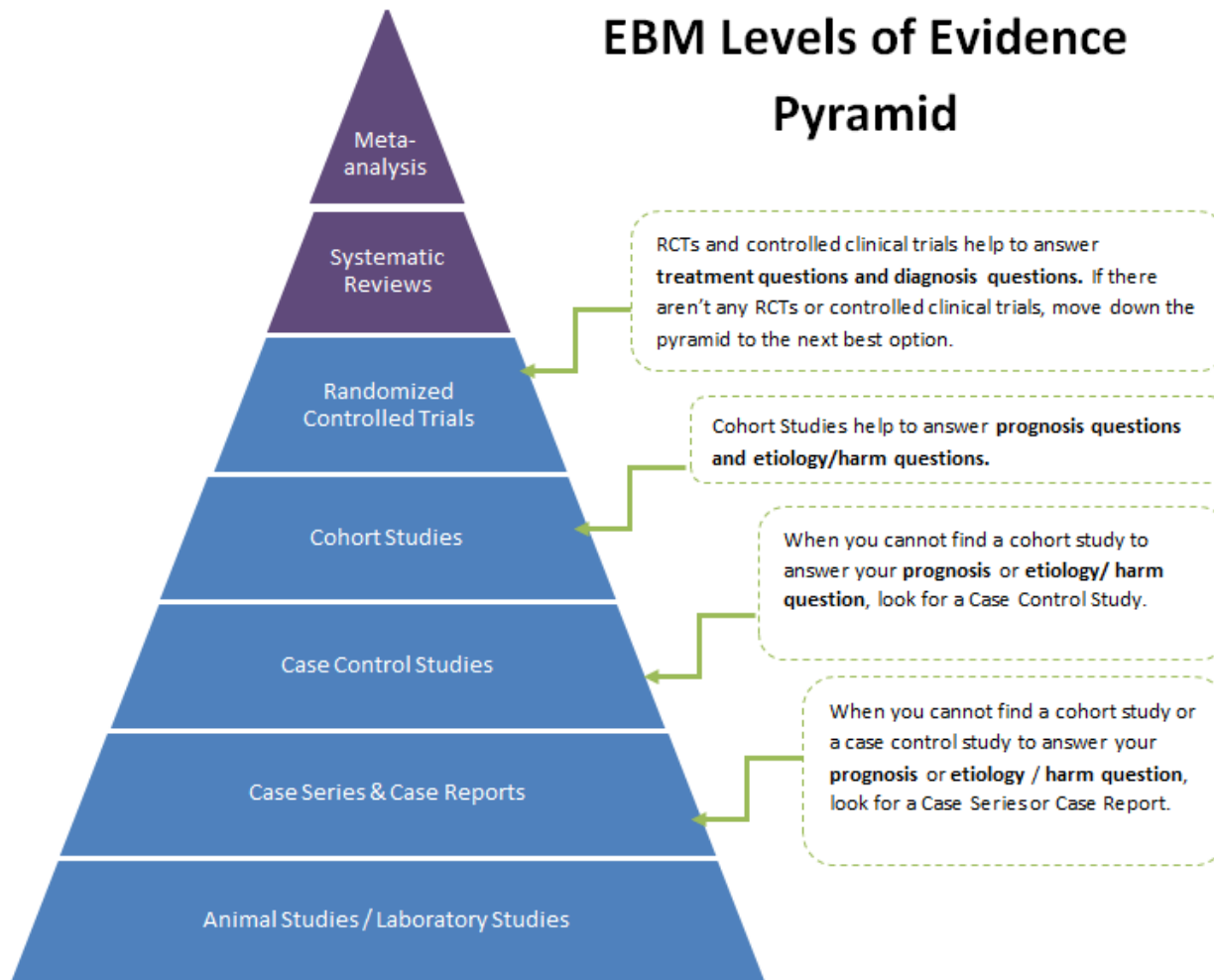


Soorten

- Methodologisch
 - Iedereen leest
 - Vragen meegeven
 - Discussie puur inhoudelijk
 - Intensief
- POG + Methodologisch
 - Combinatie

EBM

EBM Levels of Evidence Pyramid



Benodigdheden

- Enthousiaste collega's
- Leiderschap
 - 1 iemand of klein groepje
 - Organisatie
 - Collectiviteit
- Training in zoeken
 - Via MB
- Checklist

Checklist

CRITICAL ANALYSIS OF THE LITERATURE

OUTCOMES	Primary _____
	<input type="checkbox"/> Objective <input type="checkbox"/> Subjective Reproducible Y N Important Y N
	Secondary _____
	<input type="checkbox"/> Objective <input type="checkbox"/> Subjective Reproducible Y N Important Y N
	Missing Outcome? _____
	Bias? _____

RESULTS	Statistical Test Used
	<input type="checkbox"/> T-test <input type="checkbox"/> Fisher's Exact <input type="checkbox"/> Chi ² <input type="checkbox"/> ANOVA <input type="checkbox"/> Kaplan-Meier
	<input type="checkbox"/> Kappa <input type="checkbox"/> Correlation <input type="checkbox"/> Other <input type="checkbox"/> Regression <input type="checkbox"/> Wilcoxon Rank/Sum
	Test Properly Applied? Y N _____
	Power Reported? Y N _____
	Follow-up Percentage: _____ %
Findings	

If statistically significant difference, is it important? Y N	
Why? _____	

CONCLUSIONS	Conclusions: _____

Is the study valid? Y N _____	

Is the study consistent with the literature? Y N _____	

Is the discussion biased? Y N _____	

Pubmed

The screenshot shows the PubMed website interface. At the top, the PubMed logo is on the left, and the search bar contains 'heart surgery'. Below the search bar are links for 'RSS', 'Save search', and 'Advanced'. A filter menu is open, showing various options with checkboxes. The 'Subjects' option is highlighted with a red box. The main search results area shows a list of articles, with the first article titled '...py Using Stroke Volume Variation Does Not Result in Thoracic Surgery Requiring One-Lung Ventilation...' and the second article titled '...of midazolam co-induction to propofol for induction in aged...'. The 'Apply' button at the bottom of the filter menu is also highlighted with a red box.

PubMed
US National Library of Medicine
National Institutes of Health

PubMed

RSS Save search Advanced

Choose additional filters

Choose additional filters

Text availability
 Publication dates
 Species
 Article types
 Languages
 Sex
 Subjects
 Journal categories
 Ages
 Search fields

Apply

20 per page, Sorted by Recently Added Send to:

<< First < Prev Page 1 of 17021 Next > Last >>

[...py Using Stroke Volume Variation Does Not Result in Thoracic Surgery Requiring One-Lung Ventilation...](#)
ach T, Trepte C, Kutup A, Goetz AE, Reuter DA.
2:687018. Epub 2012 Jun 21.
[supplied by publisher]

[...of midazolam co-induction to propofol for induction in aged...](#)
Jang TH, Kim KH, Ryu SJ, Yu SB, Kim DS.
n;62(6):536-42. Epub 2012 Jun 19.
[process]

[Subcutaneous administration of tramadol after elective surgery is as effective as intravenous administration in relieving acute pain and inflammation in dogs.](#)
3. Buhari S, Hashim K, Yong Meng G, Mustapha NM, Gan SH.
ScientificWorldJournal. 2012;2012:564939. Epub 2012 Jun 18.

Helpt het?

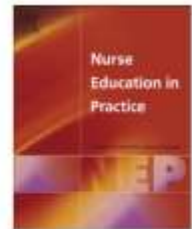
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Journal club intervention in promoting evidence-based nursing: Perceptions of nursing students



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Progressie

Table 3
Learning from studies in journal clubs ($n = 52-53$).

By participating in journal clubs, I have learnt	Not at all n (%)	To a small extent n (%)	To some extent n (%)	To a great extent n (%)
To evaluate the activities of the work unit	6 (11)	17 (32)	25 (47)	5 (9)
To identify issues to be researched or developed in my work unit	6 (11)	12 (23)	21 (40)	14 (26)
To search for knowledge from various source	11 (21)	2 (4)	13 (24)	27 (51)
To search for knowledge from various source	11 (21)	2 (4)	13 (24)	27 (51)
To evaluate the reliability of research knowledge	7 (13)	10 (19)	26 (49)	1 (19)
To read research articles	9 (17)	4 (8)	7 (13)	33 (62)
To solve existing problems in nursing	5 (9)	2 (4)	20 (38)	5 (9)
Diverse methods of research	3 (6)	15 (28)	23 (43)	12 (23)
The progress of research process	7 (13.5)	7 (13.5)	17 (33)	21 (40)
To combine theory with practice	6 (11)	10 (19)	16 (30)	21 (40)
To justify my views	8 (15)	10 (19)	19 (36)	16 (30)
What evidence-based nursing is	8 (15)	8 (15)	13 (25)	24 (45)
To question current practices in the work community	7 (13)	11 (21)	17 (32)	18 (34)
To discuss openly how to develop nursing practice	6 (11)	12 (23)	17 (32)	18 (34)

Realiteit

Table 5
Research utilization (n = 42–47).

Utilizing research knowledge in the work unit	Not at all n (%)	To a small extent n (%)	To some extent n (%)	To a great extent n (%)
Research knowledge has been utilized in nursing	2 (4)	21 (48)	21 (48)	3 (6)
The results of the research have been discussed	9 (20)	12 (26)	16 (35)	9 (10)
Based on research knowledge, nursing practices are being developed	5 (12)	22 (52)	12 (29)	3 (1)
The results have provided concrete solutions to problems in nursing practice	6 (14)	20 (45)	15 (34)	3 (7)
The results have changed the implementation of nursing	10 (22)	21 (48)	10 (23)	3 (7)
The results have helped development of activities	8 (18)	19 (43)	15 (34)	2 (5)
Based on the results, workgroups have been established to develop nursing	20 (46)	12 (27)	6 (14)	6 (14)
The results have produced a new operational model	18 (42)	14 (32)	6 (14)	5 (12)

Hoe lezen?

- Titel
- Introductie
- Resultaten

- Interessant???

 - Dan uitgebreid

Papier

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Preoperative Chemoradiotherapy for Esophageal or Junctional Cancer

P. van Hagen, M.C.C.M. Hulshof, J.J.B. van Lanschot, E.W. Steyerberg,
M.I. van Berge Henegouwen, B.P.L. Wijnhoven, D.J. Richel,
G.A.P. Nieuwenhuijzen, G.A.P. Hospers, J.J. Bonenkamp, M.A. Cuesta,
R.J.B. Blaisse, O.R.C. Busch, F.J.W. ten Kate, G.-J. Creemers, C.J.A. Punt,
J.T.M. Plukker, H.M.W. Verheul, E.J. Spillenaar Bilgen, H. van Dekken,
M.J.C. van der Slangen, T. Rozema, K. Biermann, J.C. Beukema,
A.H.M. Piet, C.M. van Rij, J.G. Reinders, H.W. Tilanus,
and A. van der Gaast, for the CROSS Group*

Abstract

- Design
 - RCT
- Hypothese
 - CRTx + Chi > Chi
- Relevant
 - Onvoldoende bewijs superioriteit CRTx + Chi

Inclusie

- PA bewezen
- Slokdarm, slokdarm-maag
- Lengte < 8 cm
- Breedte < 5 cm
- T₁N₁ of T₁₋₂N₀₋₁ M₀
- ≤ 75 j
- WHO PS ≤ 2
- Gewichtsverlies < 10 kg
- NF, LF, HF en PF ok

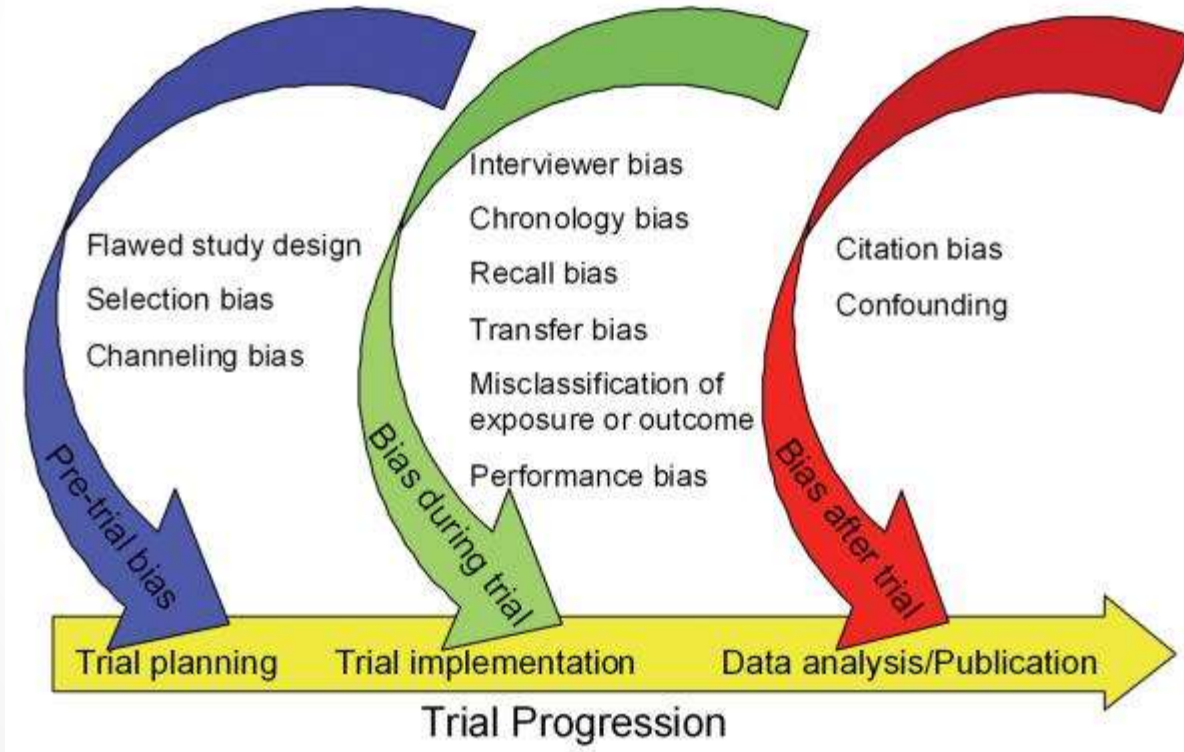
Exclusie

- Proximale maagca
- Proximale slokdarmca < 3cm

Bias

- Neiging tot vooroordeel hebben

Major Sources of Bias in Clinical Research



Generaliseren

- Perifeer + academisch
- Gerandomiseerd
- Niet blind

Interventie

- CRTx + Chi vs Chi
- Adequaar?

Uitkomstmaat

- Primair
 - Overleving (objectief)
- Secundair
 - Progressie vrije overleving (objectief)
 - Toxiciteit (semi-objectief)
 - Aantal resecties (objectief)
 - Complicaties post-op (semi-objectief)
 - Ziekenhuismortaliteit (objectief)
 - Therapie respons (objectief)
- Missende
 - QoL

Resultaten

- Statistische testen
- Juiste testen
- Power
 - Ja, 80%
- Follow-up:
 - 366/368 (99%)

Resultaten

TABEL 1 Kenmerken van 366 patiënten met een resectabel carcinoom van de slokdarm of slokdarm-maagovergang, die meededen aan een onderzoek waarin preoperatieve chemoradiotherapie (CRT) gevolgd door chirurgie werd vergeleken met primaire chirurgie.

kenmerk	CRT + chirurgie (n = 178)*	primaire chirurgie (n = 188)*
mediane leeftijd in jaren (uitersten)	60 (37-79)	60 (36-73)
♂, %	75	81
histologisch tumor type; %		
adenocarcinoom	75	75
plaveiselcelcarcinoom	23	23
anders	2	2
mediane tumorlengte in cm† (p25-p75)	4 (3-6)	4 (3-6)
locatie; %		
proximaal 1/3	2	2
midden 1/3	14	13
distaal 1/3	58	57
overgang	22	26
niet bekend	4	2
cT-stadium‡; %		
cT1	1	1
cT2	15	19
cT3	84	78
cT4	0	1
onbekend (niet te passeren)§	1	2
cN-stadium‡; %		
N0	33	31
N1	65	64
onbekend (niet te passeren)§	2	5
WHO-performance		
0	81	87
1	19	13

p25-p75 = interkwartiele uitersten

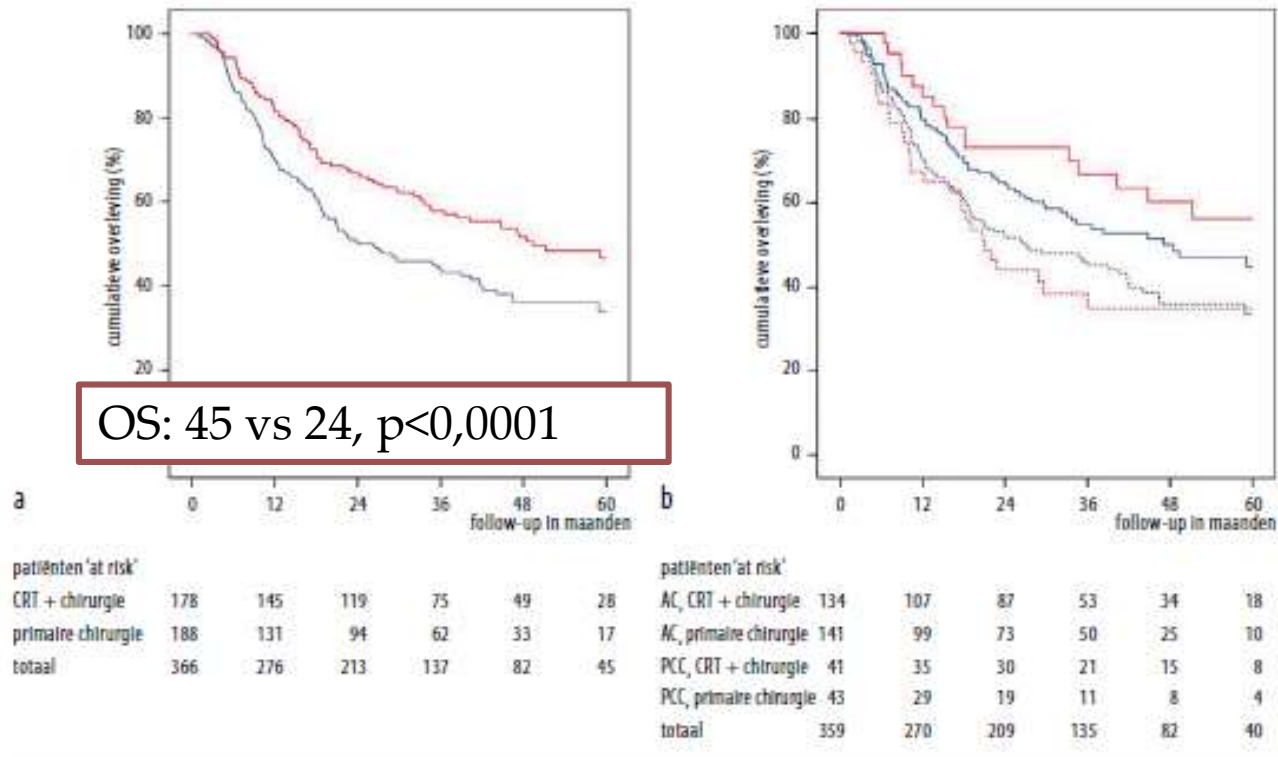
* Opgetelde percentages kunnen afwijken van 100% vanwege afronding.

† Zoals bepaald tijdens oesofago-gastroduodenoscopie.

‡ cT-stadium: klinisch T-stadium zoals bepaald door endo-ultrasonografie en/of CT-scan volgens UICC TNM Cancer Staging, 6de editie. cN-stadium: klinisch N-stadium zoals bepaald door endo-ultrasonografie en/of CT-scan en/of FDG-PET volgens UICC TNM Cancer Staging, 6de editie.

§ Niet te passeren: tumor was niet te passeren met de endo-ultrasonografietransducer.

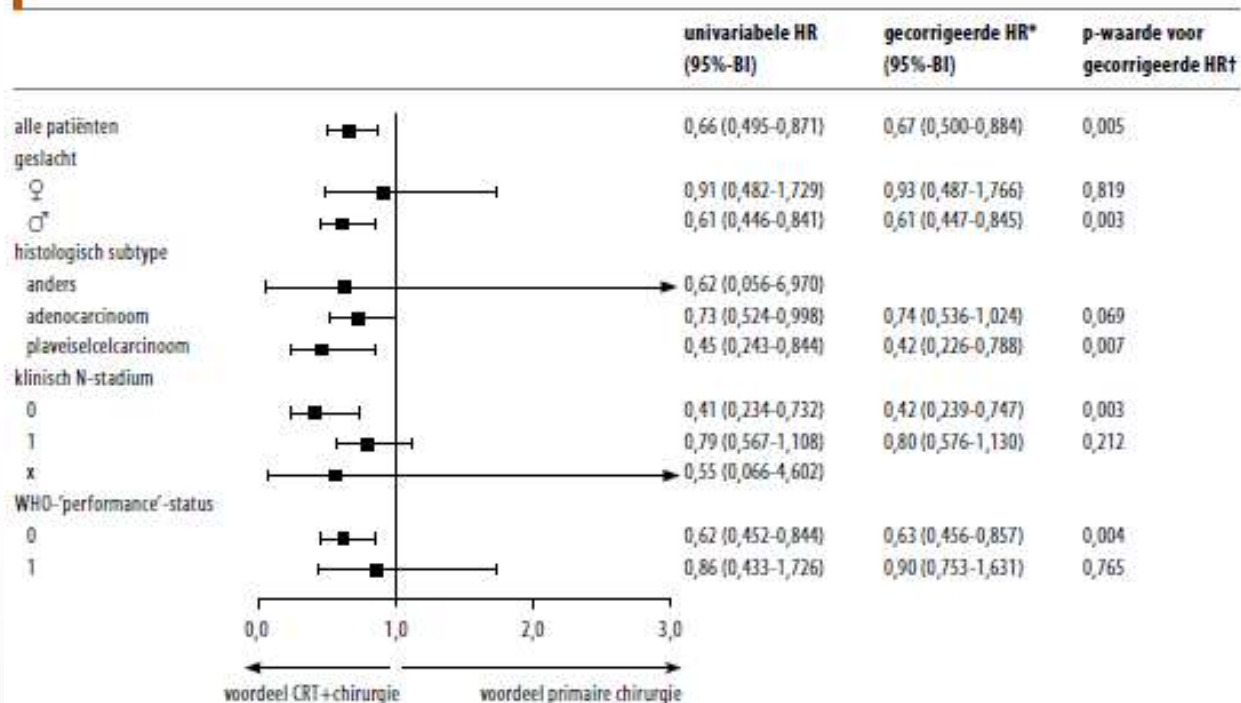
Resultaten



FIGUUR 2 (a) Geschatte 5 jaarsoverleving, gebaseerd op het 'intention-to-treat'-principe, voor patiënten met een carcinoom van de slokdarm- of slokdarm-maagovergang die werden behandeld met preoperatieve chemoradiotherapie (CRT) gevolgd door chirurgie (n = 178) (-) of met chirurgie alleen (n = 188) (-); (b) geschatte 5-jaarsoverleving, gebaseerd op het 'intention-to-treat'-principe, voor patiënten met een carcinoom van de slokdarm- of slokdarm-maagovergang, uitgesplitst naar histologisch tumortype (adenocarcinoom (AC) of plaveiselcelcarcinoom (PCC)), die werden behandeld met CRT gevolgd door chirurgie (AC, n = 134, (-); PCC, n = 41, (-)) of met chirurgie alleen (AC, n = 134, (-); PCC, n = 41, (-))

Resultaten

TABEL 3 Forestplot van hazardratio's (HR) voor overleving (n) met 95%-BI (—) voor 366 patiënten met een carcinoom van de slokdarm of slokdarm-maagovergang uitgesplitst naar uitgangskkenmerken.



* gecorrigeerd voor uitgangskkenmerken

† significante p-waarden zijn weergegeven in rood

Conclusies

- CRTx + Chi > Chi in slokdarca
- Valide
 - Ja
- Andere studies
 - Lijkt er wel op

Van papier naar praktijk

- Journal club
 - Handig voor specifieke klinische vragen
 - Helpt bij het beter begrijpen EBM
 - Kritisch redeneren
 - Interactie van collega's
 - Uitdaging
- Implementatie
 - Kindje maken van iemand
 - Vast gezette tijden
 - Afspraken
 - Vastgezette tijden
 - Liefst één supergeleerde

Support Casper



Vragen

