

The Cochrane Collaboration, Medline and Acupuncture in Medicine

Adrian White

The randomised controlled trial (RCT) was first described in 1948 and is now established as the "gold standard" for deciding whether one treatment is better than another, or better than no treatment at all, as the basis of "evidence-based health-care". The RCT is not without flaws but is the best method currently available.

Purchasers and consumers of health-care require trials to be reviewed by experts and their conclusions made readily available. The Cochrane Collaboration is a voluntary, world-wide organisation of health-care providers, consumers and scientists who have the common aim of producing systematic reviews of RCTs and disseminating them. In order to achieve the highest standard of accuracy, reviewers need access to all the RCTs which have been performed world-wide.

There are many RCTs which are not cited in Medline, either because they are published in journals which are not indexed, or because they are "grey" literature: unpublished trials sitting around on shelves, presented only orally, or published in conference proceedings etc. The Cochrane Collaboration is making a major effort to identify all published RCTs and make them accessible to reviewers by establishing a register. This is the responsibility of the Baltimore Cochrane Centre which has close links with the National Library of Medicine, where Medline is produced. The Baltimore Cochrane Centre is recruiting editors, members of Cochrane Review Groups, and other volunteers to hand-search journals for RCTs in a systematic manner, so that the references and abstracts can be entered into the Register of RCTs and onto Medline. This recruitment started for acupuncture in April 1995 as part of the formation of a Cochrane "Field" of complementary medicine.

An article will be included in the register if:

1. the individuals followed in the trial were assigned prospectively to one of two (or more) forms of health-care using either random allocation, or some quasi-random method of allocation (such as alternation, date of birth, or case record number), or
2. one or more outcomes were assessed using double blinding, or
3. it is a crossover trial in which patients have been assigned to the first intervention using random or quasi-random allocation.

The policy is that borderline trials will be given the

benefit of the doubt: definitive RCTs will be tagged as such, and possible RCTs, about which it is difficult to be certain (e.g. the text is unclear or in a foreign language), will be tagged as "controlled clinical trials". It will be the responsibility of the individual review groups to decide whether to include each trial or not.

The individual or team performing the hand-search will also be responsible for continuing to monitor future issues of the journal for further articles which meet the criteria. Authors and journal editors are therefore encouraged to use the specific term "randomised controlled trial" in the title or abstract in order to help this process.

The author of this article has become registered with the Baltimore Cochrane Centre to hand-search "Acupuncture in Medicine", which will be done progressively over the next two months. It is hoped that more controlled trials will be submitted to this Journal in future, in the knowledge that they will be listed on Medline and accessible to a world-wide readership.

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THE BRITISH MEDICAL ACUPUNCTURE SOCIETY was formed in 1980 as an association of medical practitioners interested in acupuncture. There are now over 1300 members who use acupuncture in hospital or general practice. Additionally there are sections for dentists and veterinary surgeons.

The society is a registered charity with the aim of promoting the medical use of acupuncture. To this end, practical teaching courses on medical acupuncture are arranged for doctors to disseminate an understanding and appreciation of acupuncture within the medical profession and to encourage its use.

The society's administrative officer is available to deal with any enquiries including those regarding membership, courses of tuition, text books, scientific meetings and this Journal.

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