

2012 Scientific Symposium Including 4th
EQUATOR Annual Lecture

ACT now: Accuracy, Completeness, and Transparency in health research reporting

11 – 12 October 2012

Historical Merchants' Hall Freiburg, Germany



organised by

the EQUATOR Network and the German Cochrane Centre

in cooperation with kongress & kommunikation, Freiburg

The 48th parallel north is a circle of latitude that is 48 degrees north of the Earth's equatorial plane. It crosses Europe, Asia, the Pacific Ocean, North America, and the Atlantic Ocean. The circle is passing through Freiburg im Breisgau, less than 1 km north of the city centre.

The **PROGRAMME**

edited by //

Allison Hirst, Shona Kirtley, Britta Lang, Caroline Mavergames, Iveta Simera, Brigitte Weber and Rebecca Weida

designed by //

Büro MAGENTA Freiburg

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11. Oct. 2012 **Day 1**

09:45 – 10:00 **Meeting Opening // Focus of the day:**

Current practice, problems, and their consequences

10:00 – 11:15 **Session 1 // Current State of Play**

11:15 – 11:45 **Break**

11:45 – 13:00 **Session 2 // Current State of Play**

13:00 – 14:00 **Lunch**

14:00 – 15:30 **Session 3 // Contributed Research Presentations**

15:30 – 16:00 **Break**

16:00 – 17:30 **Session 4 // Initiatives to improve transparency of health research**

17:30 – 19:00 **Poster Presentations //**

19:00 – 21:00 **Drinks and Finger food**

12. Oct. 2012 **Day 2**

09:00 – 10:20 **Meeting Opening // Focus of the day:**

Changing current practice – how to ACT

Session 1 // Teaching, learning and practicing good reporting

10:20 – 10:50 **Break**

10:50 – 12:00 **Session 2 // Power and responsibilities of organisations**

Panel Discussion

12:00 – 13:00 **Session 3 // 4th EQUATOR Annual Lecture by John Ioannidis**

13:00 **End of Meeting**

12. Oct. 2012 **Post-Conference Meetings**

14:00 **RECORD Working Group // Closed Meeting**

Room: Kaminsaal

14:00 **EQUATOR Strategy Group Meeting // Closed Meeting**

Room: Rokoko Salon

The symposium is powered by //

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University Medical Center Freiburg

Department of Medical Biometry and Statistics // Germany



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Scientific programme committee //

- Dr Sally Hopewell //** Senior Research Fellow, Centre for Statistics in Medicine, Oxford, UK
- Professor Doug Altman //** Director, Centre for Statistics in Medicine, Oxford, UK (Chair)
- Professor Gerd Antes //** Director, German Cochrane Centre, University Medical Centre Freiburg, Germany
- Dr Erik von Elm //** Institut Universitaire de Médecine Sociale et Préventive, University of Lausanne, Switzerland
- Mrs Allison Hirst //** EQUATOR Research Fellow, Centre for Statistics in Medicine, Oxford, UK
- Dr John Hoey //** Professor (adjunct) Queen's University, Kingston, Canada
- Professor Ana Marusic //** Department of Research in Biomedicine and Health, University of Split, Croatia
- Dr Joerg Meerpohl //** Deputy Director, German Cochrane Centre, University Medical Center Freiburg, Germany
- Dr David Moher //** Senior Scientist, Ottawa Hospital Research Institute, Ottawa, Canada
- Dr Kenneth Schulz //** Vice President, Quantitative Sciences, Family Health International, Chapel Hill, USA
- Dr Iveta Simera //** Head of EQUATOR Programme Development, Centre for Statistics in Medicine, Oxford, UK

Organising Committee //

- Professor Gerd Antes and Dr Britta Lang MSc //** German Cochrane Centre, Department of Medical Biometry and Statistics, University Medical Center Freiburg, Germany
- Professor Doug Altman //** Director, Centre for Statistics in Medicine, Oxford, UK
- Dr Iveta Simera //** Head of EQUATOR Programme Development, Centre for Statistics in Medicine, Oxford, UK
- Mrs Allison Hirst //** EQUATOR Research Fellow, Centre for Statistics in Medicine, Oxford, UK
- Mrs Shona Kirtley //** EQUATOR Research Information Specialist, Centre for Statistics in Medicine, Oxford, UK
- Mrs Brigitte Weber //** German Cochrane Centre, Department of Medical Biometry and Statistics, University Medical Center Freiburg, Germany

Dear Colleagues

It gives us great pleasure to welcome you to the EQUATOR symposium on »ACT now: Accuracy, Completeness, and Transparency in health research reporting«.

The meeting is jointly organized by the EQUATOR Network and the German Cochrane Centre. Both organisations have great interest in improving the reliability and usability of published health research studies. This symposium is another major step towards finding effective ways to ensure high standards in research conduct and its publication.

Our symposium will provide the opportunity to highlight critical issues in health research reporting, discuss potential solutions for improving the research literature, and identify specific roles of different stakeholders in the improvement process. We are especially delighted by the number and quality of research abstracts submitted to the symposium and very much look forward to the presentation of these findings.

The fourth EQUATOR Annual Lecture, which will end our symposium, will be presented by Professor John Ioannidis. Professor Ioannidis is a highly distinguished scientist and speaker well known around the world for his original thoughts and efforts devoted to the improvement of biomedical sciences. We are very pleased to welcome Professor Ioannidis in Freiburg.

Enjoy the next two days, and we look forward to welcoming you to other events in the future.

Doug Altman
Chair, EQUATOR Network

Gerd Antes
Director, German Cochrane Centre

On behalf of the Symposium Organising Committee and the EQUATOR Steering Group //

- Professor Gerd Antes (Co-Chair) //** German Cochrane Centre, University Medical Centre Freiburg, Germany
- Dr Britta Lang, MSc (Co-Chair) //** German Cochrane Centre, University Medical Centre Freiburg, Germany
- Professor Doug Altman //** Director, Centre for Statistics in Medicine, Oxford, UK
- Dr Iveta Simera //** Head of EQUATOR Programme Development, Centre for Statistics in Medicine, Oxford, UK
- Mrs Allison Hirst //** EQUATOR Research Fellow, Centre for Statistics in Medicine, Oxford, UK
- Mrs Shona Kirtley //** EQUATOR Research Information Specialist, Centre for Statistics in Medicine, Oxford, UK
- Mrs Brigitte Weber //** German Cochrane Centre, University Medical Centre Freiburg, Germany

EQUATOR Network Steering Group //

- Professor Doug Altman //** Director, Centre for Statistics in Medicine, Oxford, UK (Chair)
- Dr John Hoey //** Associate Professor (adjunct), University of Toronto, Toronto, Canada
- Professor Ana Marusic //** Department Chair, University of Split, Croatia
- Dr David Moher //** Senior Scientist, Ottawa Health Research Institute, Ottawa, Canada
- Dr Kenneth F. Schulz //** Distinguished Scientist and Vice President, Quantitative Sciences, FHI 360, Chapel Hill, USA

PROGRAMME

Please note: All oral sessions will take place in the Kaisersaal. Poster session and breaks will take place in the adjacent rooms: The Foyer, the Rokoko Salon and the Kaminzimmer.

DAY 1: Thursday 11th October 2012 //

09.45 Meeting opening: Welcome. Focus of the day.

An overview of current practice, problems, and their consequences

Gerd Antes // Director, German Cochrane Centre, Freiburg, Germany

Session 1 — Current State of Play —

Session Chair: Prof Amanda Burls // Director of Postgraduate Programmes in Evidence-Based HealthCare (EBHC), University of Oxford

10.00 Improving the quality and value of research publications – how can we speed up progress?

Doug Altman // Director, Centre for Statistics in Medicine, Oxford, UK

How do journals publish research (and how much has changed in the last 300 years)?

Liz Wager // Consultant, Sideview, UK

What research institutions, journals and funders are and should be doing to promote trustworthy research

Steven Goodman // Professor of Medicine & Health Research and Policy, Stanford University School of Medicine, USA

11.15 Break

Session 2 — Current State of Play —

Session Chair: Dr Trish Groves // Deputy editor, BMJ and Editor-in-chief, BMJ Open

11.45 Research reporting and its integration into international policies on research for health

Ludovic Reveiz // Senior Advisor, Research Promotion & Development, Pan American Health Organization

Garbage in – garbage out? Impact of poor reporting on the development of systematic reviews

Erik von Elm // Cochrane Switzerland, Institute of Social and Preventive Medicine (IUMSP), Lausanne University Hospital, Switzerland

The need for reports of new research to begin with up-to-date analyses of what is already known

Iain Chalmers // Coordinator, James Lind Initiative, UK

13.00 Lunch

Session 3 — Contributed research presentations —

Session Chair: Prof Ana Marusic // Chair, Department of Research in Biomedicine and Health, University of Split School of Medicine, Split, Croatia

14.00 Do drug dossiers of pharmaceutical companies provide additional information on study methods compared to journal publications? (RQRS-001)

Sebastian Werner // Institute for Quality and Efficiency in Health Care, Cologne, Germany

Does journal endorsement of reporting guidelines influence the completeness of reporting of health research? A Systematic Review (IRG-005)

Larissa Shamseer // The Ottawa Hospital Research Institute, Ottawa, Canada

Impact of active CONSORT guidelines implementation by journal editors on the reporting of abstracts of randomized trials: an interrupted time-series analysis (IRG-003)

Sally Hopewell // Centre for Statistics in Medicine, University of Oxford, UK; INSERM, Paris, France

Implementations scheme of the CONSORT guidelines for RCT manuscripts submitted to the American journal of orthodontics and dentofacial orthopedics (AJO-DO) (IRG-002)

Nikolaos Pandis // University of Bern, Bern, Switzerland

Potential Barriers for Journals Attempting to Implement a Reporting Guidelines Policy (IRG-004)

Jason Roberts // Headache Editorial Office, Plymouth, USA

15.30 Break

Session 4 — Initiatives to improve transparency of health research —

Session Chair: Prof Gerd Antes // Director, German Cochrane Centre, University Medical Centre Freiburg, Germany

16.00 The EQUATOR Network

Iveta Simera // Head of Development, EQUATOR Network, Oxford, UK

Importance of protocols in research transparency

An-Wen Chan // Women's College Research Institute, University of Toronto, Canada

The COMET (Core Outcome Measures in Effectiveness Trials) Initiative

Paula Williamson // Professor of Medical Statistics, Director of the Clinical Trials Research Centre (CTRC), University of Liverpool, UK

Overcome failure to Publish nEgative fiNdings: the OPEN project

Joerg Meerpohl // OPEN Consortium, German Cochrane Centre, University Medical Centre, Freiburg, Germany

17.00 Discussion

17.30 Poster presentations

19.00 Drinks and Finger food until 21.00

DAY 2: Friday 12th October 2012

9.00 Meeting opening: Welcome. Focus of the day.
Changing current practice – how to ACT

Britta Lang // German Cochrane Centre, Freiburg, Germany

Session 1 — Teaching, learning and practicing good reporting —

Session Chair: Dr Kenneth Schulz // Distinguished Scientist and Vice President, Quantitative Sciences, FHI 360, Chapel Hill, USA

9.05 Getting reporting guidelines used in practice

David Moher // Senior Scientist, Ottawa Hospital Research Institute, Ottawa, Canada

Barriers in published reports that inhibit use in clinical practice

Paul Glasziou // Director, Bond University Centre for Research in Evidence-Based Practice, Australia

Training for better research reporting

Ana Marusic // Chair, Department of Research in Biomedicine and Health, University of Split School of Medicine, Croatia

10.20 Break

Session 2 — Power and responsibilities of organisations —

Session Chair: Dr John Hoey, Professor (adjunct) Queen's University, Kingston, Canada

10.50 Supporting research – a funder's perspective.

Mark Pitman // Methodology Theme Leader, Medical Research Council, UK

Regulatory agencies in the EU: What is our role?

Marcus Muellner // Head, Austrian Medicines and Medical Devices Agency, Vienna, Austria

The responsibility of Editors and Publishers in Reporting of Research

Ginny Barbour // Medicine Editorial Director, PLOS; Chair COPE

How can universities promote accurate, complete and transparent reporting of health research?

Amanda Burls // Senior Fellow and Director of Postgraduate Programmes in Evidence-Based HealthCare (EBHC), University of Oxford, UK

Panel discussion

12.00 **Session 3 — 4th EQUATOR Annual Lecture —**

Session Chair: Prof Doug Altman // Director, Centre for Statistics in Medicine, Oxford, UK

Reporting and reproducible research: salvaging the self-correction principle of science

John Ioannidis // Professor of Medicine, Health Research and Policy, and Statistics, Stanford University, USA

End of meeting

13.00 Lunch for the Post-Conference Meetings participants

Post-Conference Meetings

14:00 **RECORD Working Group** // Closed Meeting

Room: Kaminsaal

14:00 **EQUATOR Strategy Group Meeting** // Closed Meeting

Room: Rokoko Salon



Invited Speakers

Prof Doug Altman

Director, Centre for Statistics in Medicine, Oxford, UK



■ Doug Altman is director of the Centre for Statistics in Medicine in Oxford. He has published over 500 peer reviewed articles, many aimed at clarifying statistical ideas for medical researchers. His varied research interests include the use and abuse of statistics in medical research, studies of prognosis, regression modeling, systematic reviews, randomised trials, and studies of medical measurement.

Doug is senior statistics editor at the BMJ and co-editor-in-chief of Trials. He is actively involved in leading the developing of guidelines for reporting research, including CONSORT, STROBE, and PRISMA, and in 2006 founded the EQUATOR Network which seeks to improve the quality of scientific publications by promoting transparent and accurate reporting of health research.

■ **Title:** Improving the quality and value of research publications – how can we speed up progress?

■ **Abstract:** Abundant evidence from reviews of published research articles has demonstrated that a substantial proportion lack key information. It should be well known that readers should not be expected to take on trust that the authors have done a study without flaws. A fundamental principle is that readers need to know exactly what was done, and be given an accurate, complete and transparent account of what was found. Further, in principle there should be enough detail to allow replication.

Ensuring that journal articles are of maximum value to readers is clearly not a priority of many of those who write research articles, nor those who review them. How can it be that none of the authors, peer reviews, or editors has detected that so many articles are substandard and, indeed, often unfit for purpose? Widespread deficiencies in research publications weaken the evidence-base for clinical practice. I will present taxonomy of such shortcomings. In recent years many reporting guidelines have been developed, outlining the key elements of research that should be reported, with as yet modest success. I will consider why there is such slow progress in improving the reporting of research and consider the actions by different stakeholders that could help to raise standards more rapidly.

Dr Virginia Barbour

Medicine Editorial Director, PLOS; Chair COPE



■ Ginny Barbour was one of the founding co-editors of PLOS Medicine, and was appointed the journal's first Chief Editor in 2008. She is now also Medicine Editorial Director at PLOS. She studied Natural Sciences at Cambridge University, and then medicine at UCL and Middlesex Hospital School of Medicine, London. She gained a DPhil from Oxford University for research into globin gene regulation. She is Chair of the

Committee on Publication Ethics, and is a member of the Ethics Committee and a Director of the World Association of Medical Editors. Her interests include open-access, the rigorous reporting of research and taking an evidence-based approach to the priorities of global health.

■ **Title:** The responsibility of Editors and Publishers in Reporting of Research

■ **Abstract:** Scholarly journals are at the sharp edge of reporting. Editors, as the gatekeepers to the published literature, are in a uniquely powerful position to encourage and enforce the use of reporting guidelines. However, although there are notable exceptions, many journals, despite the best of intentions, at best play lip service to the concept of transparent reporting.

In its widest sense the full and complete reporting of papers is an ethical imperative; poor reporting of research has the potential to lead directly to incorrect decisions being made on patient care. I'll discuss the roles of editors, journals and publishers in reporting of research and discuss ways in which EQUATOR and guideline developers might work with journals and publishers to improve the use of guidelines within the published literature.



Prof Amanda Burls

Director of Postgraduate Programmes in Evidence-Based HealthCare (EBHC), University of Oxford



■ Amanda Burls is a public health physician. She is Director of Postgraduate Programmes in Evidence-Based HealthCare (EBHC) at the University of Oxford, and a Senior Fellow of the Centre for Evidence-Based Medicine (www.CEBM.net). She directs the Oxford International Programme in Evidence-Based Health Care which includes a Masters and DPhil programme in EBHC (<http://cpd.conted.ox.ac.uk/ebhc/msc.asp>). In her other role, as a Senior Clinical Research Fellow, in the Department of Public Health and Primary Health Care at the University of Oxford, she has set up and directs a novel internet-based research programme, the International Network for Knowledge about Well-being (ThinkWell), that aims to help the public (a) understand health information so they can make their own health decisions and (b) set up and participate in research studies (www.ThinkWell.eu). She is also the coordinator of the international Network to Support Understanding of Health Research (www.NSUHR.net).

In her previous post she was a Senior Clinical Lecturer in Public Health and Epidemiology in the Department of Public Health and Epidemiology at the University of Birmingham and an Honorary Consultant in Public Health Medicine in the West Midlands Region. While at the University of Birmingham she founded the West Midlands Health Technology Assessment Collaboration (WMHTAC) and was its Director for ten years. WMHTAC is an NHS-funded unit that undertakes systematic reviews, research synthesis and economic evaluations of health technologies for the West Midlands regional and the UK national level NHS (e.g. for the NCCHTA programme and the National Institute for Health and Clinical Excellence (NICE)).

■ **Title:** How can universities promote accurate, complete and transparent reporting of health research?

■ **Abstract:** The role and responsibilities of universities and academics in ensuring that health research is fully and accurately reported in a timely manner will be considered in this talk along with the mechanisms and processes by which these can be achieved at an organisational and individual level. The talk will also look at the context in which universities find themselves competing and how this contributes to, or hinders, the reporting of research. Positive initiatives that have been taken by some organisations will be outlined as examples of good practice and possible ways forward.

Sir Iain Chalmers

Coordinator, James Lind Initiative



■ Iain Chalmers practised as a clinician for seven years in the UK and the Gaza Strip, before becoming a full time health services researcher. Between 1978 and 1992 he was founding director of the National Perinatal Epidemiology Unit (www.npeu.ox.ac.uk). Between 1992 and 2002, he was founding director of the UK Cochrane Centre, which convened the meeting at which the Cochrane Collaboration (www.cochrane.org) was inaugurated. Since 2003, he has coordinated the James Lind Initiative to promote public and professional acknowledgement of the need to address uncertainties about the effects of treatments. He is coordinating editor of The James Lind Library (www.jameslindlibrary.org) and Testing Treatments Interactive (www.testingtreatments.org). He was knighted in 2000 for services to health care.

■ **Title:** The need for reports of new research to begin with up-to-date analyses of what is already known.

■ **Abstract:** Ask any member of the public whether he or she feels that researchers should find out, systematically, what can be known from existing research before embarking on further investigations and they would seem likely to ask whether your question was serious. Why wouldn't researchers take the trouble to build on what is known already before using resources to do additional primary research? Yet the widespread failure of researchers to take account of what can already be known from existing evidence has meant that patients and animals have suffered and died unnecessarily, the design of new research has been inadequately informed, and resources have been wasted in health services and health research. This unethical, unscientific and inefficient state of affairs will continue as long as research funders, researchers, research ethics committees and journals allow it to continue. The EQUATOR Network has an important role to play in promoting awareness of the problem, and the steps needed to address it.

Dr An-Wen Chan**Phelan scientist, Women's College Research Institute, University of Toronto**

■ Dr An-Wen Chan is a Phelan scientist at Women's College Research Institute, University of Toronto; and a dermatologic Mohs surgeon at Women's College Hospital. After obtaining his research doctorate as a Rhodes Scholar at University of Oxford, Dr. Chan served as Special Advisor to the Canadian Institutes of Health Research, and coordinator for the World Health Organization's International Clinical Trials Registry Platform. Dr. Chan's research interests include issues of transparency and biases in randomized trials.

■ **Title:** Importance of protocols in research transparency

■ **Abstract:** Clinical trial protocols play a central role in study planning, conduct, and reporting by trial investigators. They also facilitate transparency, oversight, and critical appraisal by external stakeholders who rely on a detailed description of what was planned and done during the trial. In order to successfully fulfill these critical roles, two conditions must be met: the protocol should fully address key issues, and should be publicly available. The rationale and recent advances that promote these goals will be discussed, including the international SPIRIT Initiative (Standard Protocol Items: Recommendations for Interventional Trials).

Prof Paul Glasziou**Director, Bond University Centre for Research in Evidence-Based Practice, Australia**

■ Dr Paul Glasziou, formerly the director of Oxford University's Centre for Evidence-Based Medicine, is the author of seven books related to evidence based practice, and has lead over 100 EBM workshops in dozens of countries. Now at Bond University, Australia, his research focuses on improving the clinical impact of publications by reducing the more than \$85 Billion annual loss from unpublished and unusable research. An international leader in evidence-based clinical practice, Professor Glasziou will be discussing the barriers in published reports that inhibit use in clinical practice.

■ **Title:** Barriers in published reports that inhibit use in clinical practice

■ **Abstract:** While publication is an essential tool of communication between researchers and clinicians, poor reporting can act as a significant barrier to use.

Reports of research should clearly describe: (i) what questions were addressed and why, (ii) what was done (the research questions and methods), (iii) what was found (the direction, size, and uncertainty in effects), and (iv) what it means (in the context of previous research). However, poor reporting occurs in all these areas, making interpretation, replication and use in practice difficult or impossible.

For example, poorly described treatments and interventions often appear to be poorly described and consequentially underused. We recently analysed the interventions of all randomized trials on non-drug interventions published in 6 major general medical journals (JAMA, BMJ, Lancet, NEJM, Annals of Internal Medicine, and PLoS Medicine) in 2009. We identified 134 trials evaluating 138 non-drug interventions. Overall 53 of 138 interventions (38%) had sufficiently well described all necessary details of the intervention. Common missing elements were materials (missing in 51% of interventions), procedures within a session (46% missing), and the schedule of sessions (17% missing). For several articles necessary appendices were missing from the journal website; for others the detailed intervention was only published subsequent to the trial report, and hence was not referenced.

The majority of interventions are inadequately described in standard publications and therefore they cannot be implemented in practice. Readers, authors, editors, and funders need to better address the issue of reporting, including intervention descriptions, if research studies are not to be wasted.

Prof Steven Goodman**Professor of Medicine & Health Research and Policy, Associate Dean for Clinical and Translational Research, Stanford University School of Medicine**

■ Steven Goodman, MD, MHS, PhD, is a Professor of Medicine, Health Research and Policy, and Associate Dean for Clinical and Translational Research at the Stanford University School of Medicine, where he has been since July, 2011. He spent the preceding two decades on the faculties of the Johns Hopkins Schools of Medicine and Public Health, where he worked as an epidemiologist and biostatistician involved in clinical research, mainly in cancer. He taught extensively on various aspects of quantitative research methodology, including systematic reviews, diagnostic testing, and Bayesian and causal inference. His primary interests are in statistical and scientific inference, the ethics of clinical research, and the way in which evidence from biomedical research is generated, interpreted and applied.

He has been Editor-in-chief of *Clinical Trials: Journal of the Society for Clinical Trials* since 2004 and is senior statistical editor for *Annals of Internal Medicine*, where he has served since 1987. He is scientific advisor to the Medical Advisory Panel of the Blue Cross – Blue Shield Technology Assessment Program. He was appointed in 2011 to the Methodology Committee of US Patient Centered Outcomes Research Institute. He has served on numerous Institute of Medicine committees, including Veterans and Agent Orange, Treatment of PTSD, and Immunization Safety. Most recently, he co-chaired the IOM's Committee on Ethical and Scientific Aspects in Studying the Safety of Approved Drugs. He received an AB from Harvard University, an MD from New York University, trained in pediatrics at Washington University and received an MHS in Biostatistics and PhD in Epidemiology from Johns Hopkins Bloomberg School of Public Health.

■ **Title:** What research institutions, journals and funders are and should be doing to promote trustworthy research.

■ **Abstract:** There has been a lot of attention paid to the role of journals, funders, and researchers themselves to produce trustworthy medical research, but comparatively little attention has been paid to the role of the institutions in which the research is conducted. This talk will examine the »trust ecosystem« in which medical research is conducted, examine the roles of the various components of that ecosystem, and discuss what functions research institutions are or should be taking on to promote research the public can trust.

Prof John Ioannidis

Professor of Medicine, Health Research and Policy, and Statistics,
Stanford University



■ John P.A. Ioannidis currently holds the C.F. Rehnborg Chair in Disease Prevention at Stanford University and is Professor of Medicine, Professor of Health Research and Policy, and Director of the Stanford Prevention Research Center at Stanford University School of Medicine, Professor of Statistics (by courtesy) at Stanford University School of Humanities and Sciences, member of the Stanford Cancer Center and of the Stanford Cardiovascular Institute, and affiliated faculty of the Woods Institute for the Environment. From 1999 until 2010 he chaired the Department of Hygiene and Epidemiology at the University of Ioannina School of Medicine in Greece, as a tenured professor since 2003.

He is one of the most-cited scientists of his generation, with Hirsch $h=97$, Hirsch $m=5.6$, Schreiber $hm=60$ as of 2012 per GoogleScholar. He has received several awards, including the European Award for Excellence in Clinical Science for 2007, and has been inducted in the Association of American Physicians in 2009 and in the European Academy of Cancer Sciences in 2010. The PLoS Medicine paper on »Why most Published Research Findings are False,« has been the most-accessed and downloaded article in the history of Public Library of Science. The Atlantic selected Ioannidis as the Brave Thinker scientist for 2010 claiming that he »may be one of the most influential scientists alive«.

■ **Title:** Reporting and reproducible research: salvaging the self-correction principle of science.

■ **Abstract:** The ability of self-correction is considered one of the main features of science. In a cumulative meta-analysis framework, if sufficient time elapses, effects should tend to gravitate towards the »truth«. However, self-correction is often not happening. Self-correction is often impeded by destruction of evidence, production of wrong evidence, and/or distortion of evidence. Proper and accurate reporting of scientific data, results, and interpretations has a key role in ensuring that these impediments can be addressed in a satisfactory fashion. There is evidence from empirical studies that suggest that in several scientific fields reporting deficiencies can have considerable impact on the credibility of the available scientific corpus. It is also increasingly recognized that reporting of methods and summary results, even if optimal, may often not be sufficient to guarantee reproducibility for scientific results. Full availability of raw data, protocols, and analysis codes may need to be the goal for reproducible research. I will discuss some evidence and preliminary data on reproducibility checks in different fields, and offer some suggestions about steps to move forward as well as caveats about potential harms in trying to maximize reproducibility practices.



Prof Ana Marušić

Chair, Department of Research in Biomedicine and Health, University of Split School of Medicine, Split, Croatia; Editor in Chief, Journal of Global Health



■ Dr Marušić is Professor of Anatomy and Chair of the Department of Research in Biomedicine and Health at the University of Split School of Medicine, Split, Croatia. Her research interest in biomedicine is focused on the interactions between the immune and bone systems. Prof Marušić is also an active member of the Croatian branch of the Cochrane Collaboration, Chair of the Board of the Croatian Institute of Global Health, and creator of the first Croatian public registry of clinical trials.

Apart from teaching anatomy, Prof. Marušić teaches university students the principles of research methodology and scientific communication in a mandatory undergraduate course. Prof Marušić has been the editor in chief of the Croatian Medical Journal for more than 15 years, and is now editor in chief of the Journal of Global Health. She has been the President of the World Association of Medical Editors (WAME), President of the Council of Science Editors (CSE), and Vice-President of the European Association of Science Editors (EASE). She is on the Steering Group of the EQUATOR Network

■ **Title:** Training for better research reporting

■ **Abstract:** Our experience over the last 20 years of editorial and teaching work has taught us that the greatest barrier to high-quality research in developing countries and its dissemination to the mainstream scientific community is not only the lack of skills writing, language or presentations skills, but primarily the lack of adequate training in critical assessment, research methodology and statistics. We advocate teaching research early in medical education and as an integral part of teaching medical practice. In Croatia, we introduced a new curriculum in 2010, with a longitudinal course on research methodology to gradually build the students' knowledge and skills in research and critical assessment. The new course, was designed with respect to the principles of adult learning: 1) education is provided by researchers who had a deep understanding of research, 2) the educational programme occurs over an extended period, throughout the curriculum, 3) each educational step is formatted as active participation of students in problem-oriented learning, 4) each new step builds on students' prior knowledge and integrates new material with familiar ideas, 5) students are encouraged to share their experiences and 6) educational steps attend to individual developmental differences and learning preferences.

Dr Joerg Meerpohl

OPEN Consortium, German Cochrane Centre, Institute of Medical Biometry and Medical Informatics, University Medical Center, Freiburg, Germany



■ Joerg Meerpohl is a board-qualified paediatrician and paediatric haematologist & oncologist at the University Medical Center Freiburg. He has been working as a researcher at the German Cochrane Centre since 2007 and was appointed deputy director in 2011.

Since 2008 he is an active member of the GRADE working group, and has run several GRADE workshops at national and international organisations / meetings and worked as GRADE methodology advisor with WHO and the Robert Koch Institute in Germany.

Amongst other research interests, he has been leading a project funded by the German Cancer in Children Foundation on publication practice in the field of pediatric haematology and oncology and is now coordinating the OPEN project (www.open-project.eu), an European Commission Framework Programme 7 multinational project on non-publication of research findings.

■ **Title:** Overcome failure to Publish nEgative fiNDings: the OPEN project

■ **Abstract:** The OPEN project (www.open-project.eu) is a 24-month project co-funded by the European Commission under the Seventh Framework Program. It aims at bringing together key opinion leaders and researchers across Europe to address the problem of publication bias and related biases due to selective non-publication of research findings.

In one work package, systematic reviews on the current state of knowledge will be conducted, in particular, evaluating the extent and the impact of selective non-publication of studies. Other work packages will evaluate current practices by various key groups involved in knowledge generation and translation in order to provide detailed insight and identify ways of changing current practice of knowledge translation. These will include funding agencies, the (pharmaceutical) industry, research ethics committees, research institutions, researchers, trial registers, biomedical journals, regulatory agencies and benefit assessment agencies.

The findings from the different work packages will be discussed at a recommendations workshop in spring 2013 and provide the basis to formulate evidence-based recommendations. In the final 6 months of OPEN we plan to disseminate our results to a broad audience of stakeholders and constituencies involved in the process of knowledge generation and translation and to support implementation of recommendations.

Dr David Moher**Senior Scientist at the Ottawa Hospital Research Institute (OHRI)**

■ Dr David Moher is a Senior Scientist at the Ottawa Hospital Research Institute (OHRI) and Associate Professor in the Department of Epidemiology and Community Medicine, University of Ottawa where he holds a University Research Chair. Dr Moher principal investigator of the Knowledge Synthesis Canada, OHRI's Evidence on TAP program, DSEN's Network Meta-analyses collaborating center, all funded by the Canadian Institutes of Health Research. Dr Moher has helped developed several reporting guidelines including CONSORT and PRISMA. Dr Moher has a Masters degree in epidemiology and a PhD in clinical epidemiology and biostatistics.

■ **Title:** Getting reporting guidelines used in practice

■ **Abstract:** The CONSORT Statement first published in 1996 is likely one of the first widely used reporting guidelines. The number of reporting guidelines has grown to more than 200 with many of them being developed in the last five years; there is considerable interest in this . Despite this recent proliferation few reporting guidelines are used in practice and even less of them have been evaluated as to whether they meet their intended objective of improving the completeness of reporting. Several barriers and facilitators have been documented regarding the endorsement and implementation (i.e., use) of reporting guidelines some of which will be discussed. This session will also discuss how the various stakeholders involved (authors, editors, publishers, and peer reviewers) can work collaboratively in getting reporting guidelines more widely used in practice. Implementing reporting guidelines can improve the completeness of reporting. Better reporting will likely reduce wasteful research and make it more accessible to all readers.

**Dr Marcus Muellner****Head, Federal Office for Safety in Health Care, Austrian Medicines and Medical Devices Agency, Vienna, Austria**

■ Dr Muellner is currently Head of the Austrian Medicines and Medical Devices Agency. He has served as statistical editor of the Cochrane Anaesthesia Review Group and on a number of ethics committees in Vienna. He was previously a Consultant in internal medicine at the Emergency Department, Allgemeines Krankenhaus Wien, Vienna, Austria and has also been an Associate Editor at the British Medical Journal.

In addition to his clinical training he obtained a Master of Science degree in epidemiology from University College London / London School of Hygiene and Tropical Medicine in 2002. Dr Muellner will consider the role of regulatory agencies in the EU.

■ **Title:** Regulatory agencies in the EU: What is our role?

■ **Abstract:** I intend to give a brief overview of the regulatory network in the EU in relation to authorizing medicinal products. Regulatory authorities have responsibilities in relation to the quality of research over the whole life cycle of a medicinal product – from preclinical to post-marketing. It seems, however that regulatory responsibilities do not always match the needs of the academic communities and maybe even of the public. How can we define the gap and how can we close it?

Dr Mark Pitman**Methodology Theme Leader, Medical Research Council, UK**

■ Mark is the Theme Leader for methodology research for the Medical Research Council (MRC) and oversees the joint funded MRC/National Institute for Health Research (NIHR) Methodology Research Programme in the UK. He also has an interest in research using electronic health records. A chemist by background, Mark's early career was in the development of radio-imaging agents and in drug synthesis. Since joining

MRC, he has developed a broad range of expertise in supporting medical research, undertaking key roles in strategy and policy development, and international relations.

■ **Title:** Supporting research – a funder’s perspective.

■ **Abstract:** Mark will present views on the role and responsibilities of a funding organisation in supporting methodology in research, including improving quality and consistency in research practice. He will outline some of the challenges and will discuss the values of partnerships.

Dr Ludovic Reveiz

MD, MSc, PhD(c)



■ Dr Ludovic Reveiz is an Advisor in Health Research Management at the Pan American Health Organization/World Health Organization (PAHO/WHO), Washington, D.C. He provides technical cooperation to strengthen research for health through the dissemination and translation of knowledge, the promotion of research governance, and the monitoring of standards for research practices. He has expertise in research methods and standards, and project management. He has also contributed to more than 80 publications in scientific journals and books.

■ **Title:** Research reporting and its integration into international policies on research for health

■ **Abstract:** Good research governance and functional national health research systems provide the structure and means that enable the integration of research for health into policy and health care delivery. During the past few years the landscape on international research governance and stewardship has been transformed with the emergence of mandates such as policies agreed by WHO Member States that are being implemented and the development of new tools and resources being put in place.

Dr Ludovic Reveiz will update participants on recent developments, and present options and examples to improve health research systems with the integration of better standards for transparency and research reporting. These insights will provide a backdrop to an open dialogue on how to move forward with a systems approach towards strategically integrating initiatives that strengthen an ethical and systematic use of research for health.

Dr Iveta Simera

Head of Development, EQUATOR Network



■ Iveta joined the Centre for Statistics in Medicine in Oxford in March 2006 as EQUATOR Project Manager and significantly contributed to the programme’s official launch in June 2008. The EQUATOR Network is an international programme of research support that seeks to improve the accuracy, clarity, and completeness of published health research. The Network provides online resources supported by education and training events (www.equator-network.org). In her current role as Head of Programme Development, Iveta is responsible for the overall management of the EQUATOR Network and for further development of a comprehensive education programme.

Iveta has a PhD degree in Plant Genetics from Charles University in Prague and a Graduate Certificate in Business Administration from Swinburne University of Technology in Melbourne. She has broad research and management experience, including the development of systematic reviews and clinical guidelines at the Cochrane Collaboration, Royal College of Nursing Institute, and at the Department of Epidemiology and Public Health, University College London. She is interested in responsible research conduct and reporting, development and effective implementation of reporting guidelines, and designing and delivering training courses.

■ **Title:** The EQUATOR Network

■ **Abstract:** The EQUATOR (Enhancing the Quality and Transparency of Health Research) Network is an international initiative that seeks to improve the reliability and value of published health research literature by promoting transparent and accurate reporting and wider use of robust reporting guidelines.

The Network developed a free online Library for Health Research Reporting (<http://www.equator-network.org/>) which provides a comprehensive collection of resources for preparing and publishing high quality research manuscripts. The resources include reporting guidelines, guidance on scientific writing, guidelines for responsible research conduct and publications, and other useful information such as resources facilitating design of research studies. The Spanish version of the EQUATOR Library was launched in 2010 in collaboration with the Pan American Health Organization (<http://www.espanol.equator-network.org/>). During its short existence the EQUATOR Network has built an international recognition and reputation as the leading authority and resource portal in the area of health research reporting. Reference to

EQUATOR is included in many prominent sources of guidance including the Uniform Requirements for Biomedical Manuscripts, developed by the International Committee of Medical Journal Editors and followed by most biomedical journals.

Dr Erik von Elm

Cochrane Switzerland, Institute of Social and Preventive Medicine (IUMSP), Lausanne University Hospital, Switzerland



■ Erik von Elm is a senior epidemiologist with research interests in the methodology of interventional and observational studies in clinical epidemiology and public health, evidence-based medicine, the synthesis and dissemination of research evidence (incl. related biases) and issues of scientific reporting. He holds an MD degree (University of Tübingen, Germany), a Master degree in Epidemiology (London School of Hygiene and Tropical Medicine, University of London, UK) and is a board-certified specialist in Public Health (Swiss Medical Board, FMH). He is with the Institute of Social and Preventive Medicine (IUMSP) at the Lausanne University Hospital, Lausanne, Switzerland, where he coordinates the postgraduate training programme of the Clinical Epidemiology Centre (CepiC) and the Clinical Trial Unit. He is co-director of Cochrane Switzerland, the Swiss branch of the Cochrane Collaboration based in Lausanne. He also serves as academic editor of PLoS ONE, an open-access journal of the Public Library of Science, as co-convenor of the STROBE Initiative and as ad-hoc reviewer for several peer-reviewed biomedical journals and research funding agencies.

■ **Title:** Garbage in – garbage out? Impact of poor reporting on the development of systematic reviews

■ **Abstract:** Systematic reviews have an important role in gathering and synthesizing the research evidence available from primary studies that otherwise would be dispersed in the literature and unavailable to those who need to make decisions about health care. The value of clinical studies for reviewing and meta-analysis crucially depends on the accuracy and completeness of the publications. Deficiencies in the reporting hamper a proper assessment of the methodological quality of included studies. Often, study reports are incomplete or ambiguous and no additional information can be obtained from the investigators. Consequently, data may need to be excluded from meta-analyses that otherwise might have changed a review's conclusions.

The talk will outline the impact of poor reporting using results from empirical research and illustrate it with examples from Cochrane reviews. Further, I will discuss the role of tools derived from reporting guidelines that are frequently used in systematic reviews to assess the methodological and reporting quality of included studies. The second part of the talk will cover the reporting quality of the systematic reviews themselves and highlight results from empirical studies. The role of the PRISMA Statement in improving the reporting of systematic reviews will be discussed.

Dr Liz Wager

Sideview, UK



■ Elizabeth (Liz) Wager is a freelance consultant and trainer who has worked with doctors, editors, and publication professionals on six continents. She is Visiting Professor at the University of Split School of Medicine, Croatia. She chaired the Committee on Publication Ethics (2009-2012) and is a member of the Ethics Committee of both the BMJ and the World Association of Medical Editors. She is a co-author of Cochrane reviews on the effects of peer review and technical editing, Good Publication Practice for Pharmaceutical Companies (2003), Wiley-Blackwell Guidelines on Publication Ethics (2006), and CONSORT for Abstracts. She has written books on 'Getting Research Published: An A to Z of Publication Strategy' (2nd edition 2010) and 'How to Survive Peer Review' (2002). In 2010 she was awarded a PhD for a thesis entitled 'Peer review and editorial processes for improving the quality of research reporting'.

■ **Title:** How do journals publish research (and how much has changed in the last 300 years)?

■ **Abstract:** Despite huge changes in communication technology, the peer review process and the basic architecture and format of articles have changed very little since they were first developed in the 17th century. There has also been remarkably little research about the most effective methods of presenting data or the needs of different audiences. Even when there are evidence-based guidelines, known to improve reporting standards, they are not universally applied. What are the barriers to more effective, and more efficient, research reporting? Will journals survive unchanged for another 300 years or should we invent new methods for transmitting research findings?

Prof Paula Williamson

Professor of Medical Statistics and Director of the Clinical Trials Research Centre (CTRC), University of Liverpool, UK



■ Paula Williamson is Professor of Medical Statistics and Director of the Clinical Trials Research Centre (CTRC) at the University of Liverpool. She is an Associate Director of the NIHR Medicines for Children Research Network, and Director of the MCRN Clinical Trials Unit. In 2008 she led a successful bid to create the MRC North West Hub for Trials Methodology Research (NWHTMR), focussing on three themes (early phase trial design and analysis, later phase trial design and analysis, patients' perspectives), and developing methods for application across key clinical areas including paediatrics, drug safety, cancer and epilepsy. Paula chairs the management group for the MRC-funded COMET (Core Outcome Measures in Effectiveness Trials) Initiative.

■ **Title:** The COMET (Core Outcome Measures in Effectiveness Trials) Initiative

■ **Abstract:** There is growing recognition that insufficient attention is paid to the outcomes measured and reported in clinical trials. Selection of outcomes is crucial to trials designed to compare the effects of different interventions. For the findings to influence policy and practice, the chosen outcomes need to be relevant to patients and the public, healthcare professionals and others making decisions about health care.

Trials in a specific condition often report different outcomes, or address the same outcome in different ways. Inconsistency in reported outcomes causes well known problems for those who attempt to synthesise evidence, and many meta-analyses have to exclude key studies because relevant outcomes are not reported. Furthermore, the measured outcomes may not always be important to patients or health service users.

Much could be gained if an agreed core outcome set (COS) of a minimum number of appropriate and important outcomes was measured and reported in all clinical trials in a specific condition. Key stakeholders, including patients, should be involved in establishing COS, to ensure consideration of appropriate outcomes. The scope of a COS should be defined to identify the relevant health condition, population and types of interventions.

The COMET Initiative (www.comet-initiative.org) aims to foster and facilitate methodological research in the area of standardising outcomes, to develop much needed standards for methods of COS development and to develop and maintain a publically available internet-based resource to collate the knowledge base for COS development.

The **5th EQUATOR Annual Lecture** will be presented during the Seventh International Congress on Peer Review and Biomedical Publication. The Peer Review Congress organised by JAMA and the BMJ Group, will be held in Chicago, USA from 8th to 11th September 2013. Details are available on the congress website: www.peerreviewcongress.org

If you want to find out more about the 5th Annual Lecture, other future **EQUATOR events** and learn about all our activities check our website www.equator-network.org and subscribe to our newsletter.

The EQUATOR team // Oxford, UK

visit

www.equator-network.org //

The City of Freiburg at 48 degrees north of the Earth's equatorial plane



The Historical Merchant Hall
in the Center of Freiburg

The Historical Merchant Hall

■ Since medieval times, Freiburg's historical merchant hall has been, along with the cathedral »Münster Unserer Lieben Frau« and the University, one of the most important places for intellectual, economic and social life in Freiburg. All economic, trade and administrative business was concentrated here. It was the place where Freiburg's burghers bought and traded goods and where the city welcomed its guests.

Since the beginning of its renovation, it was the objective that the »old parlour« of the city would be there again to be used in its full extent by all citizens. Freiburg's mayor at that time, Dr Rolf Boehme, was convinced that its restoration, which was completed in 1988, has brought back to life the original charm of the building.

History and functions

■ In 1120 Konrad II (of Zähringen) founded a market on his private property and finished the development of a settlement at the gate to the valley of the river Dreisam. The crucial factor was the trading route to Swabia leading through the Black Forest. Having been a route for trading salt, the rolling streets can still be seen in the old city today. Later, travelling merchants had to pay a customs duty at the gates of the city which were followed by higher customs to protect the local traders. With the trade traffic flourishing, a new building had to be built for storage and

the handling of customs. Besides the town hall as operational centre for politics, the historical merchant hall became the operational centre for the town's finances, administering goods and financial transfers and the residence of the city's tax authorities. It was a transfer site where commodities were unloaded, weighed, declared, repacked or displayed for sale.

Building history

■ The historical merchant hall was first mentioned in 1378, ten years after the city had bought its freedom from the comital sovereignty and had put itself under control of the House of Habsburg. The financial situation was very tense, so the facilitation of the old merchant hall took place in municipal buildings. Only in the early 16th century was it possible to extend the merchant hall with a generous new building. With the purchase of the adjacent buildings on the eastside and the equipping of the municipal salt house next to the main building on the cathedral square »Münsterplatz«, the biggest complex of buildings still existing today was created. It became a visible expression of the increase in prosperity which Freiburg experienced due to the sponsorship from the House of Habsburg. It was for this reason that the Habsburg's emblems were chosen for the decoration of the façade.

During the occupations of 1713 and 1744, the merchant hall was damaged and had to be restored several times. Between 1880 and 1884, an appeal for donations was made to completely renovate – inside and outside – the bedraggled building. This was when it obtained its elaborate historicising decoration. After only 40 years, further renovation was necessary due to new structural damage and it was restored to its state of 1884. The last refurbishment was completed in 1988 merging the entire merchant hall complex and opening it up for civic use.



Enjoy the Rococo Saloon in
the Historical Merchant Hall



The Hall with the Fireplace
(Kaminsaal) is castellated and
equipped with hatchments
on the walls.

The text of this section is abridged and based upon an original text by Peter Kalchthaler, MA (Städtische Museen Freiburg).
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From the emperor's hall to the rococo saloon

■ The Rococo Saloon (Rokoko Salon) is decorated with wall coverings of hand printed cotton and Venetian chandeliers and mirrors manufactured in Murano. The Emperor Hall (Kaisersaal) in the new merchant hall has a wooden beamed ceiling decorated with stucco and gilded wood tenons. It served mainly as a venue for masked balls, dances and student festivities until it started also serving as a conference room, the room in which is the reconstructions of 1838, 1865 and 1880 originated. Until the World War II, the citizen's committee met in the Kaisersaal, and from 1947 until 1952, the merchant hall was also the legislative building of the province of Südbaden. Until today, it is the home of the market bureau where the market leader supervises the daily market taking place around the cathedral.



photo: wolfgang wick / buero-magenta.de

General Information

Catering // Coffee, Drinks, Finger food and a light lunch on Thursday will be provided at the conference, included in the registration fee.

Certificate of Attendance // The certificates will be handed out when registering for the conference.

Conference Venue //

Historical Merchants' Hall, Münsterplatz 24, 79098 Freiburg

Food //

Coffee, Drinks and Dining beyond the conference: please see page 36 – 37

Media Collection Point // At the registration desk at the ground floor.

Mobile Phones // As a courtesy to speakers and other delegates, please ensure that your mobile phone and / or pager is in silent mode or switched off before entering sessions.

Poster Session // Thursday, October 11th, 17:30 – 19:00 at the Foyer in front of the Emperors Hall. Authors are kindly requested to be at their poster for that time period.

Smoking // Delegates should be aware that smoking is banned in public buildings and many hotels and restaurants throughout Germany, including the Historical Merchants' Hall.

Transport in the City // Freiburg is small enough to walk to and from most restaurants, sightseeing destinations and hotels. Additionally, taxis, trams (Strassenbahn) and buses run continuously throughout the city and region on weekdays till 00.30 and on the weekend there are special night busses. For further information: www.vag.de

W-LAN // Further Information will be provided at the registration desk.

Coffee, Drinks and Dining in Freiburg *random selection*

German food

Zum roten Baeren // Oldest Inn in Germany, established 1120, Baden gourmet cuisine; best wines of the region: Oberlinden 12

Oberkirchs Weinstuben // Baden specialities: Muensterplatz 22; Sunday closed

Deutsches Haus // Traditional house with Baden dishes, Old town restaurant for over 50 years: Schusterstrasse 40

Greiffenegg Schloessle // Panorama over Freiburg, walk up the hill next to the Gate »Schwabentor«: Schlossbergring 3

Japanese – Sushi

BASHO-AN // Merian Straße 10

Thai food

Chang // Gruenwaelderstrasse 21

Italian food

Osteria Oporto // Italian and Portuguese wine bar, tapas, port wines; next to the Market Hall: Gruenwaelderstrasse 2

Wolfshoehle // Classical Italian cuisine: Konviktstrasse 8

Enoteca: big variety of wines with typical Italian snacks, Gerberau 21

Indian food

Jaipur // Gerberau 5

Spanish food

Casa Espanola // Adelhauser Strasse 9; Sunday closed

Wine

Alte Wache // Haus des badischen Weines: Taste and enjoy regional wines at the Muenster square: Muensterplatz 38

Hotel Oberkirchs Weinstuben // Restaurant rich in tradition, stylish adjoining rooms: Muensterplatz 22

Hotel Weinstube Sichelschmiede // Idyllic location, romantic atmosphere, home-cooked Baden cuisine: Insel 1

Drexlers // decent German food with a choice of 400 wines: Rosastrasse 9; Sunday closed

Breweries & Beer gardens

Feierling // Brewery with beer garden serving organic beer – »Best in town!«: Gerberau 46

Kastaniengarten am Greiffenegg Schlösse // most beautiful view over the roofs of Freiburg: Schlossbergring 3

Pubs & Bars

Hemingway Bar // Cocktail bar and smoker lounge: Bahnhofstrasse 54

Theatercafé // Bertoldstrasse 46

Colombi Piano Bar // Hotel Colombi: Rotteckring 16

Café & Cakes

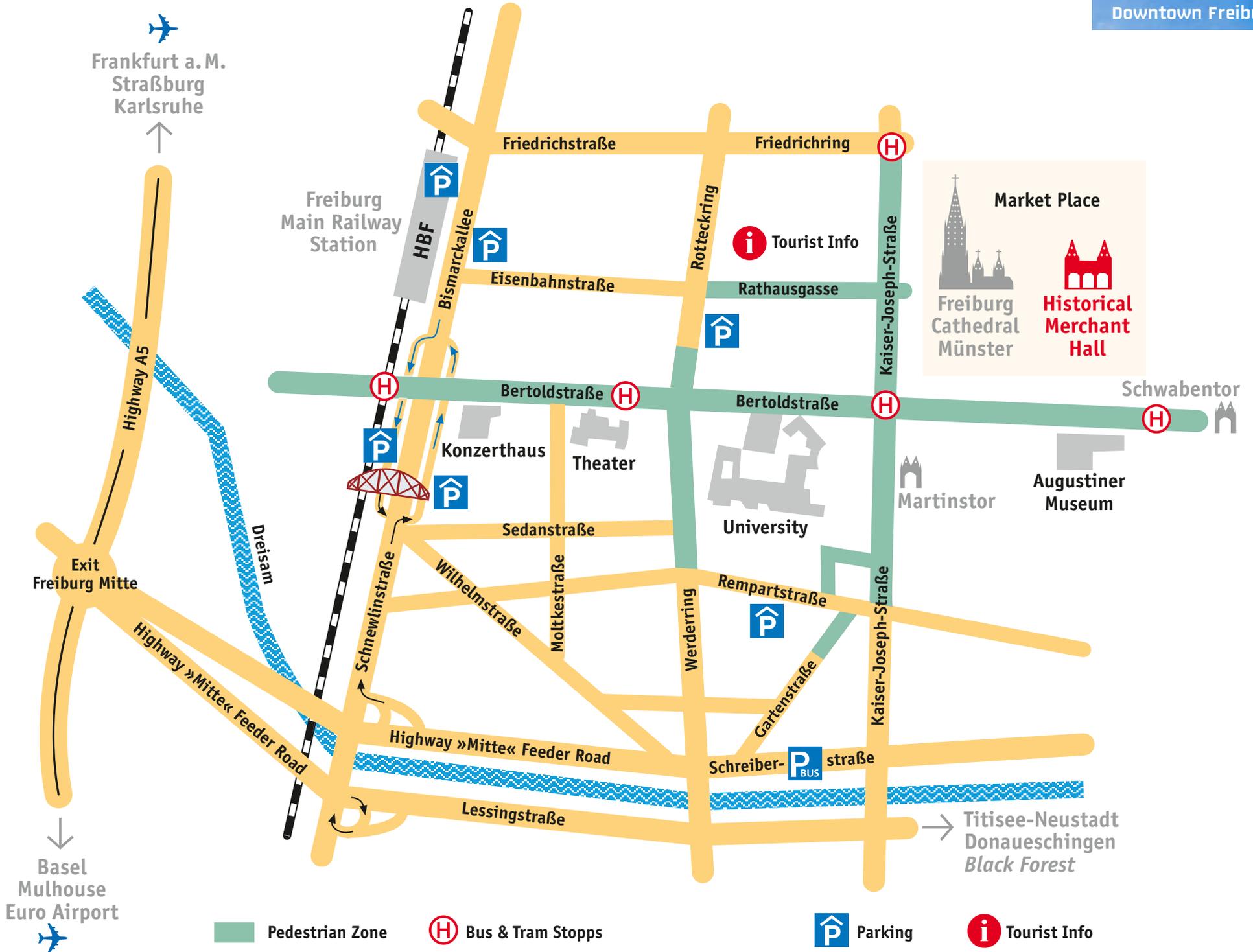
Café Schmidt // Best cakes in town: Bertoldstrasse 19a

Kolben Café // Immense range of coffees, original French patisserie, Kaiser-Joseph-Strasse 233

Portofino // Icecream-parlour – best ice cream in town: Bertoldstrasse 44

Club & Dancing

Kagan // On the 18th floor: Bismarckallee 9; Wednesday to Saturday; Lounge 8 p.m. until 5 a.m.



- Pedestrian Zone
- H Bus & Tram Stops
- P Parking
- i Tourist Info

Don't get lost in Freiburg //

Conference Venue //

Historisches Kaufhaus Freiburg
Historical Merchants' Hall
Münsterplatz 24
79098 Freiburg, Germany

Conference Contacts //

Phone 0049 (0) 761 – 216 808 14
equatormeeting@cochrane.de

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