What’s New on CUE Website

Quick guide to the Resources Section! Be sure to check out the new “Resources” tab on the Cochrane US website for a list of direct links to important resources on evidence-based healthcare!

CUE’s short-shorts: Standard 3 of the Institute of Medicine’s 2011 report, Clinical Practice Guidelines We Can Trust, outlines the expectations for consumer involvement in guidelines. We want to make sure that all stakeholders, consumers and those traditionally involved in creating guidelines, have the educational tools they need to make consumer involvement a win-win. CUE created six video “short-shorts” (Serving on an Advisory Panel, each 2-4 minutes long) about serving on advisory panels, mainly geared to those getting involved for the first time. Feedback is welcome! What do you want to know more about? What can we do differently? Please send your comments to CUE@jhu.edu.

Clearinghouse Opportunities

Federal Drug Administration— Patient Engagement Advisory Committee Member
Any interested CUE members should contact Reva Datar at rdatar1@jhu.edu for nomination. For more information, see here. Deadline: None specified

World Health Organization— Seeking short-term contractor to examine benefits/challenges/resources involved with stakeholders in guideline development. Any interested CUE members should contact Reva Datar at rdatar1@jhu.edu or submit a Consumer Application through the CUE website. Deadline: December 15, 2015
Top Stories from CUE Facebook Group

Experts debate: Do we need tougher regulation of dietary supplements?
11.16.15 (STAT)
“Do you think we need tougher regulation of dietary supplements? Who should be responsible? Here are some leading scientists' thoughts, but what about consumers? Let us know what you think”

Posted by: Reva Datar, CUE Coordinator

How pharma keeps a trove of drug trials out of public view
11.12.15 (The Washington Post)
A third of the clinical trial results that federal regulators reviewed to approve drugs made by large pharmaceutical companies in 2012 were never publicly reported, according to a new study that grades companies on their transparency

Posted by: Kay Dickersin, Cochrane US

Doctors and patients making decisions together could reduce the number of antibiotics prescribed for acute respiratory infections
11.12.15 (Cochrane)
“It is always useful to point out the true state of the evidence: ‘Many Cochrane Review authors will know the frustration of having to report there is insufficient evidence to produce firm conclusions despite an enormous effort of identifying and, sometimes repeatedly, reviewing a medley of small trials. However, as shown here, such reviews still serve a crucial role by highlighting the evidence deficiency for key questions that merit the investment of substantive research’.”

Posted By: Lorraine Johnson, LymeDisease.org

Hearing voices: FDA seeks advice from patients
11.11.15 (Science)
No doubt can remain as to the growing importance of the patient’s voice in biomedical research and regulatory science after U.S. President Barack Obama clearly stated that people would not be treated as subjects in the Precision Medicine Initiative but would be partners in the process. He said, “… I’m proud we have so many patients’ rights advocates with us here today. They’re not going to be on the sidelines. It’s not going to be an afterthought. They’ll help us design this initiative from the ground up, making sure that we harness new technologies and opportunities in a responsible way

Posted By: Caroline Struthers, Cochrane Collaboration

How to tell good studies from bad? Bet on them
“I think more studies should take into account prior plausibility”

Posted by: Michael Weinberg, Association for the Protection of Cancer Patients

Transgender care moves into the mainstream
11.05.15 (JAMA)
According to the 2011 National Center for Transgender Equality/National Gay and Lesbian Task Force report 'Injustice at Every Turn: A Report of the National Transgender Discrimination Survey,’ of the 6456 transgender and gender-nonconforming people polled, 19% of respondents had been refused medical care, 28% had experienced verbal harassment in a medical setting, and 2% had been physically assaulted in a physician’s office.

Posted by: Reva Datar, CUE Coordinator
Resources and Education

Conversations.Learning.Evidence.Opportunities (CLEO): Don’t forget to browse all of CUE’s online resources to find useful websites, interesting TEDTalks, and helpful webinars! Do you have content that you would like to add to CLEO? Contact Reva Datar at rdatar1@jhu.edu or post in the CUE Facebook Group to share your resources!

November’s Featured Course: Understanding Evidence-based Healthcare: A Foundation for Action:

This free online course has been created by the United States Cochrane Center as part of a project undertaken by Consumers United for Evidence-based Healthcare (CUE), and is designed to help consumer advocates understand the fundamentals of evidence-based healthcare concepts and skills. Registration is open and free of charge. Participants are encouraged to finish the course in three months. We recommend that participants complete only 1-2 modules at a time. Participants must commit to filling out evaluation forms upon completion of each module.

CUE-Consumers United for Evidence-based Healthcare
(http://us.cochrane.org/CUE)

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