

## Recommended Statistical Wording

Cochrane is moving away from focusing on whether a result is statistically significant or not [1]. This is to prevent instances where a lack of statistical significance is interpreted as no effect, or when too much importance is placed on a statistically significant but small difference in treatment effects.

There are three key things to look at when writing the results:

- **quality** of the evidence
- **size** of the effect (magnitude or importance)
- **precision** of the effect (confidence intervals)

Supporting this text with approved GRADE wording [2] provides context for the results.

Where possible, additional information regarding clinical meaningfulness of the findings should be included to support the evidence.

We recommend the following general format for quoting meta-analysis results in reviews:

(**summary measure**<sup>1</sup> **value**<sup>2</sup>, 95% CI **xx to yy**<sup>3</sup>; **N**<sup>4</sup> trials, **n**<sup>5</sup> participants, **GRADE**<sup>6</sup>-certainty evidence)

<sup>1</sup> <b>summary measure</b>	odds ratio (OR), risk ratio (RR), mean difference (MD) etc.
<sup>2</sup> <b>value</b>	the estimate of effect
<sup>3</sup> <b>xx to yy</b>	the confidence interval around the effect estimate
<sup>4</sup> <b>N</b>	number of trials
<sup>5</sup> <b>n</b>	total number of participants
<sup>6</sup> <b>GRADE</b>	GRADE rating [2]

**Example:** (RR 1.24, 95% CI 0.86 to 1.79; 4 trials, 6,458,591 participants, *low-certainty evidence*)

Where the certainty of evidence has been downgraded, we recommend the reasons are reported.

### Examples of wording which authors may find useful to describe results

...giving supplements reduces the incidence of X (RR 0.78, 95% CI 0.63 to 0.97; 1819 participants, 3 trials, *moderate-certainty evidence*).

...this intervention may have a small effect on X (RR 1.07, 95% CI 1.00 to 1.15; 3 trials, 849 participants, *low-certainty evidence*).

...no clear effect due to imprecision and differences in care between the two groups (RR 1.14, 95% CI 0.65 to 2.00; 1 trial, 556,836 participants, *very low-certainty evidence*).

There was no clear evidence to support a difference between the two interventions for 30-day (or in-hospital) mortality (OR 0.88, 95% CI 0.66 to 1.16; x trials, x participants, *moderate-certainty evidence*).

There was a small difference in favour of X (standardised mean difference (SMD) -0.30, 95% confidence interval (CI) -0.56 to -0.04; 525 participants, 21 studies; *low-certainty evidence*).

...there was a large improvement... (mean difference (MD) -26.47, 95% confidence interval (CI) -42.16 to -10.77; 3 trials, 722 participants) (*moderate-certainty evidence*).

**References:**

1. Ryan R, Synnot A, Hill S (2016) Describing results. Cochrane Consumers and Communication Group, available at: <http://cccg.cochrane.org/author-resources>. *Version 2.0 December 2016*.
2. Glenton C et al. Presenting the Results of Cochrane Systematic Reviews to a Consumer Audience: A Qualitative Study. *Med Decis Making* 2010;**30**:566-577