Structured Abstract of a Systematic Review

Structured abstract for submission to a medical journal | Final specimen

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An abstract checked against the review team's own record and against the twelve items of the PRISMA 2020 abstract checklist.

FINAL TEXT

SPECIMEN, PREPARED BY EDITFAST FOR ILLUSTRATION. NOT A REAL RECORD.

Prepared for the Ashcombe Review Group (fictitious), abstract for a systematic review

EXTRACT FROM THE REVIEW TEAM'S RECORD (reproduced unchanged in both panels)

RT-1 Records identified from databases: 2,418. Records after duplicates removed: 1,905.

RT-2 Records screened at title and abstract: 1,905. Reports assessed for eligibility: 74.

RT-3 Studies included in the review: 12. Studies included in the meta-analysis: 9.

RT-4 Registration: PROSPERO, CRD42024000000 (placeholder identifier for this specimen).

RT-5 Eligibility criteria as approved in the protocol: randomized trials in adults, published in any language, comparing the two named interventions.

RT-6 Target journal: The BMJ. Funding statement supplied by the team: none.

ABSTRACT

Objectives This review looked at the two interventions.

Methods Eligible studies were randomized trials in adults, published in any language, comparing the two named interventions. [Query to the review team: item 4 of the abstract checklist asks for the information sources and the date each was last searched. RT-1 gives a record count but not the database names or the search dates. Please supply both.] Two reviewers screened records and extracted data. [Query: item 5 asks how risk of bias was assessed. The record does not say, and we have not written a method for you.] Results were pooled.

Results 2,418 records were identified and 1,905 remained after duplicates were removed. Reports assessed for eligibility numbered 74. Twelve studies were included in the review and nine in the meta-analysis. [Query: item 7 also asks for the total number of participants and for relevant characteristics of the studies. Neither is in the record.] The effect favored the first intervention.

Conclusions The first intervention appears better and further research is needed.

Funding None.

Registration PROSPERO, CRD42024000000.