Systematic Searches and Documentation

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Cecil G. Sheps Center for Health Services Research
Librarian for the RTI-UNC Evidence-based Practice Center
Contents

* Systematic Search definition
* Librarians help you search
* Building your search/PICOTS Framework
* Choosing resources to search
* Adding limits to the search
* Example searches in PubMed, HSRProj, and ClinicalTrials.gov
* Reference Management programs
* PRISMA diagrams
* Documenting your searches so they can be repeated
* Additional resources
Definition from The Cochrane Collaboration: A review of a clearly formulated question that uses systematic and explicit methods to identify, select, and critically appraise relevant research, and to collect and analyze data from the studies that are included in the review.

Key characteristics of a systematic review are:

* a clearly stated set of objectives with pre-defined eligibility criteria for studies;
* **an explicit, reproducible methodology**;
* a **systematic search that attempts to identify all studies that would meet the eligibility criteria**;
* an assessment of the validity of the findings of the included studies, for example through the assessment of risk of bias; and
* a systematic presentation, and synthesis, of the characteristics and findings of the included studies.

Librarian’s Role

- Planning your searches
  - What question(s) are you trying to answer?
  - Which search terms will be used?
  - How will you combine the terms? (Boolean searching)
  - How will you organize search results?
  - What will be included and excluded (criteria)
  - Are your search methods replicable?
Where do I start?
Building your search

- Be sure your topic isn’t already covered by a recent review
- Select database
- Find controlled vocabulary (such as Medical Subject Headings, or MeSH) for each concept
- Include keywords alternates to controlled vocabulary
- Include unique text words or phrases for concepts not included in controlled vocabulary
- Consider listing terms alphabetically in your search statements if numerous to keep track of them
• Decide which terms to search based on the “PICOTS” framework (Population, Intervention, Comparison, Outcome, Timing, Setting)
  • This sets parameters for your Inclusion and Exclusion criteria
• Many academic libraries offer in-depth Systematic Review classes, or work with a subject librarian (and ask questions):
  • Your health/medical library at your institution
  • Librarians specializing in your topic. Is your topic:
    • Health Services Research?
    • Public Health?
    • Medicine?
    • Nursing?
    • Public Policy?
• Decide which databases to search
• Consider searching for gray literature (unpublished and not controlled commercially)
Pharmacotherapy for Adults With Alcohol-Use Disorders in Outpatient Settings

Available: https://effectivehealthcare.ahrq.gov/topics/alcohol-misuse-drug-therapy/research
<table>
<thead>
<tr>
<th>P Patient Population</th>
<th>I Intervention</th>
<th>C Comparator</th>
<th>O Outcomes</th>
<th>T Timing</th>
<th>S Setting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults (age 18 years or older) with alcohol-use disorders</td>
<td>Medications approved by FDA for treating alcohol dependence (acamprosate, disulfiram, naltrexone) and specific list of medications which have been used off-label or are under investigation.</td>
<td>KQ1-5: Studies must compare medication listed in I with placebo or another medication KQ6: Studies must compare people with a genotype or allele with people with different genotypes or alleles.</td>
<td>Include: Specific consumption outcomes (return to drinking, drinks per day, etc.) Adverse effects of interventions (nausea/vomiting, anorexia, insomnia, etc.)</td>
<td>At least 12 weeks of follow-up from the time of medication initiation.</td>
<td>Outpatient health care (non-laboratory) settings. KQ4 applies to primary care settings only.</td>
</tr>
</tbody>
</table>
KQ 1a: Which medications are efficacious for improving consumption outcomes for adults with AUDs* in outpatient settings?
KQ 1b: How do medications for adults with AUDs compare for improving consumption outcomes in outpatient settings?

KQ 2a: Which medications are efficacious for improving health outcomes for adults with AUDs in outpatient settings?
KQ 2b: How do medications for adults with AUDs compare for improving health outcomes in outpatient settings?

KQ 3a: What adverse effects are associated with medications for adults with AUDs in outpatient settings?
KQ 3b: How do medications for adults with AUDs compare for adverse effects in outpatient settings?
KQ 4: Are medications for treating adults with AUDs effective in primary care settings?

KQ 5: Are any of the medications more or less effective than other medications for men or women, older adults, young adults, racial or ethnic minorities, smokers, or those with co-occurring disorders?

KQ 6: Are any of the medications more or less effective for adults with specific genotypes (e.g., related to polymorphisms of the mu-opioid receptor gene [OPRM1])?

*AUDs = Alcohol Use Disorders
### PICOT diagram for Mental Health Diagnosis/Suicide

<table>
<thead>
<tr>
<th>P Patient Population</th>
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<th>C Comparator</th>
<th>O Outcomes</th>
<th>T Timing</th>
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</thead>
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<tr>
<td>Narrow MH/SUD population</td>
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<td>-</td>
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<tr>
<td>Even Narrower MDD and Medicaid</td>
<td>-</td>
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<td>Suicide</td>
<td>-</td>
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Choosing Literature Databases and Other Sources to Search

Minimum database searches for published literature:

- Medline (some libraries offer via OVID, or free PubMed access)
- The Cochrane Library (contains a database of Cochrane Collaboration reviews and other systematic reviews!)
- Embase IF:
  - literature is scarce for your question(s)
  - your topic is clinical or pharmacotherapy
  - you will include international literature
  - you will include conference papers
  - client/funding source requires it

- Others as appropriate: social science, nursing, psychology/psychiatry, pharmaceutical, education, policy, or other subject databases as appropriate (check with a librarian!)
HSRProj (Health Services Research Projects in Progress)

Information about ongoing health services research and public health projects

Enter one or more term(s) to search. Enter a multi-word term or phrase in quotes.
Examples: asthma; “long term care”

Search: ___________________________ Search Clear

Advanced Search

Click on map icon to search projects by state

Download the full HSRProj database

NICHSR ONESearch

One website to search them all: HSRProj, HSRR, HSRIC, PHPPartners
HSRProj (Health Services Research Projects in Progress)

Information about all health services research and public health projects

Enter one or more term(s) to search. Enter a multi-word term or phrase in quotes.
Examples: asthma; "long term care"

Search: [Input Field] Search Clear

Advanced Search

[Map Image]
Example searches in PubMed, HSRProj, and ClinicalTrials.gov
Is there an association between mental health disorder diagnoses and the outcome of suicide among Medicaid enrollees?

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Advanced Search

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(((mesh:(suicide)) OR (mesh:(suicide, attempted)) OR suicid*)) AND((mesh:(men)))

Results 1 - 13 of 13 for (((mesh:(suicide)) OR (mesh:(suicide, attempted)) OR suicid*)) AND((mesh:(mental disorders)) OR "mental disorders") AND((mesh:(Medicaid)) OR (mesh:(Centers for Medicare and Medicaid Services (U.S.)) OR Medicaid*)

refine by Project Status

- Ongoing and Completed (7)
- Ongoing (1)
- Completed (6)
- Archived (6)

refine by Investigator

- Bruckner, Tim Allen (1)

Select/deselect all

Max download is 1000 records. Need more? Consider the XML full database download

1. Analysis of proposed Medicaid policy changes on people with mental illness and substance abuse disorders

   Analysis of proposed Medicaid policy changes on people with mental illness and substance abuse disorders ... This project will inform policymakers about the ...

Investigator: Frank, Richard

Performing Organization: Harvard University, Harvard Medical School, Department of Health Care Policy

Supporting Agency: Commonwealth Fund
**Suicide among veterans: Using the VA depression registry to inform care**

**Archived Project**

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<th>Valenstein, Marcia T</th>
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**Abstract:**

Research Objectives: Suicide is a devastating event that occurs most often in the context of a depressive disorder. Reducing suicide is a national and a VA priority and may require comprehensive programs that specifically target high-risk groups, such as the more than 500,000 patients who receive VA treatment for depression each year. To develop effective programs that reduce suicide risks in this vulnerable population, VA policymakers and clinicians require basic but currently unavailable information about suicide rates and important risk factors for suicide within this population. The risks associated with gender, age, and race/ethnicity within the depressed VA population are likely to differ from those observed in the general population, and there may be special considerations arising from important co-morbidities, such as PTSD. Policy makers and clinicians also need information about potentially high-risk periods for suicide during the course of depression treatment. Certain time periods, such as those immediately following psychiatric hospitalization, have long been noted to be high-risk periods for suicide. Recently the Food and Drug Administration (FDA) highlighted other potentially high-risk periods, periods that immediately follow new antidepressants starts or changes in antidepressant doses. On October 15, 2004, the FDA mandated ‘black box’ warnings for...
alcoholic
alcoholic axonal neuropathies
alcoholic axonal neuropathy
alcoholic beverage
alcoholic beverages
alcoholic cardiomyopathy
alcoholic cirrhosis
alcoholic fatty liver
alcoholic hepatic cirrhosis
alcoholic hepatitis
alcoholic hepatitis, chronic
alcoholic intoxication
alcoholic intoxication, chronic
Alcoholism

1. A primary, chronic disease with genetic, psychosocial, and environmental factors influencing its development, manifestations. The disease is often progressive and fatal. It is characterized by impaired control over drinking, preoccupation with the drug alcohol, use of alcohol despite adverse consequences, and distortions in thinking, most notably denial. Each of these symptoms may be continuous or periodic. (Morse and Flavin for the Joint Commission of the National Council on Alcoholism and Drug Dependence and the American Society of Addiction Medicine to Study the Definition and Criteria for the Diagnosis of Alcoholism: in JAMA 1992;268:1012-4)

National Institute on Alcohol Abuse and Alcoholism (U.S.)

2. Component of the NATIONAL INSTITUTES OF HEALTH. It conducts research focused on improving the treatment and prevention of alcoholism and alcohol-related problems to reduce the health, social, and economic consequences of this disease. NIAAA, NIMH, and NIDA were created as coequal institutes within the Alcohol, Drug Abuse and Mental Health Administration in 1974. It was established within the NATIONAL INSTITUTES OF HEALTH in 1992.

Year introduced: 2008
Alcohol-Related Disorders

Disorders related to or resulting from abuse or misuse of alcohol.
Year introduced: 1998

Alcohol Withdrawal Seizures

A condition where seizures occur in association with ethanol abuse (ALCOHOLISM) without other identifiable causes. Seizures usually occur within the first 6-48 hours after the cessation of alcohol intake, but may occur during periods of alcohol intoxication. Single generalized tonic-clonic motor seizures are the most common subtype, however, STATUS EPILEPTICUS may occur. (Adams et al., Principles of Neurology, 6th ed, p1174)
Year introduced: 2000

Fetal Alcohol Spectrum Disorders

An umbrella term used to describe a pattern of disabilities and abnormalities that result from fetal exposure to ETHANOL during pregnancy. It encompasses a phenotypic range that can vary greatly between individuals, but reliably includes one or more of the following: characteristic facial dysmorphism, FETAL GROWTH RETARDATION, central nervous system abnormalities, cognitive and/or behavioral dysfunction, BIRTH DEFECTS. The level of maternal alcohol consumption does not necessarily correlate directly with disease severity.
Year introduced: 2014
See Also:

- Psychoses, Alcoholic
- Substance-Related Disorders

All MeSH Categories
Diseases Category
Chemically-Induced Disorders
Substance-Related Disorders
Alcohol-Related Disorders

Alcohol-Induced Disorders
Alcohol-Induced Disorders, Nervous System
Cardiomyopathy, Alcoholic
Fetal Alcohol Spectrum Disorders
Liver Diseases, Alcoholic
Pancreatitis, Alcoholic
Psychoses, Alcoholic
Alcoholic Intoxication
Alcoholism
Binge Drinking
Wernicke Encephalopathy

All MeSH Categories
Psychiatry and Psychology Category
Mental Disorders
Substance-Related Disorders
Alcohol-Related Disorders

Alcohol Amnestic Disorder
Alcoholic Korsakoff Syndrome
Alcohol Withdrawal Delirium
Alcoholic Intoxication
Alcoholism
Binge Drinking
Psychoses, Alcoholic
Wernicke Encephalopathy
Search results

1. [Chronic right ventricular failure in a patient with diffuse toxic goiter and alcoholic cirrhosis of the liver: case description].
Shirtladze MR, Timofeeva AA, Shul'pekova YO, Nechaev VM, Baranov SA, Supryaga IV.
PMID: 31340750
Similar articles

2. Hypothalamic syndrome as an initial presentation of Wernicke encephalopathy: A case report.
PMID: 31261554 Free PMC Article
Similar articles

3. Alcohol complicates multimorbidity in older adults.
Stewart D, McCambridge J.
PMID: 31248871
Similar articles
Use the builder below to create your search

**Builder**

- **All Fields**
- **AND**

Search or Add to history

**History**

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Search Builder

All Fields ✔️ "Viloxazine"[Mesh] OR Viloxazine |

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## PubMed Advanced Search Builder

Use the builder below to create your search

**All Fields**

### Builder

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Disulfiram facilitates ataxin-3 nuclear translocation and potentiates the cytotoxicity in a cell model of SCA3.
Wang Z.
PMID: 31378764
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Reduction in Drinking was Associated With Improved Clinical Outcomes in Women With HIV Infection and Unhealthy Alcohol Use: Results From a Randomized Clinical Trial of Oral Naltrexone Versus Placebo.
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doi: 10.2131/jts.44.535.

Quiroz C, Espinoza L, Lewis JE, Brumbach B, Bryant K.

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Stewart SH, Wallizer KS, Blanco J, Swiatek D, Paine Hughes L, Quiñones-Lombrana A, Shyalla K.

PMID: 31370987
1. **Disulfiram facilitates ataxin-3 nuclear translocation and potentiates the cytotoxicity in a cell model of SCA3.**
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5. **Smokers with opioid use disorder may have worse drug use outcomes after varenicline than nicotine replacement.**
   PMID: 31370981
   Similar articles

6. **Nuclear transcriptional changes in hypothalamus of Pomc enhancer knockout mice after excessive alcohol drinking.**
Naltrexone and alcohol effects on craving for cigarettes in heavy drinking smokers.

Green R, Bujarski S, Lim AC, Venegas A, Ray LA.
PMID: 30628813

Total and acylated ghrelin plasma levels as potential long-term response markers in alcohol-dependent patients receiving high-dose of the GABA-B receptor agonist baclofen.

Geisel O, Hellweg R, Wernecke KD, Wiedemann K, Müller CA.
PMID: 30611960

Executive Functioning Moderates Responses to Appetitive Cues: A Study in Severe Alcohol Use Disorder and Alcoholic Liver Disease.

Logge WB, Morley KC, Haber PS, Baillie AJ.
PMID: 30576416

Effects of time-varying changes in tobacco and alcohol use on depressive symptoms following pharmaco-behavioral treatment for smoking and heavy drinking.

Lechner WV, Sidhu NK, Cioe PA, Kahler CW.
PMID: 30445275
Search results

Items: 1 to 20 of 686

1. Naltrexone and alcohol effects on craving for cigarettes in heavy drinkers: a randomized controlled trial
   - Green R, Bujarski S, Lim AC, Venegas A, Ray LA
   - PMID: 30628813
   - Similar articles

2. Total and acylated ghrelin plasma levels as potential long-term responders and non-responders among dependent patients receiving high-dose of the GABA-B receptor agonist.
   - Geisel O, Hellweg R, Wernecke KD, Wiedemann K, Müller CA
   - PMID: 30611960
   - Similar articles

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- Abstract (text)
- MEDLINE
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ClinicalTrials.gov Home Page

ClinicalTrials.gov is a database of privately and publicly funded clinical studies conducted around the world.

Explore 264,229 research studies in all 50 states and in 202 countries.

ClinicalTrials.gov is a resource provided by the U.S. National Library of Medicine.

IMPORTANT: Listing a study does not mean it has been evaluated by the U.S. Federal Government. Read our disclaimer for details.

Before participating in a study, talk to your health care provider and learn about the risks and potential benefits.

Find a study

Recruitment status (all fields optional)
- Recruiting and not yet recruiting studies
- All studies

Condition or disease (For example: breast cancer)

Other terms (For example: NCT number, drug name, investigator name)

Country

Search Advanced Search

Help Studies by Topic Studies on Map Glossary
Clinicaltrials.gov Advanced Search

Advanced Search

Fill in any or all of the fields below. Click on the label to the left of each search field for more information or read the Help.

- Condition or disease:
- Other terms:
- Study type:
- Study Results:
- Recruitment status:
  - Clinical study:
    - Not yet recruiting
    - Recruiting
    - Enrolling by invitation
    - Active, not recruiting
    - Suspended
    - Terminated
    - Completed
    - Withdrawn
    - Unknown status
- Expanded Access:
  - Available
  - No longer available
  - Temporarily not available
  - Approved for marketing

Eligibility Criteria:
- Age: [ ] years OR [ ] years
- Sex: [ ] Male OR [ ] Female
- Age Group: [ ] Child (birth–17) OR [ ] Adult (18–65) OR [ ] Senior (65+)

Search [Help]
( ( "Alcohol-Related Disorders" OR "Alcoholism" OR "Alcohol Drinking" OR alcohol depend* OR "alcohol misuse" OR alcohol addiction* OR "alcohol abuse" OR problem drink* OR alcohol problem* OR "alcohol consumption" OR harmful alcohol* OR harmful drink* OR ( drinking OR drinker OR drinkers ) AND alcohol ) AND ( "Alcohol Deterrents" OR naltrexone OR Revia OR Vivitrol OR acamprosate OR Campral OR disulfiram OR Antabuse OR amitriptyline OR aripiprazole OR atomoxetine OR baclofen OR buspirone OR citalopram OR desipramine OR escitalopram OR fluoxetine OR fluvoxamine OR gabapentin OR imipramine OR nalmefene OR olanzapine OR ondansetron OR paroxetine OR prazosin OR quetiapine OR sertraline OR topiramate OR valproate OR "Valproic Acid" OR varenicline OR viloxazine ) ) [ALL-FIELDS] AND ( "Adult" OR "Senior" ) [AGE-GROUP] AND ( "01/01/1970" : "02/08/2013" ) [FIRST-RECEIVED-DATE]

Advanced/Expert search limited to:
Age Groups: Adult, Senior
First Received: 1/1/1970 - 2/8/2013
Too much literature? Consider narrowing your scope

- **Broad**
  - What is the association between mental health and substance use disorder diagnoses and the outcome of suicide?

- **Narrow**
  - What is the association between mental health and substance use disorder diagnoses and the outcome of suicide *among the patient claims/medical records population*?

- **Even narrower**
  - What is the association between major depressive disorder diagnoses and the outcome of suicide *among Medicaid enrollees*?
Your search may be too large to analyze for your project’s size, human resources, and/or timeline.

- **Try limiting by:**
  - Narrowing scope of question(s)
  - Age of participants or subjects
  - Human study populations
  - Study research designs. Examples:
    - Randomized Controlled Trials (RCTs) or any Trials
    - Other systematic reviews
    - Primary Studies
  - Remove unwanted publication types. Examples:
    - News
    - Letters
    - Editorials
    - Comments
Hand Searching

- Review reference lists of your selected studies for additional relevant works

- Identify new articles that have cited your selected studies with Web of Science or Scopus

- Contact study authors or experts for recommendations about missed or very new studies
Import citations into EndNote, Mendeley, Zotero, Covidence, Abstrackr, or other bibliographic management program to:

A) Organize citations as you either mark them include or exclude
B) Easily insert and format in-text citations bibliographies when creating reports or manuscripts for journal articles
C) Remove duplicates
D) Automatically find full-text articles

*You can often transfer references from one program to another.

Example guide from UNC-Chapel Hill:
http://guides.lib.unc.edu/switching
Flow of literature through phases of a systematic review - PRISMA diagram

Figure B. Disposition of Articles

Number of records identified through database searching

- PubMed: 1,166
- EMBASE: 1,730
- Cochrane Library: 809
- CINAHL: 466
- PsycInfo: 957

Total number of duplicates removed: 1,829

Number of records screened: 3,319

Number of full-text articles assessed for eligibility: 511

Number of full-text articles excluded, with reasons:
- Non-English: 11
- Wrong publication type: 23
- Wrong population: 38
- Wrong intervention: 19
- Wrong comparator: 48
- Wrong outcome: 65
- Wrong setting: 16
- Wrong study design: 82
- Duration < 12 weeks: 43
- Outdated systematic review: 9

Number of studies (articles) included in qualitative synthesis of systematic review: 130 (157)

Number of studies included in quantitative synthesis of systematic review: 83
Documenting Your Searches
Appendix that lists:

- all complete search strategies with all terms used,
- Boolean connector logic,
- which interface (e.g. PubMed or OVID Medline),
- date of your search
- any limits used (language, age, study designs, publication types, publication dates), and
- number of citations retrieved (yield), including:
  - Duplicated found
  - Number included for analysis
Literature Search Strategy

To identify articles relevant to each KQ, we searched PubMed®, the Cochrane Library, PsycINFO®, CINAHL®, and Embase® for English-language and human-only studies published from January 1, 1970, to October 11, 2013. Searches were run by an experienced Evidence-based Practice Center (EPC) librarian and were peer reviewed by another EPC librarian. We manually searched reference lists of pertinent reviews, trials, and background articles on this topic to look for any relevant citations that our searches might have missed. We searched for unpublished studies relevant to this review using ClinicalTrials.gov, the World Health Organization International Clinical Trials Registry Platform, and the FDA Web site. In addition, AHRQ’s Scientific Resource Center requested any unpublished studies and pertinent data from relevant pharmaceutical companies. We also retrieved and assessed references suggested by our peer reviewers and the public.
# Appendix A. Search Strategy

## PubMed, Original Search, 2-6-13

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<thead>
<tr>
<th>Search Query</th>
<th>Items found</th>
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</tr>
<tr>
<td>#2 Search “Alcoholism” [MeSH]</td>
<td>64059</td>
</tr>
<tr>
<td>#3 Search “Alcohol Drinking” [MeSH]</td>
<td>46842</td>
</tr>
<tr>
<td>#4 Search alcohol depend*</td>
<td>8221</td>
</tr>
<tr>
<td>#5 Search &quot;alcohol misuse&quot;</td>
<td>1331</td>
</tr>
<tr>
<td>#6 Search alcohol addiction*</td>
<td>724</td>
</tr>
<tr>
<td>#7 Search &quot;alcohol abuse&quot;</td>
<td>12291</td>
</tr>
<tr>
<td>#8 Search problem drink*</td>
<td>2220</td>
</tr>
<tr>
<td>#9 Search alcohol problem*</td>
<td>2955</td>
</tr>
<tr>
<td>#10 Search “alcohol consumption”</td>
<td>25255</td>
</tr>
<tr>
<td>#11 Search harmful alcohol*</td>
<td>223</td>
</tr>
<tr>
<td>#12 Search harmful drink*</td>
<td>244</td>
</tr>
<tr>
<td>#13 Search ((drinking[tiab] OR drinker[tiab] OR drinkers[tiab]) AND alcohol[tiab])</td>
<td>24901</td>
</tr>
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</tr>
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<td>#15 Search “Alcohol Deterrents” [MeSH]</td>
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</tr>
<tr>
<td>#16 Search (&quot;Naltrexone&quot;[Mesh] OR naltrexone)</td>
<td>7566</td>
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</table>
Cochrane Library, Original Search, 2-8-13

Cochrane Reviews – 209
Other reviews – 12
Trials – 587

Technology Assessments (1) ● Economic Evaluations (9) ● Cochrane Groups (3)

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<tr>
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<tr>
<td>#11</td>
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<tr>
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<td>harmful drink*</td>
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Work with a librarian, and organize elements of your search using the PICOTS framework.

Document your searches and search methods fully so they can be repeated by others.

Refer to resources at the end of this presentation and the more detailed version on the AcademyHealth website for further guidance.
Additional NLM resources for HSR and Public Health research

* Health Services Research Information Central

* Health Services and Sciences Research Resources (a catalog of HSR datasets and survey instruments with links to PubMed)
  https://hsrr.nlm.nih.gov/?cf_redirect=t

* ClinicalTrials.gov – clinical trials in the US

* PHPartners – practical information for the public health workforce from NLM
  https://www.phpartners.org/ph_public/
Search for practice guidelines:

- PubMed search, limited to publication type Guideline (e.g. Breast Neoplasms AND "Guideline" [Publication Type])
- ECRI Guidelines Trust (free; requires registration)
  https://guidelines.ecri.org/
- TRIP Database (free version) – International source of guidelines and other evidence-based literature
  https://www.tripdatabase.com/
Other Resources

* A PICOTS case study: https://guides.lib.unc.edu/pico/case

* Useful fee-based databases to look for at your library:
  * Embase (clinical and pharmaceutical topics)
    https://www.embase.com/
  * The Cochrane Library (Evidence-based health care, systematic review and controlled trials databases)
    https://www.cochranelibrary.com/
  * CINAHL (Nursing and Allied Health)
    https://www.ebscohost.com/nursing/products/cinahl-databases/cinahl-complete
  * PsycINFO (psychology, behavioral health and social science)
    https://www.apa.org/pubs/databases/psycinfo/
* Boolean Logic/Searching:  
  https://guides.lib.unc.edu/booleansearching
* Citation Management: Getting help with EndNote  
  https://www.youtube.com/watch?v=S3x06ZjBV6U
* UNC EndNote guide:  
  https://guides.lib.unc.edu/endnotex6
* EndNote YouTube Channel  
  https://www.youtube.com/user/EndNoteTraining
* https://guides.lib.unc.edu/citing-information
Contact

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(919) 843-2298