Iran J Public Health, Vol. 52, No.10, Oct 2023, pp.2228-2229



# Letter to the Editor

# To Be or Not to Be: Addressing of PRISMA Checklist for Reporting Systematic Reviews and Meta-Analyses

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(Received 11 Aug 2022; accepted 28 Aug 2022)

## Dear Editor-in-Chief

In recent decades, systematic reviews and metaanalyses have gained widespread popularity among researchers leading to an increased number of systematic review publications. However, this interest in publishing systematic reviews by researchers can lead to these studies being very prone to bias and the reporting of these types of publications is require special attention (1).

Authors' reports of their systematic reviews are closely related to authors' experience in this field. Therefore, to ensure the quality of results and methodology, various reporting guidelines need to be considered (2, 3).

So far, no credible source has mentioned that the use of the unique methodological guideline for reporting systematic review and meta-analysis is mandatory. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRIS-MA) is a guideline that researchers use to ensure the quality of their results and methodology (2). Therefore, following the PRISMA guideline to improve the conducting and reporting of further systematic reviews is highly recommended (2). Some new studies published in reputable journals have not followed the methodological guideline/checklist in their studies and many of the errors that we found revealed a lack of knowledge regarding the reporting of systematic reviews (4-6). Many researchers believe that, if paying attention to the full expression of PRIS-MA, write the word "Preferred", which indicates that the use of this checklist is based on the preferences of the research team. Some researchers follow PRISMA, and some do not have to. This leads to that in the methodology section, sufficient information about how to search keywords and the number of studies retrieved, as well as the databases used, is not well provided to the audience (7, 8).

For example, some systematic reviews have not provided details on information about the quality evaluation of included studies via proper checklists (4-6, 8-10). However, the accuracy of the conclusions drawn in the systematic review depends on the quality and strength of selected evidences (7).

Nevertheless, there is evidence that shows that the use of a reporting guideline improves the quality of the final publication. Therefore, to assure transparent reporting, the general suggestion



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is to keep the research teams as well as peer reviewers following reporting guidelines (2).

### **Conflict of Interest**

The authors declare that there is no conflict of interests.

## References

- 1. Peters MD, Godfrey CM, Khalil H, et al (2015). Guidance for conducting systematic scoping reviews. *Int J Evid Based Healthc*, 13:141-146.
- Moher D, Liberati A, Tetzlaff J, Altman DG (2009). Preferred reporting items for systematic reviews and meta-analyses: the PRISMA statement. *Ann Internal Med*, 151:264-269.
- Shamsi M, Mirzaei M, Vaziri S, Mozaffari HR (2020). Common mistakes in reporting systematic reviews and meta-analyses. *Health Promot Perspect*, 10:97-97.
- Martinez-Morata I, Sanchez TR, Shimbo D, Navas-Acien A (2020). Electronic cigarette use and blood pressure endpoints: a systematic review. *Curr Hypertens Rep*, 23(1):2.
- 5. Esfandiari N, Mazaheri MA, Akbari-Zardkhaneh S, et al (2021). Internet-delivered versus face-

to-face cognitive behavior therapy for anxiety disorders: Systematic review and metaanalysis. *Int J Prev Med*, 12: 153.

- Liu C, Chen Y, Chen Y, Chen B, Xie G, Chen Y (2021). Effects of prone positioning during extracorporeal membrane oxygenation for refractory respiratory failure: a systematic review. SN Compr Clin Med, 3:2109-2115.
- Smith V, Devane D, Begley CM, M C (2011). Methodology in conducting a systematic review of systematic reviews of healthcare interventions. *BMC Med Res Methodol*, 11:15.
- 8. Roshani D, Karimian A (2021). Earthquake Preparedness in Iranian Hospitals: A Systematic Review and Meta-Analysis. *Bull Emerg Trauma*, 9:1-8.
- Chattu VK, Knight WA, Adisesh A, et al (2021). Politics of disease control in Africa and the critical role of global health diplomacy: A systematic review. *Health Promot Perspect*, 11:20-31.
- Yah CS, Ndlovu S, Kutywayo A, Naidoo N, Mahuma T, Mullick S (2020). The prevalence of pregnancy among adolescent girls and young women across the Southern African development community economic hub: A systematic review and meta-analysis. *Health Promot Perspect*, 10:325-337.