Contents

**EBM opinion and debate**

157 Meta-analysis using individual participant data from randomised trials: opportunities and limitations created by access to raw data

**Maternal and child health**

162 USPSTF is unable to recommend for or against lipid screening to identify multifactorial dyslipidaemia in childhood: no recommendation is not without consequences

**Original EBM research**

164 What does expert opinion in guidelines mean? a meta-epidemiological study

**Evidence synthesis**

**General medicine**

170 Quality of reporting of harms in randomised controlled trials of pharmacological interventions for rheumatoid arthritis: a systematic review

**Commentaries**

**Primary care**

178 Longer screening intervals are recommended following a negative HPV test in primary cervical screening

179 Haem iron and nitrate/nitrite account for much of the mortality increase associated with red meat consumption

180 Value of screening for and treating pre-diabetes is reduced by low test accuracy and indirect evidence of impact on patient important outcomes

**General medicine**

182 Caffeine does not increase the arrhythmic burden in patients with heart failure and left ventricular systolic dysfunction

183 In stable COPD, long-acting muscarinic antagonist plus long-acting beta-agonists resulted in less exacerbations, pneumonia and larger improvement in FEV, than long-acting beta-agonists plus inhaled corticosteroids

**Maternal and child health**

184 CETP inhibition improves the lipid profile but has no effect on clinical cardiovascular outcomes in high-risk patients

185 Early renin–angiotensin system inhibition induced renal deterioration may be a predictor for long-term cardiorenal outcomes

**Maternal and child health**

187 Antibiotic utilisation in very low birth weight infants without sepsis or necrotising enterocolitis is associated with multiple adverse outcomes

188 Serial transvaginal cervical length measurements and quantitative vaginal fetal fibronectin concentrations did not predict spontaneous preterm birth in low-risk nulliparous women

189 Antenatal corticosteroid administration between 24 hours and 7 days before extremely preterm delivery is associated with the lowest rate of mortality

**Emergency care**

190 Routine invasive strategies compared with conservative strategies do not lower the all-cause mortality in patients with non-ST elevation myocardial infarction and unstable angina

**Surgery**

191 Over half of the patients who undergo adjustable gastric banding may require revision bariatric surgery

192 In localised prostate cancer, radical prostatectomy was associated with more sexual dysfunction and urinary incontinence than radiation or active surveillance

193 Meniscal resection may not benefit patients with traumatic meniscal tears

**Mental health**

194 Parent-delivered CBT may reduce intervention cost, but questions arise about effectiveness

**Letters**

195 Effectiveness of interventions based on implantable devices: meta-analyses or systematic reviews that fail to indicate which device brands were used

196 Comparing levels of evidence between Choosing Wisely and Essential Evidence Plus