More than 10 000 articles coded and categorized

Since the launch of the Live map of COVID-19 evidence in April 70 699 articles have been screened and 10 938 are now included in the map

Gunn Vist

-It has been a very interesting and intense period indeed, says Gunn Vist who is the project leader for the Live map of COVID-19 evidence. Thanks to our brilliant and effective team and our national and international collaborators, we have now screened 70 699 publications and coded 10 983 of them! These are in the current publicly available map categorized by topic, population and publication type. After screening, we select and code all the systematic reviews and health technology assessments (HTAs), randomized controlled trials (RCTs) and prospectively controlled studies that we have found. We and our collaborators also code as many of the other publications as we can. Those not yet coded are still available behind the scenes, they are not lost.

What have been the main challenges during the first half year?

-The short answer is the amount of work required, says Gunn. The main challenge has been the enormous number of publications on COVID-19. We noticed early spring that the volume escalated way beyond anything we had previously seen for other research topics. Still it keeps increasing. It became clear that our first goal to code all the COVID-19 publications published worldwide was impossible. We now prioritize reviews, HTAs, RCTs and prospectively controlled studies. Our second priority is to code the observational studies with 51 or more participants. We have stopped coding publications that do not have primary or secondary data. Studies with 50 or fewer participants are kept for later.

Use of the Live map of COVID-19 evidence

-The map now includes 1160 reviews based on a literature search and coded according to topic and population. More and more frequently, we can therefore provide a quicker answer to COVID-19 questions because we give easy access to the reviews that have already been conducted.

For questions about COVID-19 for which there is no systematic review of high quality available, we still save considerable time and effort as we can collect the relevant studies directly from the map to make our own reviews in the Norwegian Institute of Public Health.

Through our work with the map, we contribute to the Rolling Collaborative Reviews on Covid-19 that the European Network for Health Technology Assessments (EUnetHTA) produces and updates monthly. These Rolling Reviews aim to provide decision-makers with a timely synthesis of available COVID-19 evidence on the comparative effectiveness of therapeutic health technologies. Every month our team informs EUnetHTA about new observational studies containing safety data for selected treatments for COVID-19.

Coming improvements

-The EPPI-reviewer software that we use for making the systematic and living maps on COVID-19 research has just been improved. This will result in a new look for our Live map of COVID-19, and more important: users of the map will be able to download references directly.

The systematic and living map on recommendations from trustworthy guidelines for COVID-19 that is being developed by our partners at McMaster University, Canada is being be tested in October 2020 and should soon be ready to link with our live map. Then, we will be able to code and categorize the guidelines into our evidence map, and the recommendations will be directly linked to the references. The guidelines will then appear as a fourth "bubble" in the map, color still to be decided!

An increasing number of COVID-19 publications are available in several databases

PubMed now contains almost 60 000 COVID-19 articles, with around 2 000 new papers being included each week. Several international databases collect relevant publications.
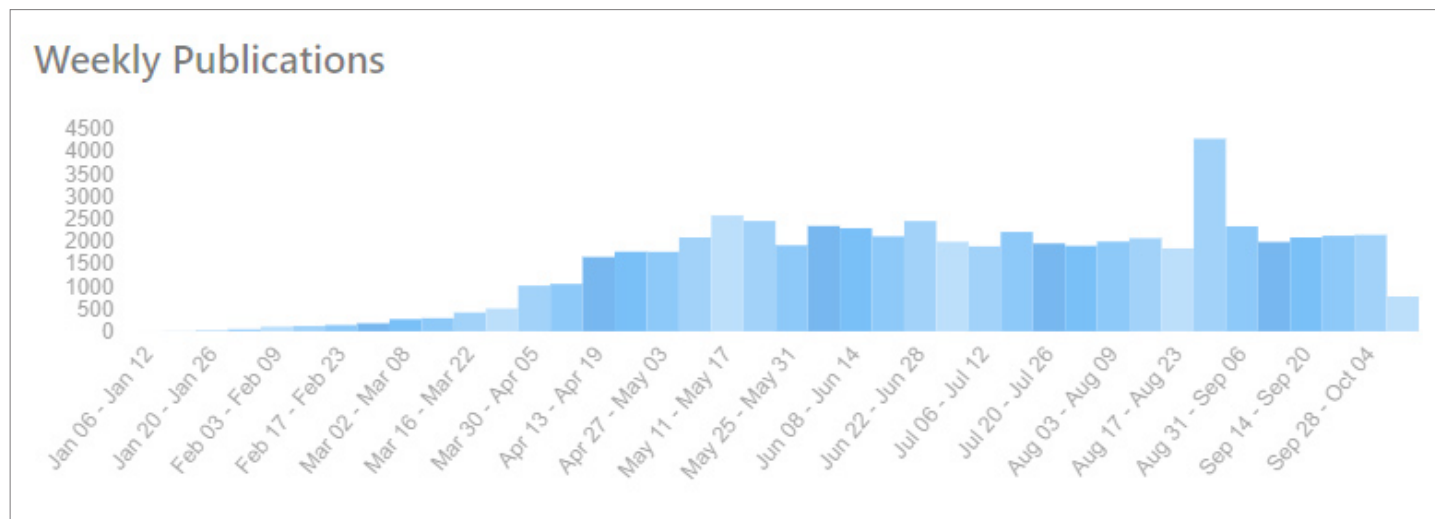
Weekly number of COVID-19 publications in PubMed in 2020 (from LitCovid)

A substantial body of COVID-19 publications has been generated since the pandemic broke out early in 2020. The profile of the literature has changed from mainly opinion papers, case reports and observational studies in the first phase to more controlled trials and systematic reviews. The number of publications is continually increasing. Most publishers are making their COVID-19 content open access.

Several international databases on COVID-19 research have been established. The World Health Organization (WHO) has its own database on multilingual scientific publications on COVID-19 which is updated daily. The Centers for Disease Control and Prevention (CDC) COVID-19 include these and PubMed articles and more in their Downloadable Database.

The National Library of Medicine, which runs PubMed, has its own "curated literature hub for tracking up-to-date scientific information about the 2019 novel Coronavirus" called LitCovid. LitCovid provides access to almost 60 000 relevant articles in PubMed. More than 20 000 of these are classified as "Prevention" and more than 13 000 as "Treatment".

The most comprehensive dataset, containing not only research articles on COVID-19 but also research on other coronaviruses, is published by the Allen Institute for AI (artificial Intelligence) and is available as "a free resource of more than 130,000 scholarly articles".

The Cochrane COVID-19 Study Register is based on three primary data sources: ClinicalTrials.gov, the WHO's International Clinical Trials Registry Platform (ICTRP), and PubMed. It is a collection of more than 23 000 human studies on COVID-19, including interventional, observational, diagnostic, prognostic, epidemiological, qualitative and economic designs.

The L.OVE Platform by Epistemonikos included by mid-October approximately 50 000 articles, of which 2000 are systematic reviews. Around 45 000 of the articles are classified as primary studies, including 300 randomised controlled trials (RCTs) with drug trials dominating. Among registered controlled trials there are more than 1400 drug trials and less than ten trials on behavioural, environmental, social and systems interventions according to the BESSI Collaboration.