

Cochrane Gynaecology and Fertility Group (CGFG) specialised register search – subfertility 22 June 2015

(PROCITE database)

Keywords CONTAINS 'IVF' or 'ICSI' or '*in-vitro* fertilisation' or '*in-vitro* fertilisation procedure' or '*in-vitro* fertilisation' or 'intracytoplasmic sperm injection' or 'intracytoplasmic morphologically selected sperm injection' or 'superovulation' or 'superovulation induction' or 'IUI' or 'insemination, intrauterine' or 'Intrauterine Insemination' or 'ART' or 'artificial insemination' or 'assisted reproduction techniques' or 'subfertility-Female' or 'subfertility' or 'unexplained and endometriosis related infertility' or 'unexplained infertility' or 'unexplained subfertility' or 'Male' or 'anovulation' or 'infertile' or 'infertility' or 'ovulation' or 'Sperm' or 'pregnancy' or 'controlled ovarian hyperstimulation' or 'COH' or Title CONTAINS 'IVF' or 'ICSI' or '*in-vitro* fertilisation' or '*in-vitro* fertilisation procedure' or '*in-vitro* fertilisation' or 'intracytoplasmic sperm injection' or 'intracytoplasmic morphologically selected sperm injection' or 'superovulation' or 'subfertility'

The search was date limited from 1 January 2013 to 31 December 2014 (1578 hits) and then again from 1 January 2013 to 31 December 2014 (640 hits).

The Cochrane Gynaecology and Fertility Group Specialised register

Inclusion criteria

The editorial base of the Cochrane Gynaecology and Fertility Group (CGFG) has assembled a specialised register of controlled clinical trials that fall within the scope of the Group. This is a PROCITE database and is searched by GF information specialist using both keyword and title searches. This database was first established on 19 August 1996 and random controlled (RCTs) and quasi-controlled trials were collected both prospectively and retrospectively since this time. In 2008 we stopped collecting quasi-randomised trials due to the Group policy of only including RCTs in reviews.

These trials are found through:

- Weekly e-mail alerts from the major databases MEDLINE, EMBASE, PsycINFO, and CINAHL. The original search strategies

for MEDLINE, EMBASE and PsycINFO (OVID platform) were developed by the Group with advice from the UK Cochrane Centre. The CINAHL strategy (EBSCO platform) was developed by the GF information specialist.

- E-mail alerts from various journals and other databases, i.e. Medlinx, PLOS ONE, TRIALS, TRIP, Medscape, Human Reproduction etc.
- Hand-searching of conference abstracts and journals. We currently routinely hand-search the conferences ASRM and ESHRE, in the past, prior to indexing in EMBASE, multiple journals and conference abstracts were hand-searched (see Group module for journal and conference lists, <https://archie.cochrane.org/popups/view.jsp?url=%2Fsections%2Fdocuments%2Fview%3Fdocument%3D76&documentPK=76>).
- Other sources, i.e. any trials found by authors that were not already included in the database.

The MEDLINE search is combined with the Cochrane highly sensitive search strategy for identifying randomized trials which appears in the Cochrane Handbook of Systematic Reviews of Interventions (Version 5.0.1 chapter 6, 6.4.11) and the EMBASE, CINAHL and PsycINFO searches are combined with trial filters developed by the Scottish Intercollegiate Guidelines Network (SIGN) <http://www.sign.ac.uk/mehodology/filters.html#random>.

Before entering a report of a trial onto the register, a pdf copy is always obtained and saved electronically. The trial is then coded in the register for the; country of first author, trial registration number, disease/condition, intervention(s), outcomes, study design, control type (another intervention/placebo), blinding and method of randomisation.

Any potentially useful trials will not be excluded. A reviewer or member of the Group may subsequently reject these trials as being methodologically inadequate after obtaining further information from the author(s).

No language restrictions are applied.

The trials entered into the specialised register are submitted to CENTRAL via The Cochrane Register of Studies (CRS) on a monthly basis.