



What are rapid reviews?

Rapid reviews are literature reviews that use accelerated or streamlined methods as compared to traditional systematic reviews. The demand for rapid reviews may be driven by:

- clinical urgency;
- demands for uptake of new technology;
- limited time/resources.

What is the timeframe to complete rapid reviews?

A rapid review typically takes 3 weeks to 6 months to complete (versus minimum 6-12 months for systematic reviews).

Who would use a rapid review?

Government policy-makers, health care institutions, health professionals, patient associations

How was this methods resource created?

An extensive literature review was conducted to answer:

- What methods are used for rapid reviews?
- How do rapid versus traditional review methods compare for the same topic?
- What is lost in taking short-cuts from traditional systematic review methods?
- What biases are introduced?

What did we find?

Rapid reviews varied in methods employed and in depth of the description of those methods.

What are the ways to shorten the review process?

1. Narrow search strategy:
 - Eliminate consultation with experts.
 - Limit number of databases searched (by study design, language, dates).
 - Limit or omit grey literature searching.
 - Limit or omit hand searching of reference lists and relevant journals.
 - Narrow time frame for article retrieval.
 - Use non-iterative search strategy.
2. Limit number of reviewers involved in:
 - inclusion/exclusion;
 - data extraction;
 - quality assessment.

Rapid reviews: Methods and implications

How do rapid reviews compare to traditional systematic reviews?

In terms of overall conclusions, rapid reviews do not vary greatly from systematic reviews. However, they are not a replacement of traditional systematic reviews which typically provide greater depth of information and more detailed recommendations.

Rapid reviews may be best suited for certain types of questions. Rapid reviews are less likely to report on:

- clinical outcomes;
- economic factors;
- social issues.

What biases are introduced through making methods “rapid”? What are the implications?

The following types of bias may be introduced:

- selection bias
- publication bias
- language of publication bias

Additionally, rapid data extraction may miss some information.

Studies suggest that, when review timeframes are restricted, cost and time need to be balanced with benefits of additional searching. Hand searching relevant reference lists and contacting experts may be more effective than exhaustive database searching. Contacting experts may be more important than hand searching in fields that lack specialist literature.

Priority should also be placed on quality assessment versus extensive literature searching. Limited research exists on the impact of using one reviewer for title and abstract screening, full text review, and quality assessment.

Future recommendations:

1. Increase methodological transparency in rapid reviews.
2. Develop minimum reporting standards related to methods utilized.
3. Consider content area, potential for bias when streamlining review process.
4. Describe methodological limitations in reports.
5. Consult with experts throughout rapid review process.
6. Consider rapid reviews as interim guidance until more systematic reviews can be conducted.
7. Undertake further research to compare rapid reviews with traditional systematic reviews in order to better understand limitations of these methods.

How can I find out more about this study?

Visit the NCCMT website: www.nccmt.ca or read the complete article: Ganann, R., Ciliska, D., Thomas, H. (2010). Expediting systematic reviews: Methods and implications of rapid reviews. *Implementation Science*, 5, 56. Available from <http://www.implementationscience.com/content/5/1/56>

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