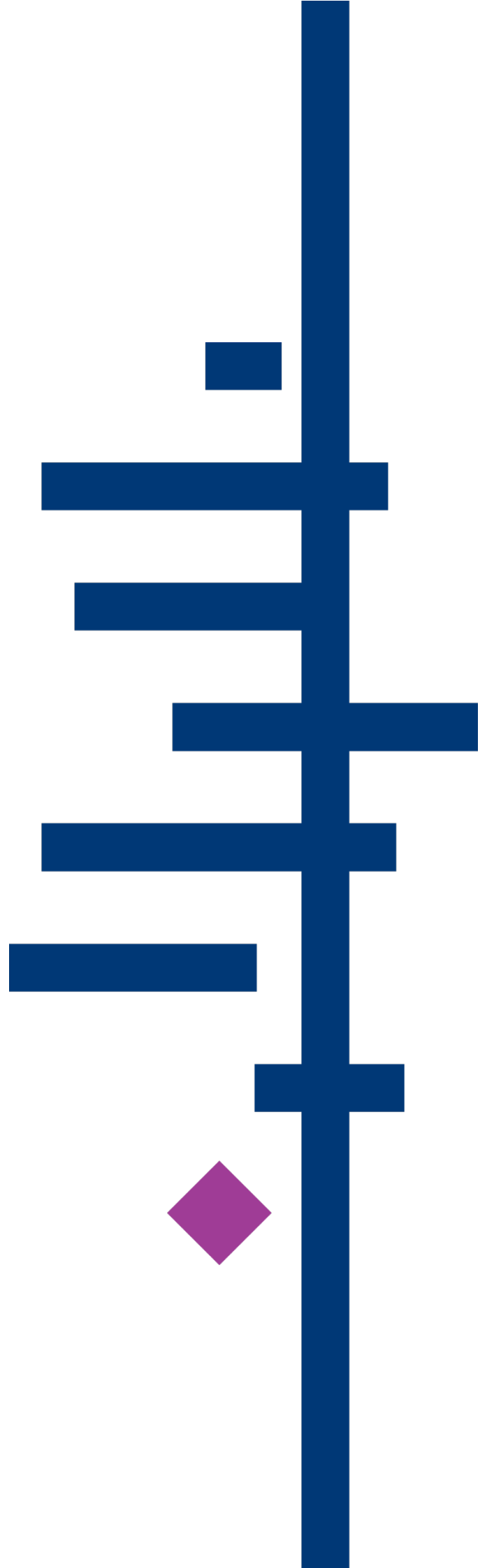# Cochrane Database of Systematic Reviews

2017 CRG Impact Factor and Usage report

Trusted evidence.
Informed decisions.
Better health.

1. How the Work Group contributes to Cochrane Database of Systematic Reviews (CDSR)

Each year in June, Clarivate Analytics publish the Journal Impact Factors of all journals indexed in the Journal Citation Report.

The 2017 Journal Impact Factor for *CDSR* is **6.754**, which describes the ratio of the number of reviews published during 2015 and 2016 (1,764) to the number of citations these reviews received in 2017 (11,914).

The 2017 CRG Impact Factor for the Work Group is **9.846** (13 publications cited 128 times).

A review published by the Work Group in 2015 or 2016 was cited, on average, 9.846 times in 2017.

When considering the citation data presented below, please be aware of the following:

- The data used to generate Impact Factors for individual Cochrane Review Groups (CRG) was extracted from Clarivate Analytics Web of Science. This is slightly different from the data used to calculate the Journal Impact Factor of the *Cochrane Database of Systematic Reviews* (*CDSR*). All Journal Impact Factors (including the Journal Impact Factor of the *CDSR*) are published in the Journal Citation Reports (JCR). The data used to calculate Journal Impact Factors are not made publicly available. Individual CRG Impact Factor data, therefore, should not be quoted as 'official', but can be used within the organisation.

- Cites for individual Cochrane Reviews and individual CRG Impact Factors are allocated by a process of hand-matching. Each year a proportion of cites cannot be matched to citable items because the cited work is not cited correctly. For example, a common error when citing Cochrane Reviews is to omit the version number or suffix from the DOI. The accuracy of the source data provided by Clarivate Analytics also has an impact on the success rate of the citation matching. The table below shows the percentage of cites that were successfully hand-matched for the past seven Impact Factor reports. This report has an 94% success rate which means the majority of Groups will receive a higher CRG Impact Factor than last year.

Impact Factor Year	Cites received*	Cites successfully matched	% of successfully matched cites
2017	11,914	11,249	94%
2016	11,520	9,885	86%
2015	11,522	9,397	82%
2014	11,932	11,720	98%
2013	9,859	8,515	86%
2012	8,087	6,411	79%
2011	7,721	6,685	87%

*Source – Journal Citation Reports

- All reviews that have a new citation record (excluding withdrawn reviews) are included in the *CDSR* Impact Factor calculation.

The ten most cited reviews from the Work Group contributing to the 2017 Impact Factor were:

CD Number	Title	Times Cited
CD002892.pub5	Preventing occupational stress in healthcare workers	24
CD010912.pub3	Workplace interventions for reducing sitting at work	21
CD006955.pub3	Workplace interventions to prevent work disability in workers on sick leave	20
CD010912.pub2	Workplace interventions for reducing sitting at work	19
CD007569.pub3	Interventions to enhance return-to-work for cancer patients	16
CD010306.pub2	Organisational interventions for improving wellbeing and reducing work-related stress in teachers	9
CD011621.pub2	Personal protective equipment for preventing highly infectious diseases due to exposure to contaminated body fluids in healthcare staff	9
CD008881.pub2	Pre-employment examinations for preventing injury, disease and sick leave in workers	4
CD010090.pub2	Interventions for improving employment outcomes for workers with HIV	2
CD010641.pub2	Person-directed, non-pharmacological interventions for sleepiness at work and sleep disturbances caused by shift work	2

The full list of Cochrane Reviews contributing to the 2017 Impact Factor for the Work Group is provided in the accompanying Excel file.

The ten most cited reviews published in the *CDSR* (all CRGs) contributing to the 2017 Impact Factor were:

CD Number	Title	Review Group	Times Cited
CD003793.pub3	Pulmonary rehabilitation for chronic obstructive pulmonary disease	Airways Group	104
CD003677.pub5	Surgical approach to hysterectomy for benign gynaecological disease	Gynaecology and Fertility Group	67
CD004376.pub3	Exercise for osteoarthritis of the knee	Musculoskeletal Group	62
CD010216.pub3	Electronic cigarettes for smoking cessation	Tobacco Addiction Group	55
CD007145.pub3	Diet or exercise, or both, for preventing excessive weight gain in pregnancy	Pregnancy and Childbirth Group	53
CD005563.pub3	Interventions for preventing delirium in hospitalised non-ICU patients	Dementia and Cognitive Improvement Group	48
CD006375.pub3	Mid-urethral sling operations for stress urinary incontinence in women	Incontinence Group	48
CD005381.pub4	Aerobic exercise to improve cognitive function in older people without known cognitive impairment	Dementia and Cognitive Improvement Group	45
CD008873.pub3	Vitamin D supplementation for women during pregnancy	Pregnancy and Childbirth Group	43
CD006611.pub4	Mobile phone-based interventions for smoking cessation	Tobacco Addiction Group	42

2. How the Work Group Impact Factor compares to that of other Cochrane Review Groups (CRGs):

Figure 1, details the 2017 CRG Impact Factor for each CRG. Figure 2 shows the number of publications and citations contributing to the 2017 Impact Factor for each CRG as a percentage of the *CDSR*. It is important to remember that these figures have been calculated using hand-matched data from Web of Science and are not 'official' Impact Factors.

Figure 1: 'Impact Factor' for each CRG (i.e. number of cites in 2017 to reviews published in 2015–2016, divided by the number of reviews published in 2015–2016)
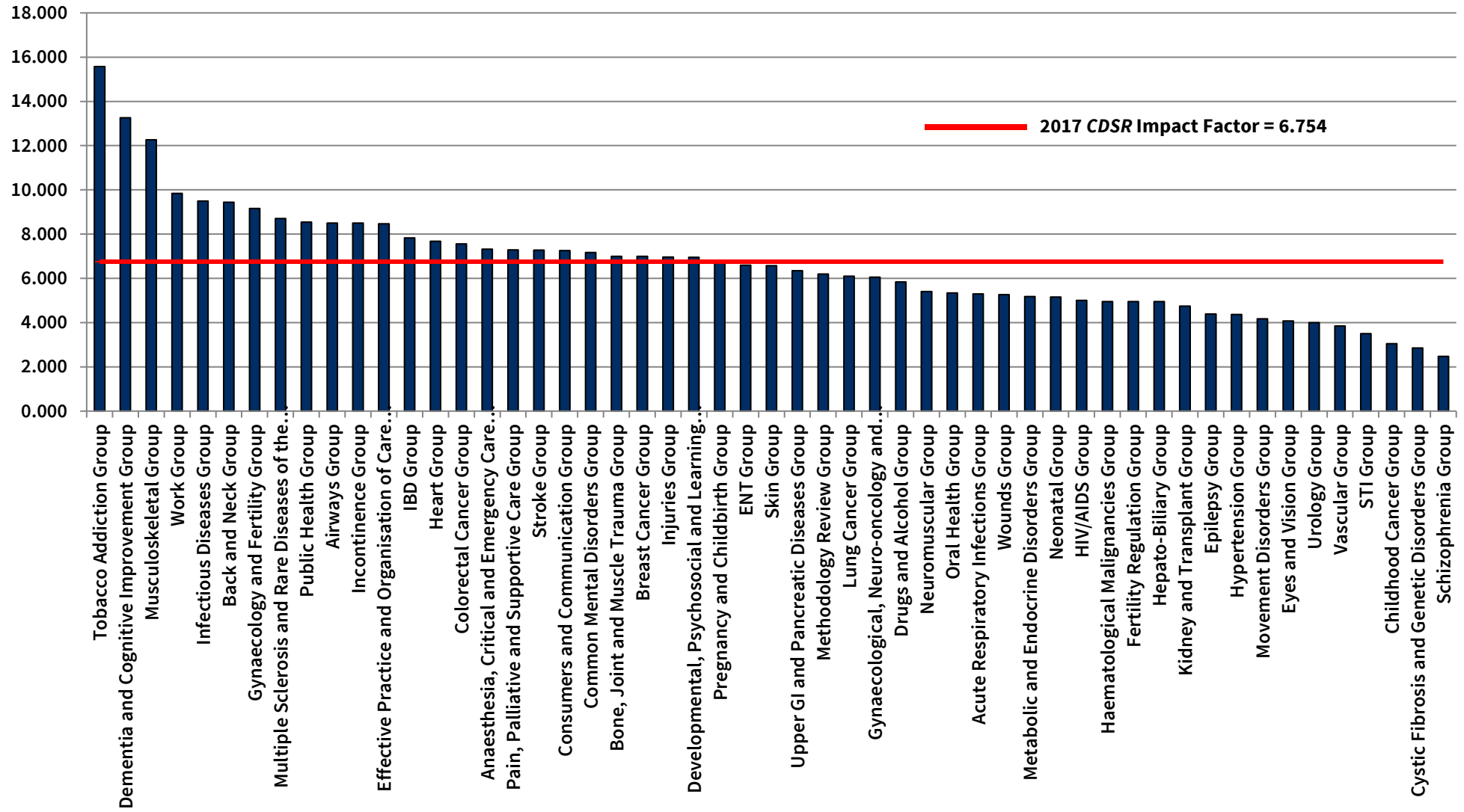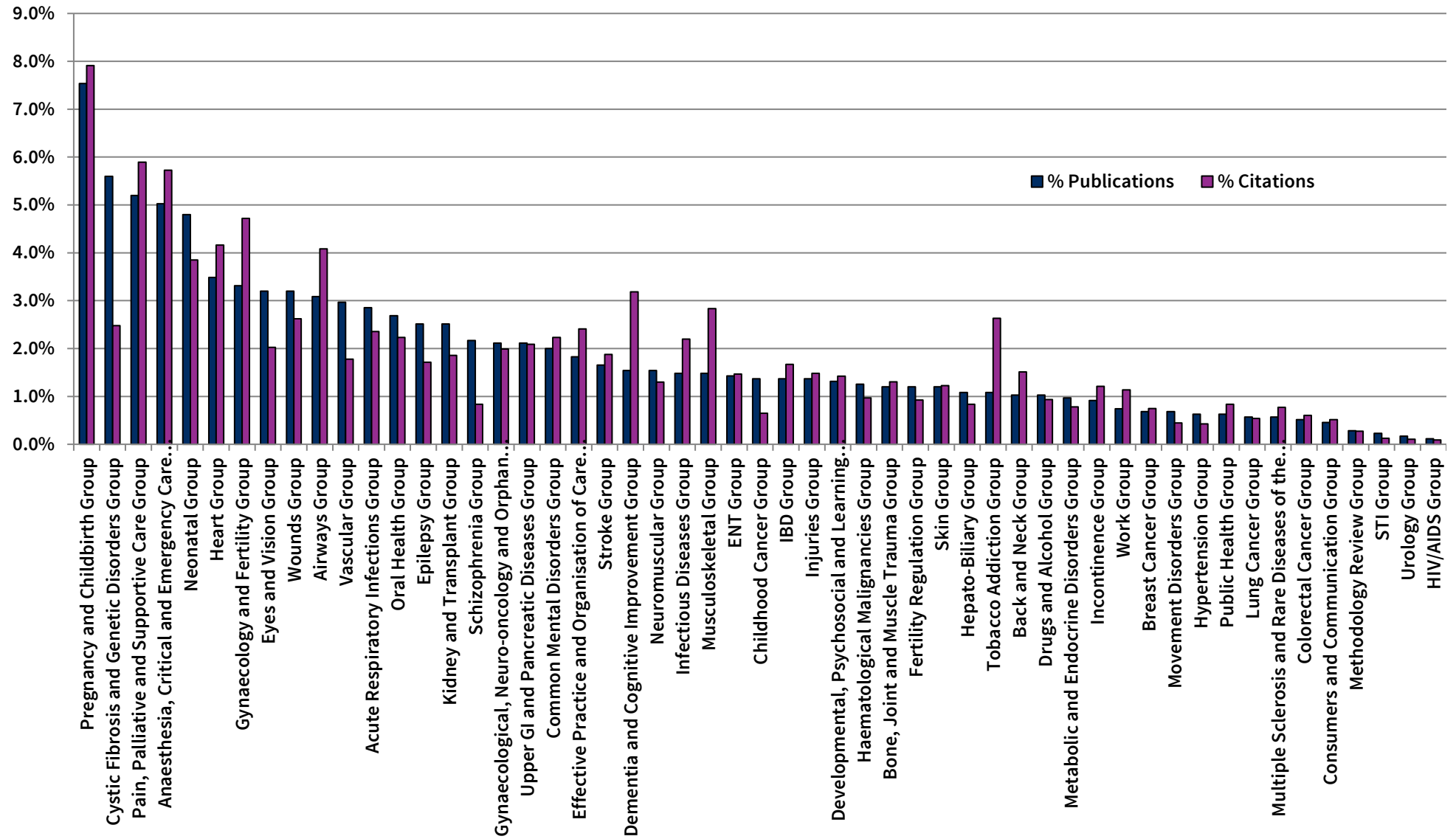
Figure 2: % Publications (blue) and % Citations (purple) of *CDSR* for each CRG (in order of percentage of publications

3. How the Work Group Impact Factor compares with that of journals publishing in the same category:

We have compared the CRG data with journals in the relevant Journal Citation Reports subject categories. The journal with the top Impact Factor in the category is not always directly comparable – either because of the scope of the journal, or the number of reviews published. Please contact Tony Aburrow (taburrow@wiley.com), if you would like to compare your group's Impact Factor to journals other than those included in the table below.

CRG	Category (Median IF)	IF of journal ranked 10th in the category	Highest ranked journal by IF
Work Group	Public, Environmental & Occupational Health	JOURNAL OF EPIDEMIOLOGY AND COMMUNITY HEALTH	Lancet Global Health
9.846	1.589	3.973	18.705

4. How the citation data compare to Wiley Online Library usage data:

When considering the usage data presented below, please be aware of the following:

- A proportion of full text downloads cannot be associated with an individual Cochrane Review so the usage data included in this report is an underestimate of overall usage activity.

- Only usage activity related to Cochrane Systematic Reviews hosted on the Wiley Online Library platform is included in this report. The report does not include usage activity related to Cochrane Systematic Reviews hosted on third-party platforms.

The ten most accessed Cochrane Systematic Reviews from the Work Group in 2017 were:

CD Number	Review Title	Full text downloads
CD002892.pub5	Preventing occupational stress in healthcare workers	10,865
CD010912.pub3	Workplace interventions for reducing sitting at work	4,968
CD009778.pub2	Interventions for prevention of bullying in the workplace	3,077
CD006237.pub3	Interventions to improve return to work in depressed people	2,764
CD011621.pub2	Personal protective equipment for preventing highly infectious diseases due to exposure to contaminated body fluids in healthcare staff	2,581
CD010306.pub2	Organisational interventions for improving wellbeing and reducing work-related stress in teachers	2,580
CD006955.pub3	Workplace interventions to prevent work disability in workers on sick leave	2,316
CD007569.pub3	Interventions to enhance return-to-work for cancer patients	2,057
CD009209.pub2	Workplace pedometer interventions for increasing physical activity	1,904
CD009776.pub2	Pharmacological interventions for sleepiness and sleep disturbances caused by shift work	1,751

The 2017 access data for all Work Group Reviews is provided in the accompanying Excel file.

5. How the usage of Work Group reviews compares to usage of reviews published by other Cochrane Review Groups:

Figure 3 shows the average number of full text downloads per review as accessed via Wiley Online Library during 2017 (regardless of publication date). Figure 4 shows the number of publications and full text downloads for each CRG as a percentage of the *CDSR*.

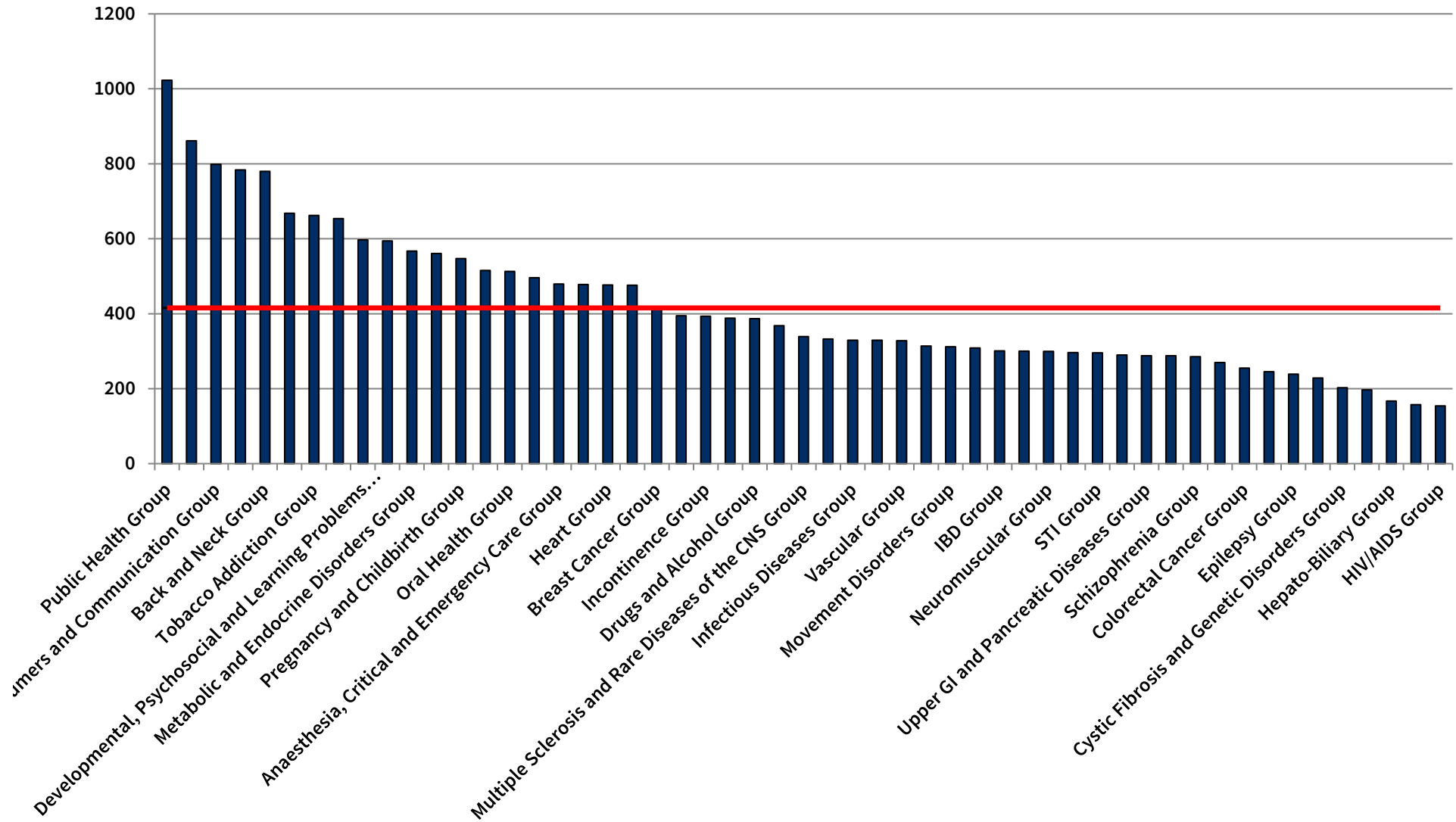**Figure 3: Average number of full-text downloads received by Cochrane Review Groups in 2017**
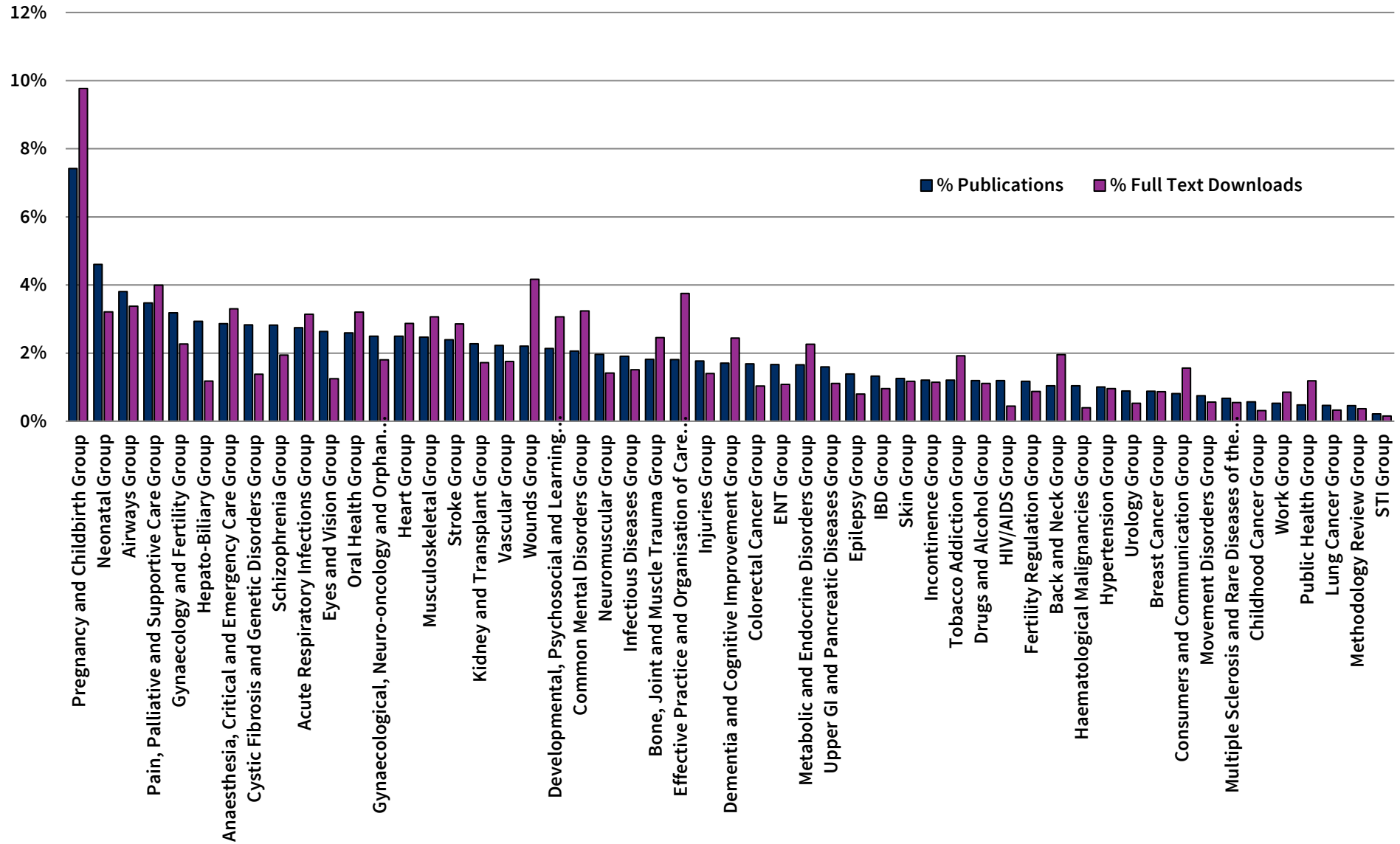
Figure 4: % Publications (blue) and % Full Text Downloads (purple) of *CDSR* for each CRG (in order of percentage of publications)

6.   Alternative Metrics

Using the Altmetric system (http://www.altmetric.com/), we are able to report on further measures of the impact of Cochrane Reviews beyond cites and usage. Altmetric have created a cluster of servers that watch social media sites, newspapers, government policy documents and other sources for mentions of scholarly articles.

The Altmetric Attention Score is a quantitative measure of the attention that a scholarly article has received. It is derived from three main Factors:

Volume - The score for an article rises as more people mention it.
Sources - Each category of mention contributes a different base amount to the final score. Further information including a breakdown of sources can be found at www.altmetric.com/about-our-data/the-donut-and-score/.
Authors - How often the author of each mention talks about scholarly articles influences the contribution of the mention.

The unique Altmetric Attention Score is available on the abstract page of every Cochrane Review that has achieved a score of one or above.

Altmetric has tracked mentions of 9,179 articles from the *CDSR* up to August 2018.

The highest Altmetric Attention Scores from Cochrane Reviews published by the Work Group in 2017 (scores retrieved 20th August 2018) were:

Score	Review Title	T	F	N	M
69	Interventions for prevention of bullying in the workplace	123	8	0	120
45	Interventions for obtaining and maintaining employment in adults with severe mental illness, a network meta-analysis	93	12	0	82
23	Interventions to prevent occupational noise-induced hearing loss.	19	6	0	21
18	Computer-based versus in-person interventions for preventing and reducing stress in workers	48	2	0	50
16	Return-to-work coordination programmes for improving return to work in workers on sick leave	24	2	0	80
14	Devices for preventing percutaneous exposure injuries caused by needles in healthcare personnel	16	3	0	89
9	Vocational rehabilitation for enhancing return-to-work in workers with traumatic upper limb injuries	15	2	0	80
9	Cognitive rehabilitation for adults with traumatic brain injury to improve occupational outcomes	16	3	0	47

T=Tweeters F=Facebook walls N=News outlets M=Mendeley readers

Altmetric track 'mentions' from 17 different sources including references in policy documents, citations in Wikipedia pages and discussions on Peer Review sites. Only sources that contributed substantially to the scores of the Cochrane Reviews in the table above have been included.

Additional resources:

- A Frequently Asked Questions document (FAQ) is available from the Cochrane Library website. You can access this document here.

- For further details of Cochrane Reviews in the press, please contact Muriah Umoquit, Communications and Analytics Officer at Cochrane mumoquit@cochrane.org.

- If you have any queries regarding the data presented in this report, please contact Tony Aburrow, Cochrane Editor at Wiley (taburrow@wiley.com).