

## BÖLÜM 13

# SİSTEMATİK DERLEME VE META-ANALİZLER (PRISMA)

Gülsüm ÖZTÜRK EMİRAL<sup>1</sup>

## GİRİŞ

Kanita dayalı tıp (KDT), sistematik ve geçerli tıbbi araştırmalarla elde edilmiş kanıtların, hastanın değerleri-düşünceleri, sağlık profesyonellerinin tecrübeleri ile harmanlanarak karar verme sürecini optimize eden tıbbi uygulamalardır. KDT, meta-analiz, sistematik derleme, randomize kontrollü araştırmalar gibi çalışmalardan elde edilen yüksek kalitede kanıtların öncülüğünde bireysel tıbbi kararlar verme süreci ile başlamakta olup, verilen kararları mantıklı, şeffaf ve nesnel hale getirerek daha güvenli, daha iyi ve maliyet-etkin sağlık hizmeti sunulmasına yardımcı olmaktadır (1, 2). Beş basamaktan (sormak, en iyi kanıtın bulunması, kanıtın değerlendirilmesi, karar verip uygulanması ve etki-perfonmasın değerlendirilmesi) oluşan KDT'nin, 2. ve 3. basamağında yoğun bir literatür taramak, en geçerli, güncel kanıtı bulmak ve bulunan kanının kullanılabilirliğini sorgulamak gerekmektedir (3, 4).

Günümüzde hem araştırma sayılarının artması hem de internet kullanımının yaygınlaşması gibi nedenlerden dolayı kanıtlara ulaşım hızlanmıştır. Ancak günlük pratikte mevcut sorunlara ait tüm birincil yayınların takip edilmesi pek mümkün değildir. Bu nedenle aynı konuda yapılan araştırmaları inceleyerek oluşturulan sistematik derleme, meta-analiz gibi ikincil bilgi kaynakları oluşturmaktadır (4).

Sistematik derleme ve meta analiz çalışmaları araştırma sonuçlarının sentezlendiği, kanıtların doğru ve güvenilir şekilde özettendiği bilimsel, kantitatif araştırmalardır. Bu araştırmalarda iyi tanımlanmış bir soruya/problemı ele alarak, şeffaf, güncel ve tekrarlanabilir olmak amaçlanmaktadır. Sistematik derleme, meta-analiz süreci;

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