

Cochrane Rehabilitation: 2024 Annual Report

Irene Battel¹, Stefano Negrini², Chiara Arienti³, Claudio Cordani², Matteo J Del Furia^{1,2,4},
Francesca Gimigliano⁴, Stefano G Lazzarini^{5,6}, Sara Liguori^{4,7}, Carlote Kiekens²,
Cochrane Rehabilitation Advisory Committee†

¹Department of Biomedical, Surgical and Dental Sciences, University of Milan, Milan, Italy

²IRCCS Galeazzi Sant'Ambrogio Hospital, Milan, Italy

³Department of Biomedical Sciences, Humanitas University, Clinical Epidemiology and Research Center, Pieve Emanuele, Milan, Italy

⁴Department of Mental and Physical Health and Preventive Medicine, University of Campania Luigi Vanvitelli, Naples, Italy

⁵Department of Statistics and Quantitative Methods, University of Milano-Bicocca, Milan, Italy

⁶IRCCS Fondazione Don Carlo Gnocchi, Milan, Italy

⁷Department of Medical and Surgical Specialties and Dentistry, University of Campania "Luigi Vanvitelli", Naples, Italy

Abstract

Cochrane Rehabilitation continues to promote evidence dissemination and research quality in rehabilitation. The year 2024 marked a pivotal milestone with the transition from a Field to a Thematic Group, officially named "Cochrane Rehabilitation, Functioning, and Disability." This evolution broadens the scope to additional rehabilitation domains and strengthens global collaboration. Key activities included the production of clinically relevant evidence (with 21 new Cochrane Corners), the development of methodological and educational projects such as the General Index of Rehabilitation Knowledge and the ISPRM 2024 course, and the establishment of strategic collaborations, including a joint initiative with the World Health Organization to synthesize evidence in health policy and systems research. The Thematic Group structure introduces a unit-based organization to enhance global impact in evidence generation and implementation, with a mission centered on inclusivity, scientific rigor, and relevance across diverse contexts.

Keywords: Evidence-based practice, knowledge translation, rehabilitation.

In 2024, Cochrane Rehabilitation achieved a notable progress in advancing evidence-based rehabilitation practices. An application was submitted to establish a Cochrane Thematic Group entitled "Cochrane Rehabilitation, Functioning, and Disability," which was approved on September 9, 2024. The transition from a Field to a Thematic Group was undertaken to broaden the scope to additional domains of rehabilitation and to expand global membership. The newly

established Thematic Group will play a pivotal role in advancing the fields of rehabilitation, functioning and disability within the Cochrane Collaboration, assisting the Central Editorial Service, and collaborating with Evidence Syntheses Units to create and disseminate clinically relevant and accessible evidence on these topics.

We continued to advance ongoing projects such as the BE4Rehab project, GUIDE-Rehab, the Cochrane Rehabilitation Ebook and the publication

Submitted: January 31, 2026

Accepted: February 05, 2026

Published: February 24, 2026

Correspondence: Claudio Cordani. PhD. IRCCS Ospedale Galeazzi Sant'Ambrogio, Via C. Belgioioso 173, 20157 Milan, Italy.

E-mail: claudio.cordani@grupposandonato.it

Doi: <https://doi.org/10.5606/archisprm.2026.9>

† Cochrane Rehabilitation Advisory Committee members are listed in the Acknowledgements section.

Citation:

Battel I, Negrini S, Arienti C, Cordani C, Del Furia MJ, Gimigliano F, et al. Cochrane Rehabilitation: 2024 Annual Report. Arch ISPRM 2026;1(1):1-6. <https://doi.org/10.5606/archisprm.2026.9>.

© 2026 Archives of ISPRM. This is an Open Access article distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 International License (CC BY-NC 4.0), which permits non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited. To view a copy of this license, visit: <https://creativecommons.org/licenses/by-nc/4.0/>

of the results of the 5th methodological meeting which was held in September 2023. Moreover, we embarked on a new project in collaboration with the World Health Organization (WHO) on synthesizing existing evidence in health policy and systems research (HPSR) related to rehabilitation. In this report, we provide a comprehensive overview of the activities, publications, and projects completed or ongoing during the year 2024.

KNOWLEDGE TRANSLATION ACTIVITIES

Cochrane Corners

Cochrane Rehabilitation has established partnerships with seven leading journals for the production of Cochrane Corners (<https://rehabilitation.cochrane.org/about-and-contacts/partners/journals>). In 2024, 21 Cochrane Corners were published, bringing the total to 206 since the initiative began (<https://rehabilitation.cochrane.org/resources/publications/cochrane-corners>).

Blogshots and Translations

We produced 21 blogshots in English, of which 19 were translated into different languages. (<https://rehabilitation.cochrane.org/resources/blogshots>).

Newsletter, social media and website

The Cochrane Rehabilitation newsletter has been continuing to serve as a fundamental communication channel. In 2024, 11 monthly newsletters were submitted, with 1,569 subscribers. The average Open Rate was 30%, while the average Click Rate was 24%. Social media platforms experienced growth in their number of followers. Facebook had 3,549 followers (+0.80%), Instagram 3,941 followers (+11.71%), Twitter/X 3,143 followers (+0.29%), while LinkedIn had 3,962 followers (+ 38.73%).

Congresses

At the Global Evidence Summit 2024, Cochrane Rehabilitation provided a substantial contribution, delivering five oral presentations and presenting four posters highlighting the work of its members. The Global Evidence Summit is a key platform for advancing

evidence-based rehabilitation and fostering collaboration worldwide across various evidence organizations. At the 29th Annual Rehabilitation in Multiple Sclerosis (RIMS) Conference, Director Stefano Negrini presented a lecture on “A Road Map Toward Improving Evidence Production in Rehabilitation”. Our Co-director Carlotte Kiekens had the honor of giving the International Spinal Cord Society (ISCoS) lecture at the 63rd ISCoS meeting in which she extensively highlighted the importance of evidence and the role of Cochrane Rehabilitation, focused on spinal cord injury.

EDUCATION

At the 18th World Congress of the International Society of Physical and Rehabilitation Medicine (ISPRM) 2024 in Sydney, Cochrane Rehabilitation organized the “Cochrane Rehabilitation Evidence-Based Course 2024.” This course was designed to provide practical insights into evidence-based practice, integrating Cochrane evidence, expert perspectives, and patient values. The program covered five key health conditions included in the WHO Package of Interventions for Rehabilitation: Low Back Pain, Sarcopenia, Spinal Cord Injury, Stroke, and Traumatic Brain Injury. In addition, William Levack and Farooq Azam Rathore conducted a 1-hour workshop on How to Write and Publish a Systematic Review. The course as well as the workshop were very well-attended sessions.

METHODOLOGICAL ACTIVITIES

5th Cochrane Rehabilitation Methodological Meeting

The 5th Cochrane Rehabilitation Methodological Meeting (5CRMM), which was held in September 2023, focused on strengthening research methodologies in rehabilitation.^[1-5]

Discussions emphasized the role of Single-Case Experimental Designs (SCEDs) in evaluating individualized interventions for rare conditions, as well as the need for enhanced methodological rigor in the assessment of complex rehabilitation treatments. Participants also explored target trial emulation, a novel approach to drawing causal inferences from

observational data, and examined how bias in randomized-controlled trials can distort effect estimates, emphasizing the importance of robust study designs. The insights gained are guiding Cochrane Rehabilitation's evidence synthesis strategies, supporting the generation of more reliable and practice-relevant research for clinical decision-making.

COLLABORATION WITH WHO

Lumbar Braces and Other Assistive Devices for Treatment of Chronic Low Back Pain: A Cochrane Systematic Review

In July 2024, after collaborating with the WHO in the production of the “WHO guideline for non-surgical management of chronic primary low back pain in adults in primary and community care settings”, we published a protocol for a Cochrane Systematic Review on “Lumbar Braces and Other Assistive Devices for Treatment of Chronic Low Back Pain”.^[6] The aim is to evaluate the benefits and potential harms of various assistive technologies, including non-rigid and rigid lumbar braces, belts, supports, and devices designed to aid mobility and gait, in improving pain and function, thereby reducing disability in adults suffering from chronic low back pain. The review seeks to provide high-quality evidence to inform clinical practice and guide healthcare professionals in selecting appropriate interventions for managing this highly prevalent condition.

Health Policy and Systems Research Project

Cochrane Rehabilitation, in collaboration with the WHO Rehabilitation Program, has developed a protocol to produce four Cochrane Overviews of systematic reviews in response to the Rehabilitation 2030 initiative and the first-ever resolution on “Strengthening Rehabilitation in Health Systems” unanimously adopted by the 76th World Health Assembly in May 2023. These reviews focus on the four key pillars of HPSR, as outlined in the Cochrane Effective Practice and Organization of Care (EPOC) taxonomy:

- **Delivery arrangements:** Investigating how, when, and where rehabilitation services are organized and delivered and who delivers them.

- **Financial arrangements:** Exploring how funds are collected, insurance schemes, how services are purchased, and using targeted financial incentives or disincentives.
- **Governance arrangements:** Examining rules and processes that define authority, accountability, openness, participation, and coherence.
- **Implementation strategies:** Identifying interventions designed to bring about changes in healthcare organizations, the behavior of healthcare professionals, or healthcare recipients' use of health services.

The protocol, approved by the Cochrane Central Editorial Service and recently published in the *European Journal of Physical and Rehabilitation Medicine*,^[7] offers the strategic roadmap for synthesizing evidence in these critical areas. The project's results are expected to assist policymakers and other stakeholders develop strategies to address challenges and improve access, quality, and outcomes of rehabilitation services through research and evidence-based health policy development. This collaboration represents a significant milestone in strengthening rehabilitation's role within health systems, aligning with global efforts to ensure equitable access to high-quality care for those in need. Six units of the new Cochrane Thematic group are involved in the project: Milan University (Milan, IT), Galeazzi - Sant'Ambrogio Hospital (Milan, IT), CERC - Humanitas University (Milan, IT), Vanvitelli University (Naples, IT), Lucerne University (Lucerne, CH), and IDRR, Ontario Tech University (Toronto, CA).

World Rehabilitation Alliance (WRA)

The WRA is a WHO global network of stakeholders whose mission is to support the implementation of the Rehabilitation 2030 Initiative through advocacy activities. Cochrane Rehabilitation has representatives in the workforce, research and external relations workstream. We endorsed the WRA Position Statement on the Importance of Investing in Quality Rehabilitation Education and Training (<https://www.who.int/initiatives/world-rehabilitation-alliance/research>).

Best Evidence for Rehabilitation-BE4Rehab project

A Cochrane evidence map has been created for 14 out of the 20 health conditions outlined in the WHO's Package of Interventions for Rehabilitation, for which two more papers were published on People with Ischemic Heart Disease and Individuals with Upper Limb Fractures.

Navigating evidence in rehabilitation: From the Ebook Project to the production of overviews of systematic reviews

Cochrane Rehabilitation introduced the General Index of Rehabilitation Knowledge, a comprehensive indexing system designed to structure and classify rehabilitation knowledge systematically.^[8] Developed through a global Delphi consensus process, the index is a navigational tool offering a standardized framework to organize and locate relevant evidence within Cochrane Systematic Reviews and other rehabilitation resources.

- The index is structured to reflect the multiprofessional and interdisciplinary nature of rehabilitation, encompassing key domains such as musculoskeletal, neurological, cardiovascular, and pediatric rehabilitation, as well as rehabilitation management and preventive strategies. By providing a clear and shared taxonomy, it aims to streamline knowledge organization, enhance accessibility, and support the development of future educational and research initiatives in the field of rehabilitation.

The Guideline for Intervention Description in Rehabilitation (GUIDE-Rehab) to improve intervention reporting in rehabilitation project

The GUIDE-Rehab is a reporting guideline designed to enhance the quality of reporting in rehabilitation research and is applicable to any study design. It aims to promote more accurate, transparent, and comprehensive descriptions of interventions for rehabilitation. The methodology consisted of Delphi rounds and consensus meetings. The final version is currently under review.

Evidence Synthesis

In 2024, two Cochrane Systematic Review (CSR) protocols were published:

1. Lumbar Braces and Other Assistive Devices for the Treatment of Chronic Low Back Pain – This review, previously described, explores the effectiveness of lumbar braces and assistive devices in managing chronic low back pain.^[6]
2. Rehabilitation Interventions for Oropharyngeal Dysphagia in People with Parkinson's Disease – This review aims to evaluate the effectiveness of swallowing rehabilitation interventions in improving swallowing safety and efficiency for individuals with Parkinson's Disease.^[9]

THE NEW THEMATIC GROUP

One of the most significant developments in 2024 was the transition of Cochrane Rehabilitation from a Field to a Thematic Group, now officially known as Cochrane Rehabilitation, Functioning, and Disability. This transition represents a pivotal step in integrating rehabilitation within global health systems, underscoring the growing recognition of functioning and disability as central to health management.

Strategic reorganization for global impact

Cochrane's reorganization reflects a strategic shift to enhance the quality and relevance of health research. The new Thematic Group fosters global collaboration among leading researchers and practitioners. Under the leadership of Stefano Negrini from the University of Milan, Italy, the Cochrane Rehabilitation, Functioning, and Disability Thematic Group (abbreviated as CochraneRehab) prepared to generate high-impact evidence syntheses which address pressing health needs, particularly for populations living with disabilities. The new structure introduces "Units," each managed by a Chair and Vice-chair and tasked with defining targeted action plans aligned with the Group's overarching goals. A Director and Board of Chairs lead the Group. The vision of the Thematic Group is a world where the best available

evidence informs rehabilitation, treatment, and health policy and systems decisions regarding the health and functioning of people experiencing disability. Therefore, Cochrane Rehab's mission is to support the improvement of the health and functioning of people experiencing disability with a global perspective across professions, cultures, languages and economic resources by (1) enhancing evidence production and synthesis, particularly in rehabilitation, also by introducing functioning as the third health indicator alongside mortality and morbidity; (2) facilitating evidence implementation through knowledge translation, including education and training; (3) promoting evidence-based practices integrating evidence with professional expertise and patient values.

In conclusion, 2024 was a landmark year for Cochrane Rehabilitation, characterized by substantial progress in expanding its reach and influence within the field of evidence-based rehabilitation. The establishment of the Thematic Group Cochrane Rehabilitation, Functioning, and Disability represents a key step in broadening global engagement and enhancing collaborative efforts. We remain dedicated to generating and disseminating high-quality evidence to improve rehabilitation practices worldwide, building on our ongoing initiatives and partnerships, particularly with the WHO. This report highlights our achievements and lays the foundation for continued growth and innovation in the years ahead.

Declaration of Conflicting Interests

The authors declare that there are no conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding

This paper was supported and funded by the Italian Ministry of Health - Ricerca Corrente

Author Contributions

All authors contributed equally to this article.

Data Availability

The datasets generated and/or analyzed during the current study are available from the corresponding author on reasonable request.

Acknowledgements

Cochrane Rehabilitation Advisory Committee members:

Pierre Côté, Frane Grubišić, Tracey Howe, Elena Ilieva, William Levack, Thorsten Meyer-Feil, Silvia Minozzi, Aydan

Oral, Farooq A Rathore, Hans Rietman, Geert Verheyden, Mauro Zampolini.

AI Disclosure

The authors declare that artificial intelligence (AI) tools were not used, or were used solely for language editing, and had no role in data analysis, interpretation, or the formulation of conclusions. All scientific content, data interpretation, and conclusions are the sole responsibility of the authors. The authors further confirm that AI tools were not used to generate, fabricate, or 'hallucinate' references, and that all references have been carefully verified for accuracy.

REFERENCES

1. Machalicek W, Gross DP, Armijo-Olivo S, Ferriero G, Kiekens C, Martin R, et al. The role of single case experimental designs in evidence creation in rehabilitation. *Eur J Phys Rehabil Med* 2024;60:1100-11. doi: 10.23736/S1973-9087.24.08713-6.
2. Levack WM, Gross DP, Martin RA, Every-Palmer S, Kiekens C, Cordani C, et al. Designing studies and reviews to produce informative, trustworthy evidence about complex interventions in rehabilitation: A narrative review and commentary. *Eur J Phys Rehabil Med* 2024;60:1088-99. doi: 10.23736/S1973-9087.24.08459-4.
3. Côté P, Negrini S, Donzelli S, Kiekens C, Arienti C, Ceravolo MG, et al. Introduction to target trial emulation in rehabilitation: A systematic approach to emulate a randomized controlled trial using observational data. *Eur J Phys Rehabil Med* 2024;60:145-53. doi: 10.23736/S1973-9087.24.08435-1.
4. Negrini S, Kiekens C, Levack WM, Meyer-Feil T, Arienti C, Côté P, et al. Improving the quality of evidence production in rehabilitation. Results of the 5th Cochrane Rehabilitation Methodological Meeting. *Eur J Phys Rehabil Med* 2024;60:130-4. doi: 10.23736/S1973-9087.23.08338-7.
5. Arienti C, Armijo-Olivo S, Ferriero G, Feys P, Hoogeboom T, Kiekens C, et al. The influence of bias in randomized controlled trials on rehabilitation intervention effect estimates: what we have learned from meta-epidemiological studies. *Eur J Phys Rehabil Med* 2024;60:135-44. doi: 10.23736/S1973-9087.23.08310-7.
6. Arienti C, Lazzarini SG, Zaina F, Cordani C, Minozzi S, Kiekens C, et al. Lumbar braces and other assistive devices for treatment of chronic low back pain. *Cochrane Database Syst Rev* 2024;7:CD015492. doi: 10.1002/14651858.CD015492.
7. Negrini S, Kiekens C, Del Furia MJ, Minozzi S, Ryan R, Arienti C, et al. Evidence synthesis of health policy and systems research in rehabilitation: A protocol for Cochrane overviews of systematic reviews on delivery, governance, financial arrangements, and implementation strategies. *Eur J Phys Rehabil Med* 2025;61:335-50. doi: 10.23736/S1973-9087.24.08833-6.

8. Gimigliano F, Moretti A, Lazzarini SG, Pollet J, Arienti C, Ceravolo MG, et al. Navigating rehabilitation: The General Index of rehabilitation knowledge developed by Cochrane rehabilitation through a global interprofessional Delphi process. *Eur J Phys Rehabil Med* 2024;60:1112-5. doi: 10.23736/S1973-9087.24.08734-3.
9. Battel I, Arienti C, Del Furia MJ, Lazzarini SG, Warnecke T, Walshe M. Rehabilitation interventions for oropharyngeal dysphagia in people with Parkinson's disease. *Cochrane Database Syst Rev* 2026;1:CD015816. doi: 10.1002/14651858.CD015816.pub2.