



Annual General Meeting 2025

18 November 2025

09:00-10:00 GMT



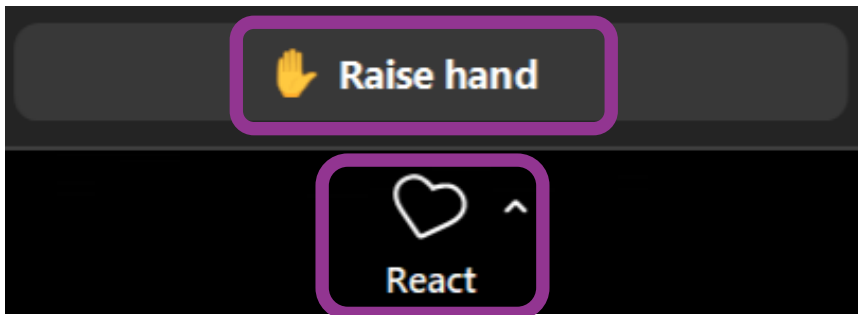
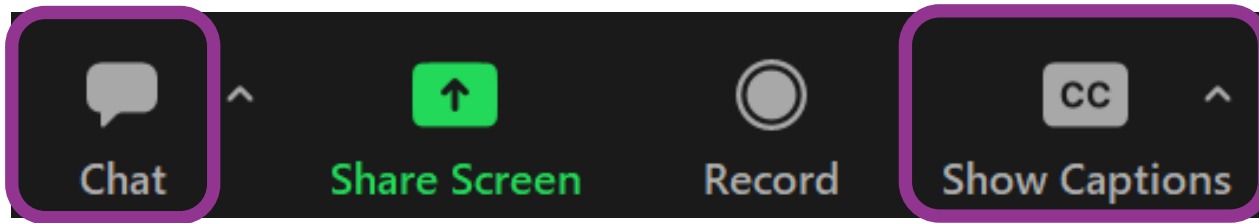
Welcome

**Dr. Susan Phillips,
Governing Board Chair**

Housekeeping

Zoom

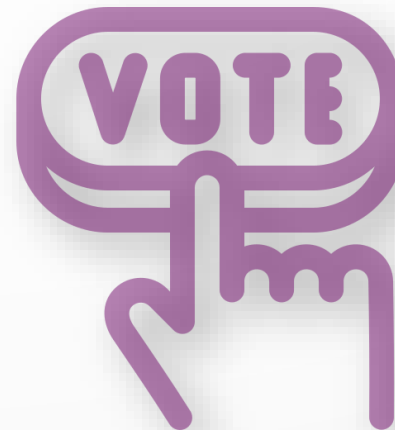
- Your microphone will be muted to prevent background noise
- To turn subtitles on or off, click on **“Show/Hide Captions”**
- To ask a written question, click on **“Chat”** to open the chat box
- To ask a verbal question, click on **“react”**, then **“raise hand”**



Voting

Voting is electronic.

- **Go to agm.cochrane.org and log in to your Cochrane Account to vote on the resolutions.**
- **You can vote at any time during this meeting.**
- **Voting will be closed at the end of the meeting. Results will be confirmed after the award have been announced.**



AGM 2025 agenda

- 1. To approve the minutes of the last AGM**
2. Report from the Chair
3. Report from the Treasurer
- 4. To receive the Annual Report and Finance Statements 2024**
- 5. To appoint the auditor**
6. Report from the Acting Editor in Chief
7. Report from the Chief Executive Officer
8. Members' questions
9. Awards and Prizes
10. Resolutions: result of members' votes
11. Any other business and date of next AGM

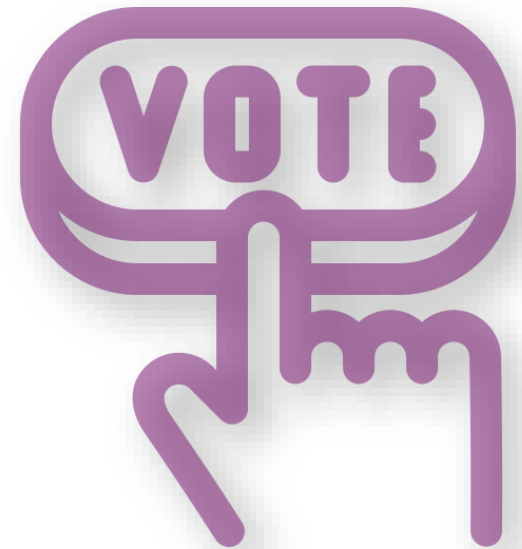


Proposed resolution

**To approve the minutes of the last
Annual General Meeting held in London
on 14 November 2024.**

**Proposed by Susan Phillips
Seconded by Gillian Leng**

[Vote at agm.cochrane.org](https://agm.cochrane.org)



Report from the Chair of the Governing Board

Dr. Susan Phillips





Governing Board developments

- Three new members elected in 2024.
- New Treasurer appointed in December 2024.
- No elections held during 2025.
- Elections will be held in 2026 as two members come to the end of their term.
- Two additional appointed members will be sought next year too.

Thanks to Wendy Levinson who will step down at the end of this year



Appointment of new CEO

- The Governance and Nominations Committee oversaw the process of seeking a new Chief Executive Officer for Cochrane.
- To ensure that the process was robust and transparent we appointed a recruitment consultant to lead the search.
- A large number of candidates expressed interest in the role.
- The interview process included an exercise with a small group of external stakeholders from partner organizations and a session with the Executive Leadership Team as well as formal interviews.

Congratulations to Karla Soares-Weiser our new Chief Executive Officer



Key achievements in 2025

- Implementing the Strategy for a More Evidence-Informed World (2024-2027).
- Deepening Engagement with Cochrane Community.
- Co-leading Global Evidence Synthesis Infrastructure Collaborative (ESIC).
- Balancing 2026 Budget.

The Chief Executive Officer and the Editor in Chief will talk more about our achievements over the last year and also our plans for the future.



Challenges and opportunities ahead

- The Governing Board joined 200 Cochrane leaders in Lisbon on 29 and 30 October 2025.
- The agenda informed by an extensive listening exercise and focused on Community priorities.
- Exciting opportunities and challenges lie ahead as we work together to transform Cochrane.

The Chief Executive Officer will present our future vision





Financial report

Nigel Jones, Treasurer

Our Agenda

01 | 2024 financial results

02 | 2025 financial outlook

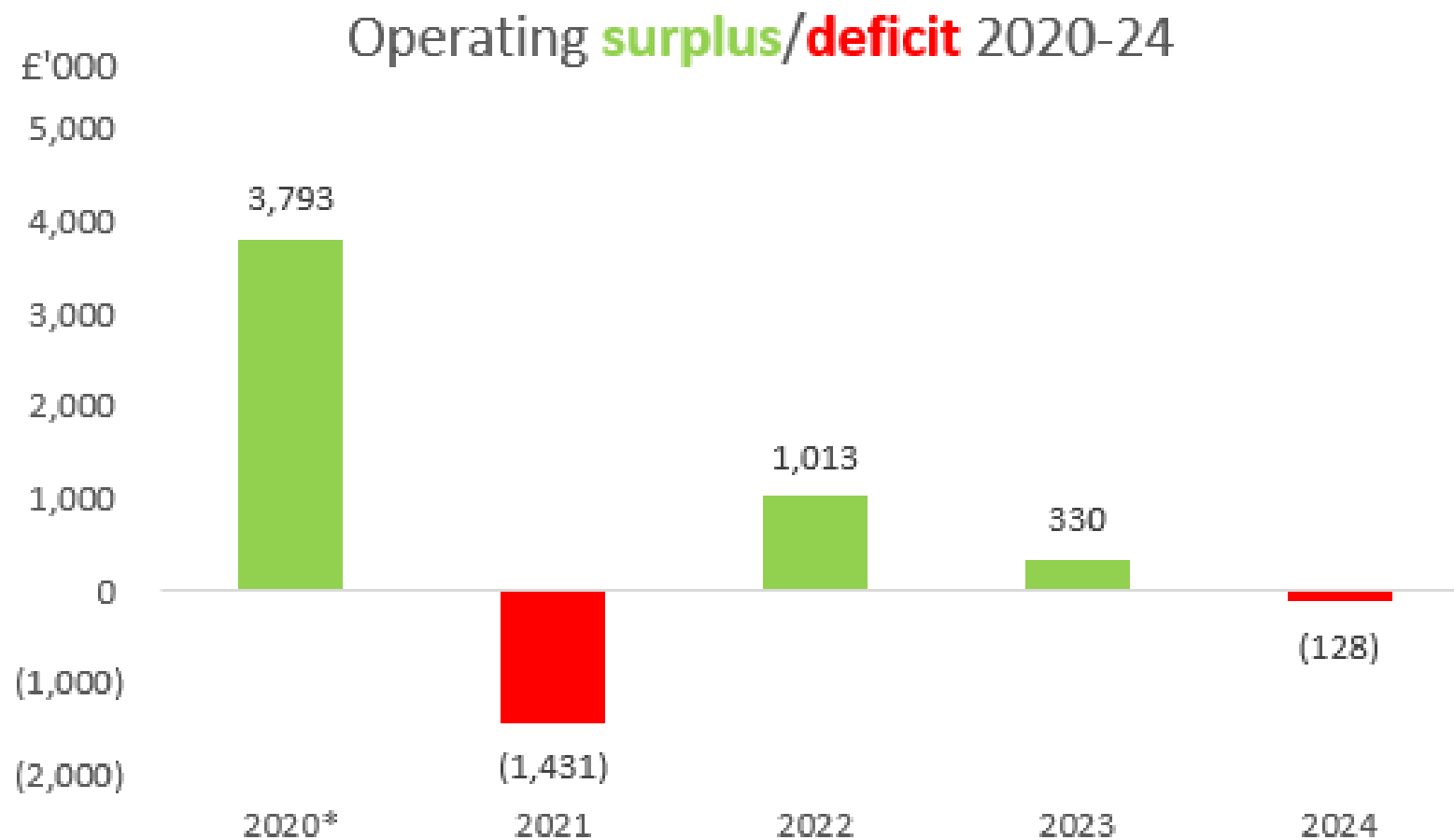
03 | Current & future financial challenges

2024 financial results

£ millions	Actuals		Variance
	2024	2023	
Income	10.5	9.7	0.8
Expenditure	(10.6)	(9.4)	(1.2)
Net income/(spend)	(0.1)	0.3	(0.4)
Total funds	9.8	9.9	(0.1)

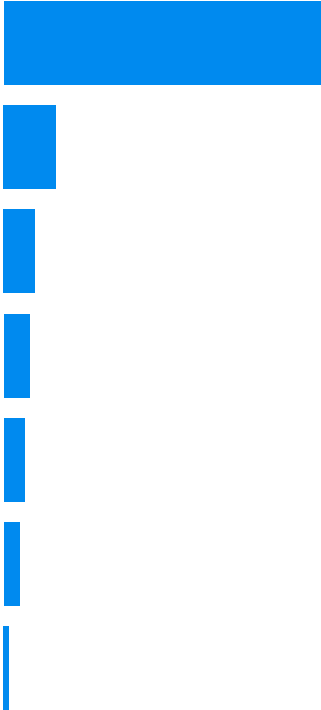
The full statutory accounts can be found at www.cochrane.org

Five-year financial results

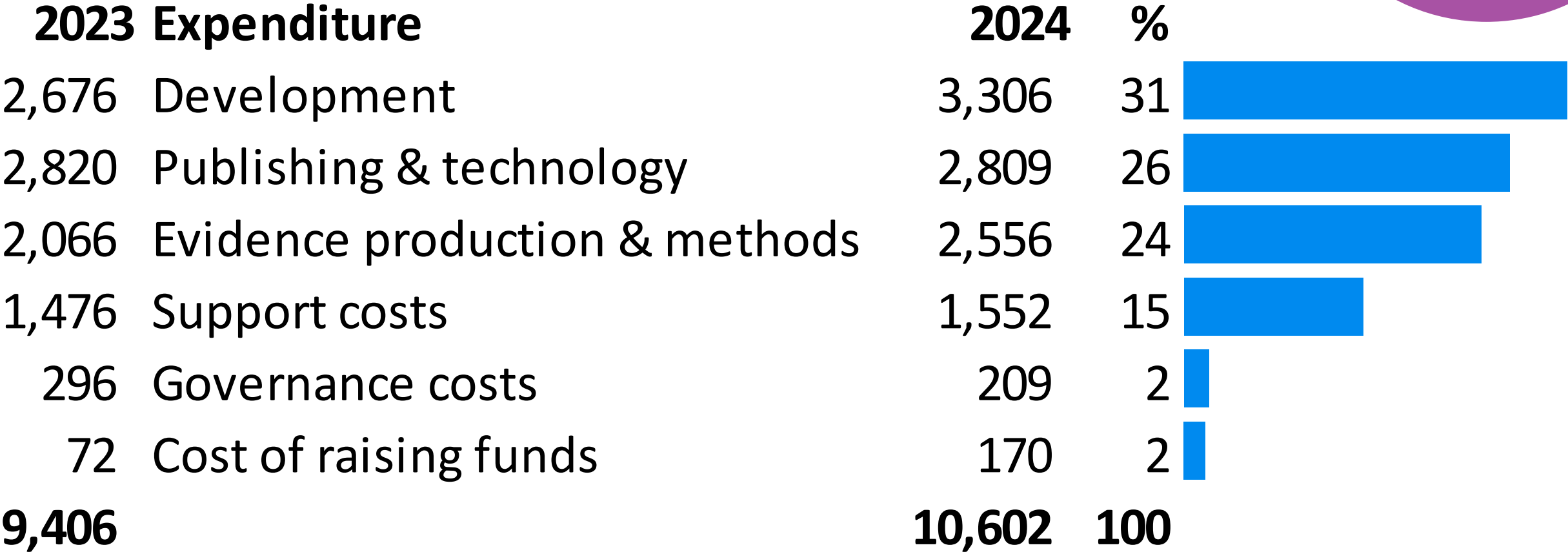


* 2020 included commercial enhancements related to the new Wiley publishing agreement

In 2024, we received £10.5m

2023	Income stream (£'000)	2024	%	
6,973	Cochrane Library income	7,045	67%	
675	Events income	1,199	11%	
655	Other publications income	653	6%	
505	Other Cochrane products	559	5%	
460	Cochrane response	514	5%	
402	Other income	399	4%	
73	Fundraising income	151	1%	
9,743		10,520	100%	

In 2024, we spent £10.6m



Dec 2024 - £9.8m reserves (2023: £9.9m)

Free reserves

£4.8m (2023: £4.3m)

This provides for operational risks and is equivalent to around six months of 2024 operating expenditure

Open access continuity

£3.0m (2023: £3.0m)

To support costs linked to transitioning to an open access model

Restricted funds

£0.2m (2023: £0.1m)

Funds where the restriction is defined by the donor (legal restriction)

Strategic investment fund

£1.8m (2023: £2.5m)

To support costs to diversify income and transform our technology

2025 financial outlook

£ millions	2025 F	2024 A	Variance
Income	11.4	10.5	0.9
Expenditure	(12.2)	(10.6)	(1.6)
Net spend	(0.8)	(0.1)	(0.7)
Total funds	9.0	9.8	(0.8)

F = what is forecast to be spent, A = actual spend.

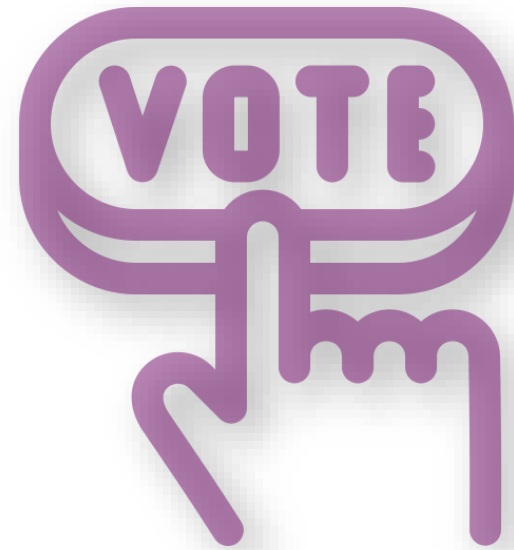
Current & future financial challenges

1. Impact of AI
2. Diversifying income
3. Editorial costs
4. Sustainable cost base

Proposed resolution:

To receive the Trustees' Report and Financial Statements for the year ended 31 December 2024

Proposed by Nigel Jones, seconded by Susan Phillips

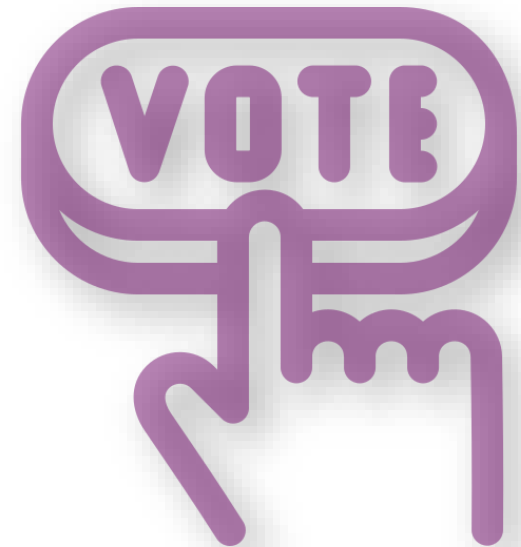


Vote at agm.cochrane.org

Proposed resolution:

*To reappoint Price Bailey as auditor
until the conclusion of the Annual
General Meeting 2026*

Proposed by Nigel Jones, seconded by Susan Phillips



Vote at agm.cochrane.org



Report from the Acting Editor in Chief

Toby Lasserson

Celebrating our impact: Transforming global health and social care through evidence-based research.

The Cochrane Library is your trusted
resource for top-quality, independent
evidence in healthcare decision-
making.
Let's look at the impact from 2024 so
far...



An Impact Factor of

9.4¹



A 5-year Impact Factor of

10.3¹



A CiteScore of

10.2^{1,5}



79,183

citations⁴



6,881

social media mentions
for work published in
2024²



908

mentions in news and blogs²



66%

of WHO accredited guidelines
published in the last 5 years cited at
least 1 Cochrane review^{3,6}



181

countries have full-text access to the Cochrane Library



Cochrane reviews have been read

13,642,027

times on the Cochrane Library⁴



There are more than

54,272

translations of Cochrane review plain language
summaries and/or abstracts⁵



3450

Cochrane Clinical Answers provide a clinically focused
entry point to the evidence in Cochrane reviews



Want to find out more about the Cochrane Library?

Visit: www.cochranelibrary.com

Contacto piel con piel inmediato o temprano para las madres y sus hijos neonatos sanos

✉ Elizabeth R Moore , Kajsa Brimdyr, Anna Blair, Wibke Jonas, Siri Lilliesköld, Kristin Svensson, Azza H Ahmed, Louise R Bastarache, Jeannette T Crenshaw, Elsa R J Giugliani, Julie E Grady, Irena Zakarija-Grkovic, Rukhsana Haider, Rebecca R Hill, Mike Nantamu Kagawa, Scovia N Mbalinda, Jeni Stevens, Yuki Takahashi, Karin Cadwell

Version published: 22 October 2025 Version history

<https://doi.org/10.1002/14651858.CD003519.pub5> 

[Collapse all](#) [Expand all](#)

Resumen

Available in [English](#) | [Español](#) | [فارسی](#) | [Français](#)

Fundamento

Los resultados de la investigación avalan los efectos beneficiosos del contacto inmediato piel con piel (CPP) materno-infantil después de cualquier modalidad de parto sobre la lactancia y la fisiología neonatal, pero se sabe poco acerca de cómo podría influir en la fisiología materna, incluida la pérdida de sangre posparto y el tiempo de desprendimiento placentario. A pesar de los resultados de la revisión Cochrane de 2016 sobre el contacto piel con piel, y aunque la Organización Mundial de la Salud (OMS) y

Systematic review

El primer abrazo: la ciencia revela el poder oculto del contacto piel con piel

Más allá del vínculo afectivo, el contacto inmediato tras el parto regula la fisiología del bebé y es clave para el éxito de la lactancia



≡ EL PAÍS 1 AÑO, 9,90 € 

Salud y Bienestar

LA SALUD VA POR BARRIOS · NUTRIR CON CIENCIA · ENFÓRMATE

PARTOS >

Los beneficios del piel con piel al nacer: favorece la lactancia materna y estabiliza la temperatura y la respiración del bebé


Una revisión científica constata que poner al recién nacido desnudo

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Citations 

Full text views: 10021 

 score 287

Contents

[Resumen](#)

[PICOs](#)

[Resumen en términos sencillos](#)

[Authors' conclusions](#)

[Summary of findings](#)

≡ salud  diario.es 

SERVICIOS DE COMUNICACIÓN

Descubre nuestra agencia especializada en Salud y Ciencia

Portada » Demuestran los beneficios del contacto piel con piel en recién nacidos

INVESTIGACIÓN 

Demuestran los beneficios del contacto piel con piel en recién nacidos

Un análisis de casi 70 trabajos, donde participaron más de 7 000 parejas de madres y bebés, demuestra que el contacto piel con piel tras el nacimiento mejora la lactancia y se relaciona con beneficios en los niveles de glucosa en sangre y la frecuencia cardíaca

≡

serPadres

 BOLETÍN

 » BEBÉ

[BEBÉ](#)

Hallazgo definitivo: el piel con piel tras el parto aumenta un 36% la probabilidad de seguir con lactancia materna exclusiva

Una revisión internacional confirma que el contacto piel con piel inmediato tras el parto potencia la lactancia, mejora la estabilidad del recién nacido y debería ser la norma en todos los hospitales.



WHO
for malaria

13 August 2025

Use of lower-sodium
salt substitutes

WHO guideline

Consolidated guidelines for the
prevention, diagnosis and treatment
of postpartum haemorrhage

WHO recommendations on
management of sickle-cell disease
during pregnancy, childbirth
the interpregnancy period

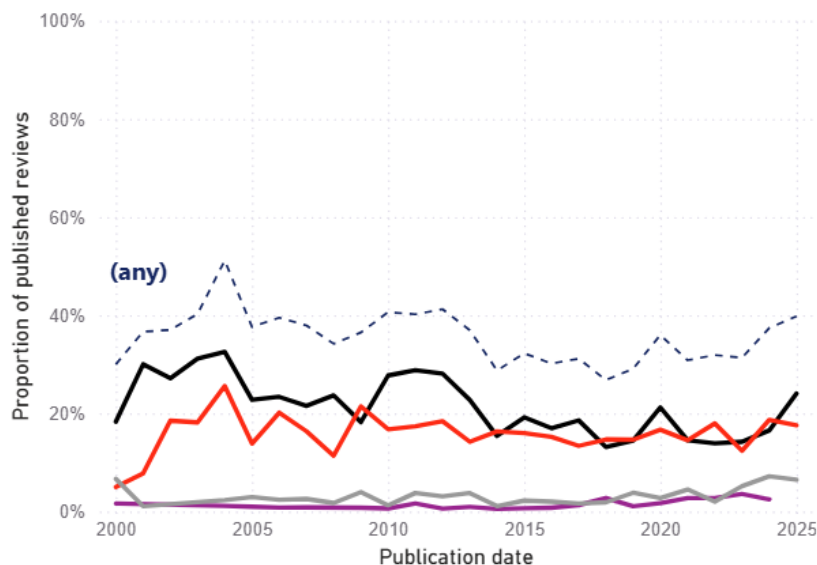
WHO
consolidated
guidelines on
tuberculosis

Module 6: Tuberculosis
and comorbidities

Second edition

WHO guideline
on the prevention and
diagnosis of rheumatoid
fever and rheumatic
heart disease

- Maternal, newborn and child health
- Multiple chronic conditions
- Infectious diseases
- Climate change and sustainability



Interventions for preventing dengue: a mapping review

✉ Leslie Choi, Bruno Guedes Alcoforado Aguiar, Susi Wisniewski, Ana Carolina F Modesto, Luis Phillipe Lopes, Jose Salvador Carrillo, Mariana Del Grossi Moura, Anna Noel-Storr, Roses Parker, Luciane C Lopes

Version published: 02 October 2025 [Version history](#)

<https://doi.org/10.1002/14651858.CD016299>

[Collapse all](#) [Expand all](#)

Abstract

Factors that influence caregivers' and adolescents' views and practices regarding human papillomavirus (HPV) vaccination for adolescents: a qualitative evidence synthesis

✉ Sara Cooper, Bey-Marrié Schmidt, Ngcwalisa A Jama, Jill Ryan, Natalie Leon, Edison J Mavundza, Rosemary J Burnett, Asahngwa Constantine Tanywe, Charles S Wiysonge [Authors' declarations of interest](#)

Version published: 15 April 2025 [Version history](#)

<https://doi.org/10.1002/14651858.CD013430.pub2>

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Abstract

Available in [English](#) | [Español](#) | [فارسی](#) | [Français](#) | [한국어](#)

Background

Human papillomavirus (HPV) vaccination in adolescents provides a powerful tool for preventing cervical

Review language : English

Title Abstract

Interventions for preventing falls in older people in care facilities

✉ Suzanne M Dyer, Wing S Kwok, Jenni Suen, Rik Dawson, Dylan Kneale, Katy Sutcliffe, Lotta J Seppala, Keith D Hill, Ngaire Kerse, Geoffrey R Murray, Nathalie van der Velde, Catherine Sherrington, Ian D Cameron

Version published: 20 August 2025 [Version history](#)

<https://doi.org/10.1002/14651858.CD016064>

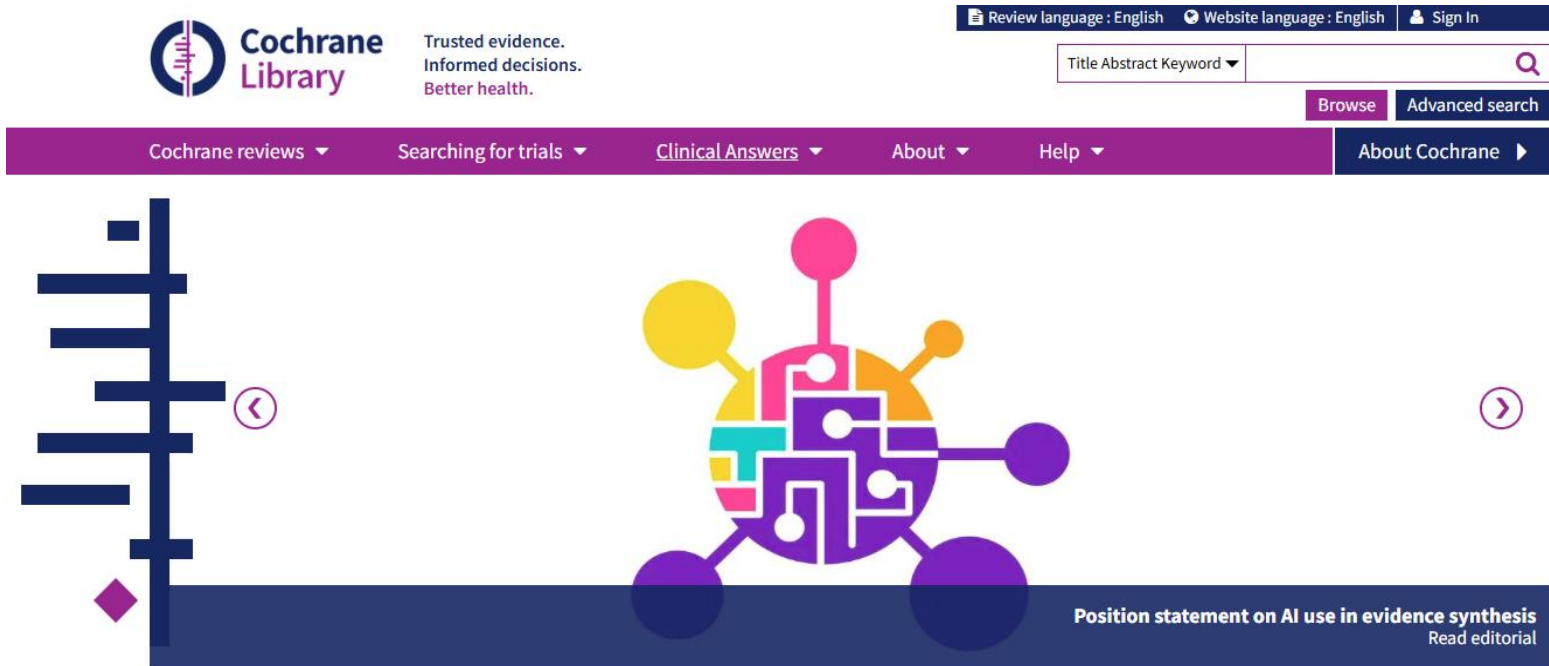
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Abstract

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Rationale

New Cochrane Library Homepage



Engage instantly

Click through up to high-impact news topics with links to review content and other **resources**

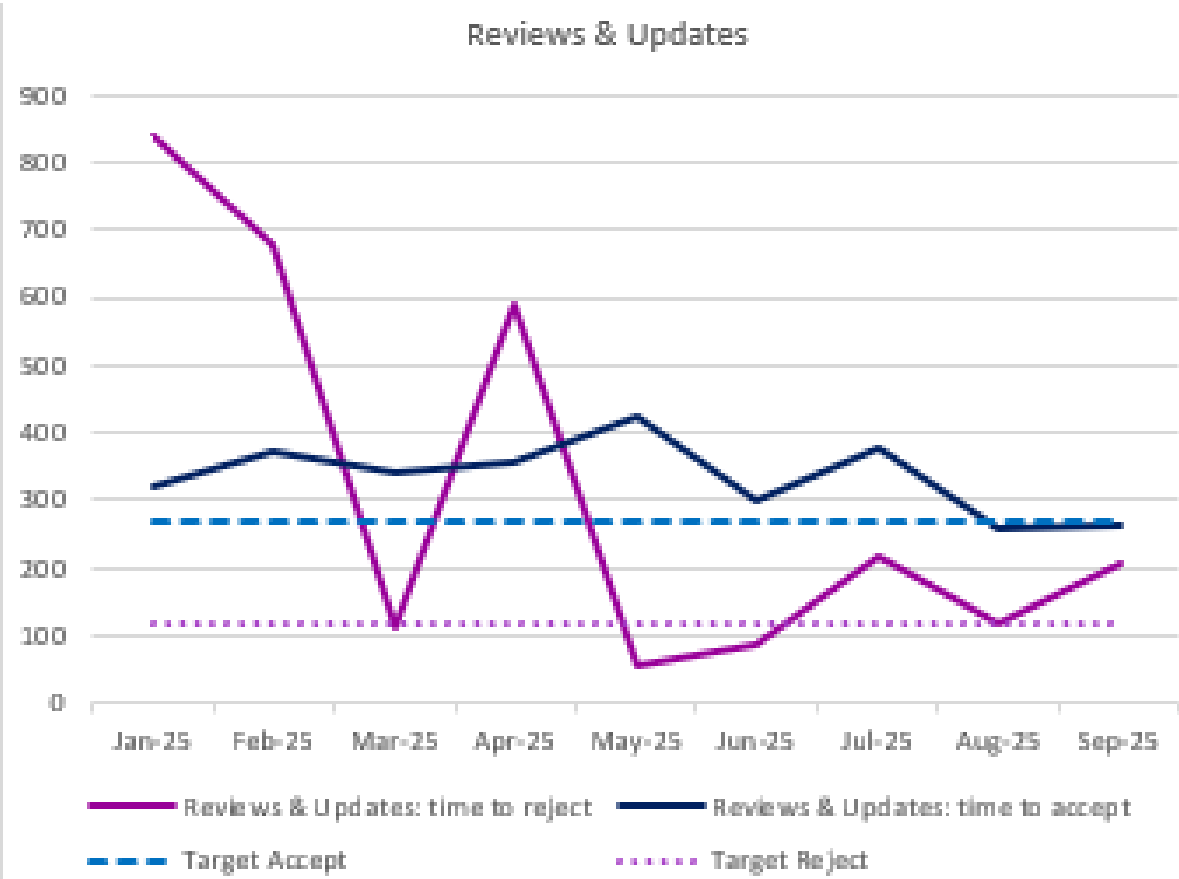
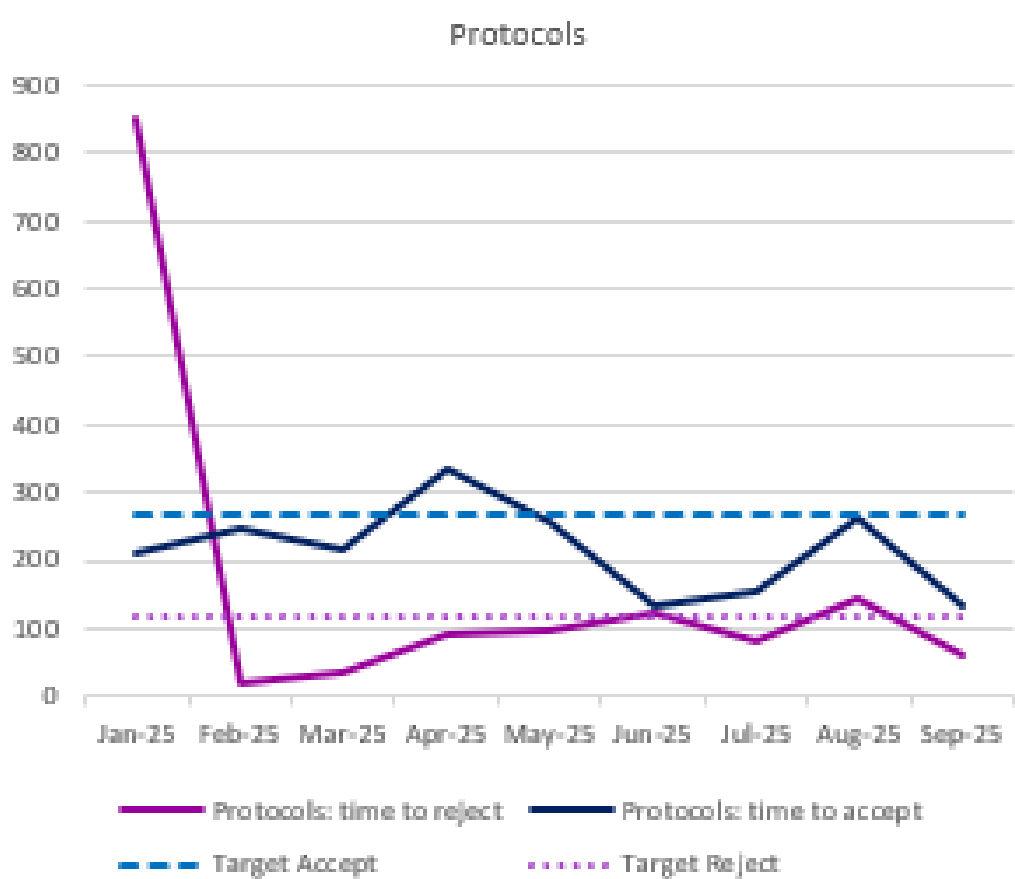
Scientific Strategy




Explore Cochrane's strategic focus

Explore each of our scientific strategy areas through curated collections
"Chosen by the editor."

Time to editorial decisions



Cochrane Evidence Synthesis & Methods Journal in 2025

 [Open Access](#)

Split Body Trials in Systematic Reviews and Meta-Analyses: A Tutorial

Nuala Livingstone, Kerry Dwan, Marty Chaplin

Cochrane Evidence Synthesis and Methods | First Published: 24 September 2025



This tutorial focuses on split body trials in the context of a systematic review and meta-analysis. We will explain what split body trials are, the potential unit of analysis issues they can cause, and how to include data from split body trials in a systematic review.

[Split body trials micro learning module](#)

[Abstract](#) | [Full text](#) | [PDF](#) | [References](#) | [Request permissions](#)

 [Open Access](#)

Meta-Analysis Using Time-to-Event Data: A Tutorial

Ashma Krishan, Kerry Dwan

Cochrane Evidence Synthesis and Methods | First Published: 26 August 2025



This tutorial focuses on trials that assess time-to-event outcomes. We explain what hazard ratios are, how to interpret them and demonstrate how to include time-to-event data in a meta-analysis. Examples are presented to help with understanding. Accompanying the tutorial is a micro learning module, where we demonstrate a few approaches and give you the chance to practice calculating the hazard ratio.

[Time-to-event micro learning module](#)

[Abstract](#) | [Full text](#) | [PDF](#) | [References](#) | [Request permissions](#)

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Artificial Intelligence and Machine Learning to Improve Evidence Synthesis Production Efficiency: An Observational Study of Resource Use and Time-to-Completion

Christopher James Rose, Jose Francisco Meneses-Echavez, Ashley Elizabeth Muller, Rigmor C. Berg, Tiril C. Borge, Patricia Sofia Jacobsen Jardim, Chris Cooper

Cochrane Evidence Synthesis and Methods | First Published: 19 May 2025

[Abstract](#) | [Full text](#) | [PDF](#) | [References](#) | [Request permissions](#)

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Using GPT-4 for Title and Abstract Screening in a Literature Review of Public Policies: A Feasibility Study

Max Rubinstein, Sean Grant, Beth Ann Griffin, Seema Choksy Pessar, Bradley D. Stein

Cochrane Evidence Synthesis and Methods | First Published: 22 May 2025

[Abstract](#) | [Full text](#) | [PDF](#) | [References](#) | [Request permissions](#)

 [Open Access](#)

Data Extractions Using a Large Language Model (Elicit) and Human Reviewers in Randomized Controlled Trials: A Systematic Comparison

Joleen Bianchi, Julian Hirt, Magdalena Vogt, Janine Vetsch

Cochrane Evidence Synthesis and Methods | First Published: 08 June 2025

[Abstract](#) | [Full text](#) | [PDF](#) | [References](#) | [Request permissions](#)

Methods Groups

01

Artificial Intelligence

Established multi-organisational AI methods group; RAISE guidelines & position statement on AI use in Evidence Synthesis

02

Updated & new Handbooks

Updated guidance on searching, undertaking meta-analysis, bias from missing evidence & health economics for intervention reviews. Prognosis, Qualitative & Rapid Review Handbooks coming in 2026

03

Webinars

Prognosis, ROBINS-I, Living reviews, Equity, GRADE & Planetary health

04

Endorsement

Tools for qualitative evidence synthesis approved & INSPECT SR – for assessment of problematic studies

Community of Practice

Ana Beatriz Pizarro

Future of Evidence Synthesis Officer

Leadership meetings, Lisbon Oct 2025

Trusted evidence.
Informed decisions.
Better health.





Looking forward to 2026

Dr Karla Soares-Weiser
Chief Executive Officer

18 November 2025

We heard you!

Over the past months, many of you shared your hopes and expectations for Cochrane's future. The message was clear:

01 | **We must integrate AI and digital tools to strengthen our work**

02 | **We need to streamline processes and accelerate review production**

03 | **We must deepen our global role and strengthen participation and leadership from the Global South**

Our ambition: a modern, agile, and sustainable Cochrane

Our strengths remain central to who we are:

- A trusted global brand
- Leading methodological expertise
- A diverse, committed global community

Our future vision builds on these strengths



Why transformation is necessary?

The world around us is changing – and rapidly

- Expectations for speed and relevance continue to rise
- AI and digital tools are reshaping how evidence is generated and used
- Financial pressures require us to work differently, not simply harder
- Global collaboration opportunities are expanding, especially in the Global South

To remain influential, sustainable, and impactful, Cochrane must evolve. Transformation is no longer optional — it is strategic and timely



Our direction: Cochrane 2.0

Cochrane 2.0 is a Cochrane that is:

- AI-enabled and faster, without compromising trust
- Globally connected, with distributed leadership — especially in the Global South
- Financially sustainable, with diversified funding and operating models



Partnership with ESIC

Our shared principles strongly align:

- Partnership and co-production
- Leadership from the Global South
- Open data and responsible reuse
- Equity, transparency and collective impact

Opportunity to strengthen Cochrane's relevance and position us at the forefront of global evidence



What 2026 will look like?

2026 is our year of focus and foundations

- We will stabilise operations and simplify processes
- We will launch our first AI-enabled evidence pilot
- We will start streamlining review workflows and governance
- We will build the structures needed for long-term sustainability



What won't change

We examine the evidence behind questions that affect people's lives, empowering everyone to make better decisions

While we modernise how we work, what Cochrane stands for remains unchanged

1. Independence
2. Scientific rigour
3. Global collaboration
4. Equity and inclusion
5. Trusted evidence



[illegible]

Members' questions

Please click on the react button to raise your hand and ask a verbal question or use the chat for written questions.

Questions that cannot be answered during the meeting will be answered after the meeting.

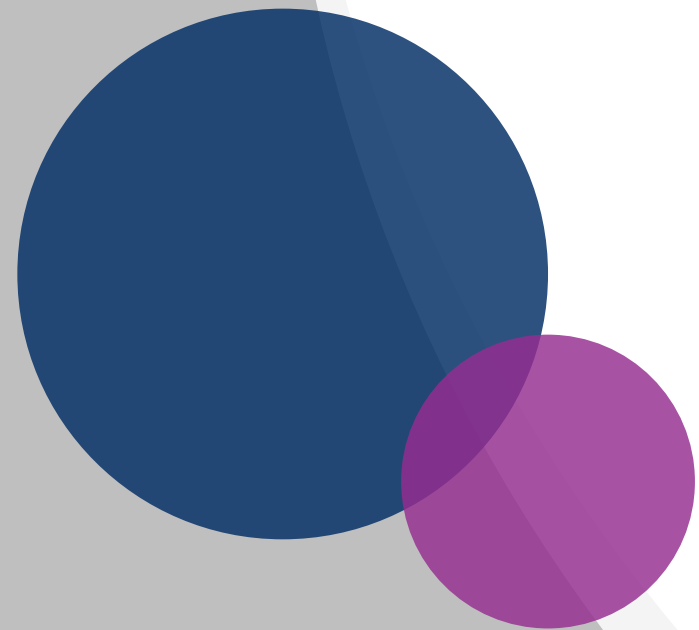


Voting is now closed





Cochrane Awards 2025



Anne Anderson Award

Awarded to a female member of Cochrane who has made a significant contribution to the enhancement and visibility of women's participation within Cochrane.

Winner: Dr. Julia Finkelstein



The Bill Silverman Prize

The prize is given in recognition of constructive criticism of Cochrane's work. It is awarded to an author of a peer-reviewed paper that demonstrates originality and critical thinking.

Winner: Dr. Amin Sharifan



The Chris Silagy Prize

The prize was created to recognize contributions to Cochrane in ways that are often insufficiently recognized.

Winner: Dr. Matteo Bruschetti



The Kenneth Warren Prize

The prize is awarded to a principal author in a low or middle-income country (LMIC) who has published a review that is of high methodological quality and addresses issues that are relevant to people in LMICs.

Winner: Dr. Leeberk Raja Inbaraj



Thank you

**To all the entries and the
judges who took time to
review the nominations.**



Voting results



**Any Other Business
and Date of Next meeting**



Thank you!

