Contemporary issues

Guidelines for writing a systematic review

Rebecca Randles, Alan Finnegan *

Westminster Centre for Research in Veterans, Faculty of Health and Social Care, University of Chester, Riverside Campus, Castle Drive, Chester CH1 1SL, United Kingdom of Great Britain and Northern Ireland

1. Introduction

A key feature of any academic activity is to have a sufficient understanding of the subject area under investigation and thus an awareness of previous research. Undertaking a literature review with an analysis of the results on a specific issue is required to demonstrate sufficient knowledge of the subject under scrutiny and is therefore a key component of teaching, research ethics applications, grant submissions and can provide the basis for future research. In addition, a robust and reliable systematic review will provide the basis for a publication that can result in an article that attracts significant attention and citation. This guide is intended to help nurses with all those processes involved in a systematic review, but with a particular focus on successfully writing a review for a high quality peer review publication such as Nurse Education Today. From the outset, as is the case with any article being submitted for publication; the author/s should target a journal that will consider the paper. The journal's scope is included on their web pages, and the author/s need to take into account the international relevance. Then ensure that the presented article gains the editors attention and is offered in a style that the reviewers' consider publishable. Therefore, ensure the manuscript uses a consistent font and referencing style, is well-written and free from typographical errors, following any further formatting guidelines advocated by the journal. There needs to be a logical flow and remain within the specified word count. They are basic requirements, and this paper will set out to provide background and guidelines to understanding the review process including the various types.

2. What is a systematic review?

A Systematic Review (SR) is a synthesis of evidence that is identified and critically appraised to understand a specific topic. SRs are more comprehensive than a Literature Review, which most academics will be familiar with, as they follow a methodical process to identify and analyse existing literature (Cochrane, 2022). This ensures that relevant studies are included within the synthesis and reduces bias by following pre-set inclusion criteria before conducting any searches, which also makes SRs much more replicable than a standard Literature Review (Aromataris and Pearson, 2014). A full SR will often involve a team of individuals collecting and analysing the literature to ensure greater validity and reduce selection bias. Guidelines that are often referenced for SRs include the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) (Page et al., 2021) the Cochrane Handbook for Systematic Reviews (Cochrane, 2022) and the JBI Manual for Evidence Synthesis (Aromataris and Munn, 2020). Each stage of the SR should be recorded so that a detailed account of the process can be provided.

Before embarking on a review, it is important to understand the differences between the review methodologies as one type of review may be more suited to the scope of the intended review than an SR. A Meta-analysis, for example, is a review whereby the results of quantitative studies are combined to provide a more comprehensive result, a

---

Meta-synthesis is the qualitative equivalent (Grant and Booth, 2009; Lachal et al., 2017; Munn et al., 2014). A Rapid Review is a type of SR that follows the same methods but is likely to be time-limited, perhaps also only conducted by one individual, the limitation being that potentially important literature may be missed (Tricco et al., 2015). Other types of review such as a Critical Review, Scoping Review and Umbrella Review also have slight differences and may be seen as more appropriate depending on the aim, scope, and time constraints of the review, see Table 1 (Grant and Booth, 2009).

3. Identifying a topic and developing inclusion/exclusion criteria

A SR may be conducted for numerous reasons such as to present and understand the current knowledge of an area, understand the development of comprehension of a topic, identify current gaps in research or justify why further research is needed in a subject area (Aromataris and Pearson, 2014). Once a topic of interest has been identified, initial scoping searches should be conducted to help identify the aim of the SR. This initial search will distinguish whether any SRs have already been conducted and therefore, is the requirement to simply update or to understand the amount of research that is within the subject of interest to widen or narrow the focus of the SR. This initial search can define the inclusion years for the review or whether another publication has already been completed and published. In 2022, the authors published an article on help seeking behaviour in military veterans, and an example of how that topic was developed as a result of those initial searches can be seen in Fig. 1 (Randles and Finnegan, 2022).

These initial searches will form the development of inclusion and exclusion criteria to ensure and strengthen a methodical, reliable, and unbiased approach to the SR. There are several frameworks to develop inclusion/exclusion criteria, some of which may be more suitable depending on the methodology of the SR, one example of this is by using PICO (Population/Problem, Intervention, Comparator, Outcomes) (Nishikawa-Pacher, 2022). Other examples include SPICE (Setting, Perspective, Intervention, Comparison, Evaluation) (Booth, 2006) and SPIDER (Sample, Phenomenon of Interest, Design, Evaluation, Research Type) (Cooke et al., 2012). However, there are authors who may find that their topic of interest does not fit within these frameworks and will amend the existing frameworks to suit their own needs (Munn et al., 2018).

When performing initial scoping searches, there may also be certain restrictions related to the research study being completed. The author may consider limiting the SR to a specific research type e.g., only including quantitative studies. Though there should be a justifiable reason for this, such as having minimal qualitative research or being outside the scope of the topic of interest. In addition, other restrictions may be considered in terms of the country that the research was conducted (e.g. only focusing on research within the UK or USA), the characteristics of the participants (e.g. focus on a specific gender), the setting of the research (e.g. within a hospital, online) and the study design itself (e.g. only including randomised control trials). These restrictions may be considered for contextual differences which may influence the focus of the SR such as the USA's healthcare system being vastly different to the UK or the author may be interested in a clinical morbidity which is specific to certain locations and therefore would not be appropriate to search internationally such as the Ebola virus.

4. Search strategy

When developing a search strategy, SRs are specific in how the searches are to be conducted as defined by the inclusion and exclusion criteria. This transparent approach to the SR increases its reliability. Areas that should be considered and reported on within an SR include;

- Databases: Consider the databases to be searched, there will be common databases that are often utilised within specific areas for example within Psychology PsycINFO and PsycARTICLES are frequently used. Examining SRs within the general area will help inform what databases should be searched (Aromataris and Munn, 2020; Cochrane, 2022; Aromataris and Pearson, 2014).
- Keywords: Synonyms and different terminologies that are often used should also be considered e.g. medical terms and common terms (Varicella Zoster/Chicken Pox) acronyms and abbreviations (MoD/Ministry of Defence) generic and brand name drugs (MDMA/Ecstasy) broader and narrower terms (Brain surgery/Neuroendoscopy) should also be considered within the search strategy. The SR strategy should also consider alternative spellings. For example behaviour is spelt differently in UK English and US English (Aromataris and Pearson, 2014; Cochrane, 2022; Munn et al., 2018)
- Boolean Operators/Searching: This refers to the use of AND, OR, NOT to ensure the search is specific enough to only show suitable papers and to, therefore, make the screening process simpler. Searching using "behavi?r" will yield results containing different variations of the spelling. Searching using "educat*" will ensure that all forms of truncation are searched of educate, educated, education etc. (Aromataris and Munn, 2020).
- Fields: The fields in which the search strategy utilises are also highly important. Allowing the database to search any field will yield more results than specifying to search by Title or Subject. Authors may find it more appropriate to limit by the topic of the SR e.g. Public Health/Mental Health, depending on what the database allows (Aromataris and Munn, 2020).
- Filters: As part of the search strategy, restrictions may want to be considered such as the time frame of the papers, language and type of literature. The time frame restriction should be justified such as if a SR was conducted in 2012, limiting the search to research after 2012. Reasons for this would include a previous systematic review in the same area being published in 2012. If no previous publications are identified, then include the justification for the year of commencement which can be aligned to a specific event such as amendments to emergency response protocols following the Hurricane Sandy devastation on the US East Coast (Abramson and Redlener, 2012; Powell et al., 2012) or the classification / reclassification of a specific morbidity such as Post Traumatic Stress Disorder or the introduction of disorder such as Prolonged Grief Disorder in the American Psychiatric Association's (APA) Diagnosis and Statistical Manuel of

Table 1
Summary table of different review methodologies (Grant and Booth, 2009).

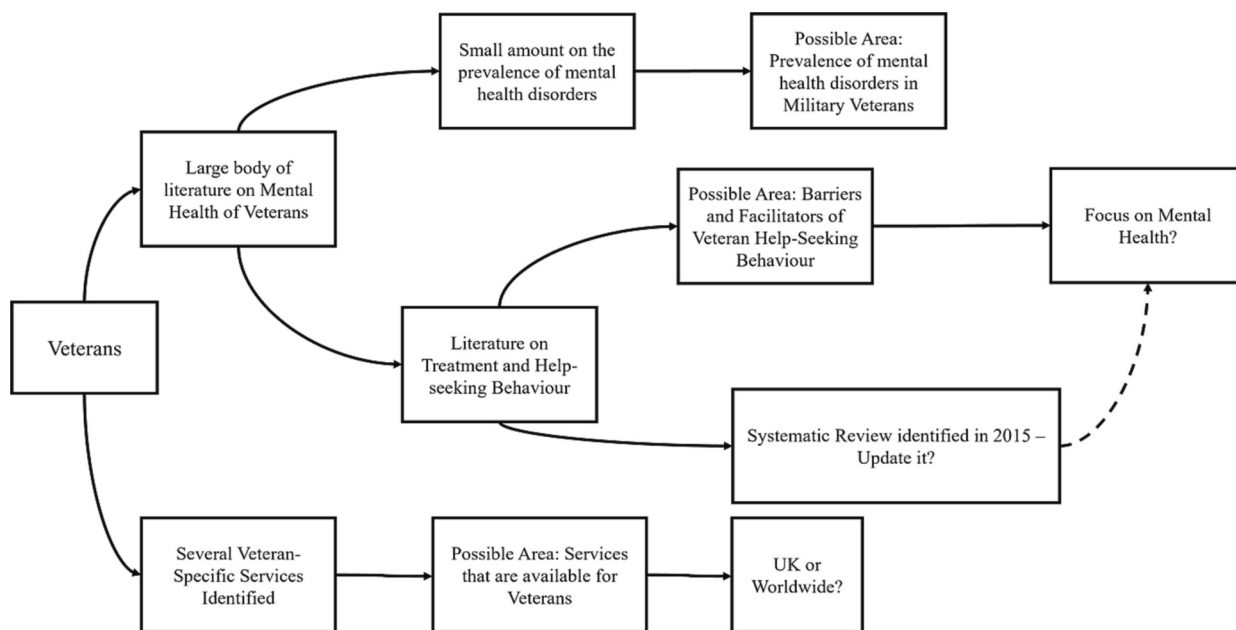| Type	Description	Example
Systematic review	The most robust review method, usually with the involvement of more than one author, intends to systematically search for and appraise literature with pre-existing inclusion criteria.	(Salem et al., 2023)
Rapid review	Utilises Systematic Review methods but may be time limited.	(Randles and Finnegan, 2022)
Meta-analysis	Technique of combining the results of quantitative research studies and statistically analysing the combined results.	(Wang et al., 2022)
Meta-synthesis	The qualitative equivalent of a Meta-Analysis.	(Joubert et al., 2022)
Critical review	A much more appraisal-focused review, analysing the included studies based upon contribution to the field. Potentially resulting in a hypothesis.	(Elkhwesky et al., 2022)
Scoping review	A preliminary review, which can often result in a full systematic review, to understand the available research literature, is usually time or scope limited.	(Currie et al., 2023) (Steen et al., 2021)
Umbrella review	Complies evidence from multiple reviews and does not search for primary studies.	(Cant et al., 2022)

Fig. 1. Example of topic development from initial scoping searches (Randles and Finnegan, 2022).

Mental Disorders (APA, 2022; Aromataris and Munn, 2020; Cochrane, 2022).

- Grey Literature: This refers to literature which is not peer-reviewed and often not picked up within databases such as reports, traditional media, and policy. This may also include conference papers, conference presentations, theses and dissertations. Some SRs chose to exclude grey literature, whilst others find that it must be included. This may also mean that searches are conducted beyond databases, with specific websites being included within the search strategy for example, if interested in military research the Ministry of Defence website from selected countries may be included within the search strategy (Aromataris and Munn, 2020; Cochrane, 2022).

The search strategy should be carefully considered as it is the paramount aspect of the SR. This ensures that the strategy is narrow enough to exclude non relevant literature but not so narrow that important literature is missed (Aromataris and Pearson, 2014). The initial scoping searches are vital in ensuring that the search strategy is comprehensive, relevant, and precise. An example of a search from an SR can be found in Table 2 (Randles and Finnegan, 2022). Table 2 shows that initially there were two separate searches (S1 and S2) to understand the level of literature within the area and whether any additional keywords needed to be included, S3 indicates that the first two searches were then

Table 2
Example of a search strategy from Randles and Finnegan (2022).

Search no.	Field	Search words
S1	Title OR Abstract	Veteran OR ex-forces OR ex-military
S2	Title OR Abstract	Help Seeking OR Treatment Seeking OR Help Seeking Behavi?r
S3	/	S1 AND S2
S4	Subject	Veteran OR ex-forces OR ex-military
S5	Subject	Help Seeking OR Treatment Seeking OR Help Seeking Behavi?r
S6	/	S4 AND S5

Database search limits used
By Language: English
By peer-reviewed/academic journal type

searched in conjunction. In addition, the first three searches were searched utilising the "Title OR Abstract" field meaning that the database would look for the specified keywords within the title or abstract of the literature. These searches were then repeated with the keywords searching the "Subject" field which are often defined by the keywords listed for the journal article. The Table also indicates that the databases were limited to the English Language and to only include peer-reviewed journal articles.

Further papers can be identified through the manual method hand searching of key journals that focus on a chosen subject. This can reveal editorials or letters to the editor that could have been missed in indexing the characters that meet the SR inclusion criteria. Additional papers may also be found in the reference lists of papers but were not found within the databases. Whilst these are acceptable to include, the number must be recorded and reported within the search strategy and PRISMA chart of the SR (Aromataris and Munn, 2020).

5. Screening and extraction

Once a search strategy has been created, screening and extraction can begin. It is particularly important to record the number of literature during the screening process as this will need to be reported into a PRISMA chart (Page et al., 2021), as is always requested for SRs (Fig. 2).

The first stage of screening is often the removal of duplicates, as numerous databases are searched, it is often the case that there will be the same pieces of literature appearing in more than one, this can often cut down the number of papers by quite a large amount. Following this, the remaining papers' titles and abstracts are screened (Polanin et al., 2019). This involves the author/s reviewing the title and abstracts of the literature to determine whether they fit within the inclusion criteria.

Finally, of those remaining, the full paper is reviewed and critically appraised for one final screening to determine whether the paper will be included. When more than one author is involved in a SR, it is often at this screening stage that discussion may take place (Aromataris and Munn, 2020). It is also vital to record the reasons for exclusion to report within the PRISMA chart. During this stage, critical appraisal tools may also be referred to such as the Critical Appraisal Skills Programme (CASP), which consists of a 10-question checklist for paper inclusion (Critical Appraisal Skills Programme (CASP), 2018), to ensure a more systematic approach to examining the research (Porritt et al., 2014).
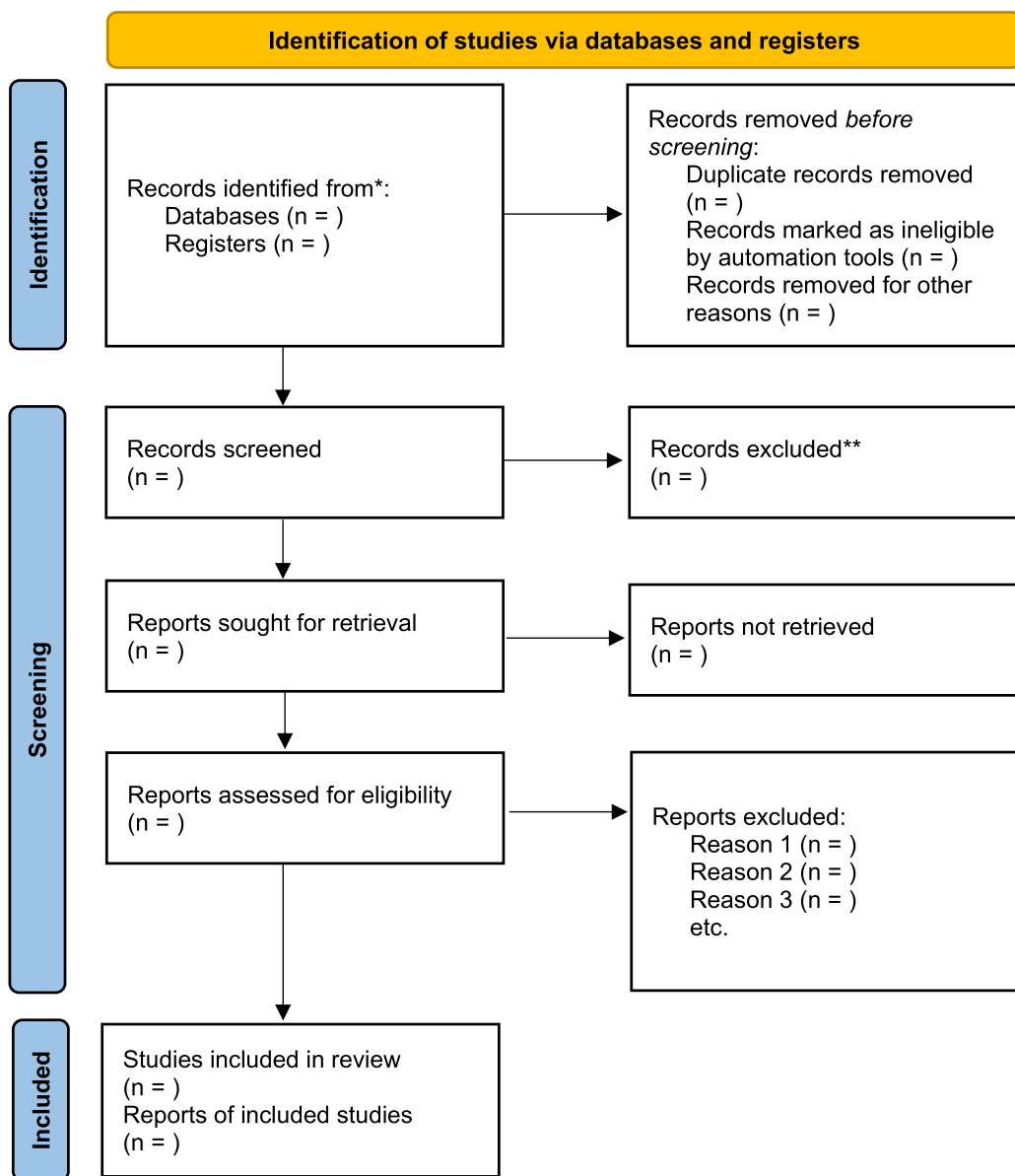
Identification of studies via databases and registers

Identification		
Records identified from*: Databases (n =) Registers (n =)	→	**Records removed *before screening*:** Duplicate records removed (n =) Records marked as ineligible by automation tools (n =) Records removed for other reasons (n =)

Screening		
Records screened (n =)	→	**Records excluded** ** (n =)
Reports sought for retrieval (n =)	→	**Reports not retrieved** (n =)
Reports assessed for eligibility (n =)	→	**Reports excluded:** Reason 1 (n =) Reason 2 (n =) Reason 3 (n =) etc.

Included	
Studies included in review (n =) **Reports of included studies** (n =)	

Fig. 2. PRISMA chart for SRs which included searches of databases and reference lists only (Page et al., 2021).

Other examples include ROBIS (Whiting et al., 2016) and AMSTAR (Shea et al., 2017), acceptable scores for inclusion will be dependent on the tool used and guidance is usually available within the tool itself. To organise the selection process, authors may choose to utilise a tool such as Mendeley, EndNote, NVivo or Rayyan (Elsevier, 2022; QSR International, 2022; Rayyan, 2022).

6. Analysis and synthesis

There are two types of synthesis in SRs, a narrative synthesis is an approach to summarising the included literature whereas a quantitative synthesis is only used in meta-analysis reviews to combine and analyse the results of multiple studies. It is important to understand that the synthesis and the type of systematic review are different for example, a quantitative SR can be conducted and use a narrative synthesis this would mean that the SR only included quantitative studies but did not conduct statistical analysis on the results and instead provided a narrative of the included literature (Cochrane, 2022; Munn et al., 2014; Popay et al., 2006). To extract the data, some authors refer back to the acronyms used to develop their inclusion criteria such as PICO or

formulate their method of extraction considering questions such as (Aromataris and Munn, 2020; Cochrane, 2022; Popay et al., 2006):

- What should be captured from the research?
- What should be captured around the study design? e.g., population, methodology
- What outcomes of the research are important to address the topic?
- What is the quality of the research? e.g., limitations

A table with the extracted information is often included/required within the SR and includes cited articles and highlight key areas such as year of publication, summary of results and quality assessment. Depending on the type and scope of the SR will depend on what is included within the summary table. However, as a general rule the following should be included (if applicable):

- Authors and date of publication (Cochrane, 2022; Younas and Ali, 2021)
- Type of research (Quantitative, Qualitative or Mixed Methods) and Research Design (Cochrane, 2022)

- Description of the population and setting such as number of participants and demographic data (Cochrane, 2022; Younas and Ali, 2021)
- Summary of results of the research (Cochrane, 2022; Younas and Ali, 2021)
- Limitations of the research and any comments on quality (Younas and Ali, 2021)

Some authors choose to also list the country in which the research is being conducted, as there can often be cultural differences depending on the context which may influence the outcomes of the included research such as religious beliefs and cultural nuances. It may also be useful to identify the methods of analysis used such as whether interviews were analysed using thematic analysis or grounded theory, which can provide insight into the strengths and limitations of the research. Once all included studies have been summarised, and their key aspects highlighted, narrative synthesis can begin.

Common themes and relationships should be identified across the literature to determine the sub-headings of the results section of the SR. Themes could be formed based on commonalities in outcomes, study designs and/or interventions used. The results section should begin with a general summary of the characteristics and findings of the included studies, analyse the relationships between the studies and explore patterns and critique the strengths and weaknesses of the body of evidence as a whole (Aromataris and Munn, 2020; Cochrane, 2022; Munn et al., 2014; Page et al., 2021; Popay et al., 2006).

7. Discussion and conclusions

The discussion and conclusion sections of an SR are not dissimilar to when writing for any other form of research paper. The discussion should begin with a summary of the main findings of the results in the context of other evidence. Limitations should be discussed considering the weaknesses of both the body of literature included within the SR and any constraints to the review process itself e.g. if only one author was available this would increase the chance of selection bias. Finally, the discussion should contain compelling evidence that has positive implications for nursing/clinical practice, education, and policy, and suggest future research that is needed within the area of the SR (Page et al., 2021). As with any research article, the conclusion should contain the final closing summary of the findings and provide a commentary on the included findings highlighting any research gaps and limitations.

8. Summary

Robust and detailed guidelines are available for SRs, but it is important to consider the review type that is most suitable to the topic intended to be explored (Aromataris and Munn, 2020; Cochrane, 2022; Grant and Booth, 2009; Page et al., 2021). The author should consider the reason why the SR is being conducted and perform initial scoping searches to understand the current literature within the chosen topic area. This will inform the development of inclusion criteria to increase the reliability and validity of the SR and reduce selection bias (Aromataris and Pearson, 2014; Munn et al., 2018). The search strategy of the SR should be carefully considered as it is a vital aspect to ensure a systematic approach. Areas such as databases, keywords, Boolean operators, fields and filters should all be carefully considered (Aromataris and Munn, 2020; Aromataris and Pearson, 2014; Cochrane, 2022). The screening and extraction stage of the SR should be reported with the utilisation of tools to reduce selection bias and ensure that the SR is valid and replicable (Critical Appraisal Skills Programme (CASP), 2018; Polanin et al., 2019; Porritt et al., 2014). Finally, the included research is summarised using a narrative synthesis by considering common themes and relationships to summarise the results of the included studies (Aromataris and Munn, 2020; Cochrane, 2022; Munn et al., 2014; Popay et al., 2006). Discussion and conclusions are presented similarly to other

research methods with a summary within the context of existing literature, limitations, and implications for future research (Page et al., 2021).

CRediT authorship contribution statement

R Randles - original draft; reviewing and editing; visualisation.
A P Finnegan - original draft; reviewing and editing.

Funding

Declaration of competing interest

The authors have no conflicts of interest to disclose.

References

Abramson, D.M., Redlener, I., 2012. Hurricane Sandy: lessons learned, again. Disas. Med. Public Health Preparedness 6 (4), 328–329. https://doi.org/10.1001/dmp.2012.76.

American Psychiatric Association, 2022. The Diagnostic and Statistical Manual of Mental Disorders, 5th ed. DSM–5-TR.

Aromataris, E., Munn, Z., 2020. JBI manual for evidence synthesis. JBI. https://doi.org/10.46658/JBIMES-20-02. Available from. https://synthesismanual.jbi.global.

Aromataris, E., Pearson, A., 2014. The systematic review: an overview. Am. J. Nurs.

Booth, A., 2006. Clear and present questions: formulating questions for evidence based practice. Libr. Hi Tech 24, 355–368. https://doi.org/10.1108/07378830610692127.

Cant, R., Ryan, C., Kelly, M.A., 2022. A nine-step pathway to conduct an umbrella review of literature. Nurse Author Ed. 32 (2), 31–34. https://doi.org/10.1111/nae2.12039.

Cochrane, 2022. Cochrane Handbook for Systematic Reviews. https://training.cochrane.org/handbook/current (accessed 16.11.22).

Cooke, A., Smith, D., Booth, A., 2012. Beyond PICO: the SPIDER tool for qualitative evidence synthesis. Qual. Health Res. 22, 1435–1443. https://doi.org/10.1177/1049732312452938.

Critical Appraisal Skills Programme (CASP), 2018. CASP systematic review checklist [WWW Document]. https://casp-uk.net/casp-tools-checklists/ accessed 23.11.22.

Currie, J., Thompson, C., Grootemaat, P., Andersen, P., Finnegan, A., Carter, M., Halcomb, E., 2023. A scoping review of clinical skill development of preregistration registered nurses in Australia and five other English-speaking countries. J. Clin. Nurs. 32, 283–297. https://doi.org/10.1111/jocn.16239.

Elkhwesky, Z., El Manzani, Y., Elbayoumi Salem, I., 2022. Driving hospitality and tourism to foster sustainable innovation: a systematic review of COVID-19-related studies and practical implications in the digital era. Tour. Hosp. Res. https://doi.org/10.1177/14673584221126792.

Elsevier, 2022. Mendeley [WWW Document]. https://www.mendeley.com/search/ (accessed 23.11.22).

Grant, M.J., Booth, A., 2009. A typology of reviews: an analysis of 14 review types and associated methodologies. Health Inf. Libr. J. 26, 91–108. https://doi.org/10.1111/j.1471-1842.2009.00848.x.

Joubert, C., Downing, C., Kearns, J.K., 2022. Selection process for admission to an academic nursing programme – A meta-synthesis. Nurse Educ. Today 16, 105475. https://doi.org/10.1016/j.nedt.2022.105475. ISSN 0260-6917.

Lachal, J., Revah-Levy, A., Orri, M., Moro, M.R., 2017. Metasynthesis: an original method to synthesize qualitative literature in psychiatry. Front. Psychiatry 8. https://doi.org/10.3389/fpsyt.2017.00269.

Munn, Z., Tufanaru, C., Aromataris, E., 2014. Data Extraction and Synthesis: The Steps Following Study Selection in a Systematic Review. https://doi.org/10.1097/01.NAJ.0000451683.66447.89.

Munn, Z., Stern, C., Aromataris, E., Lockwood, C., Jordan, Z., 2018. What kind of systematic review should i conduct? A proposed typology and guidance for systematic reviewers in the medical and health sciences. BMC Med. Res. Methodol. 18 https://doi.org/10.1186/s12874-017-0468-4.

Nishikawa-Pacher, A., 2022. Research questions with PICO: a universal mnemonic. Publications 10, 21. https://doi.org/10.3390/publications10030021.

Page, M.J., McKenzie, J.E., Bossuyt, P.M., Boutron, I., Hoffmann, T.C., Mulrow, C.D., Shamseer, L., Tetzlaff, J.M., Akl, E.A., Brennan, S.E., Chou, R., Glanville, J., Grimshaw, J.M., Hróbjartsson, A., Lalu, M.M., Li, T., Loder, E.W., Mayo-Wilson, E., McDonald, S., McGuinness, L.A., Stewart, L.A., Thomas, J., Tricco, A.C., Welch, V.A., Whiting, P., Moher, D., 2021. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. BMJ 372. https://doi.org/10.1136/bmj.n71.

Polanin, J.R., Pigott, T.D., Espelage, D.L., Grotpeter, J.K., 2019. Best practice guidelines for abstract screening large-evidence systematic reviews and meta-analyses. Res. Synth. Methods 10, 330–342. https://doi.org/10.1002/jrsm.1354.

Popay, J., Roberts, H., Sowden, A., Arai, L., Rodgers, M., Britten, N., Roen, K., Duffy, S., 2006. Guidance on the Conduct of Narrative Synthesis in Systematic Reviews.

Porritt, K., Gomersall, J., Lockwood, C., 2014. Study Selection and Critical Appraisal: The Steps Following the Literature Search in a Systematic Review. https://doi.org/10.1097/01.NAJ.0000450430.97383.64.

Powell, T., Hanfling, D., Gostin, L.O., 2012. Emergency preparedness and public health: the lessons of hurricane Sandy. JAMA 308 (24), 2569–2570. https://doi.org/10.1001/jama.2012.108940.

QSR International, 2022. NVivo. https://www.qsrinternational.com/nvivo-qualitative-data-analysis-software/home (accessed 23.11.22).

Randles, R., Finnegan, A., 2022. Veteran help-seeking behaviour for mental health issues: a systematic review. BMJ Mil. Health 168, 99–104. https://doi.org/10.1136/bmjmilitary-2021-001903.

Rayyan, 2022. Rayyan [WWW Document]. https://www.rayyan.ai/ (accessed 11.23.22).

Salem, K., Randles, R., Sapre, B., Finnegan, A., 2023. The experiences of ethnic minority personnel in the armed forces: a systematic review. J. of Mil., Veteran and Family Health 9 (1), 5–14. https://doi.org/10.3138/jmvfh-2022-0019.

Shea, B.J., Reeves, B.C., Wells, G., Thuku, M., Hamel, C., Moran, J., Moher, D., Tugwell, P., Welch, V., Kristjansson, E., Henry, D.A., 2017. AMSTAR 2: a critical appraisal tool for systematic reviews that include randomised or non-randomised studies of healthcare interventions, or both. BMJ 358, j4008. https://doi.org/10.1136/bmj.j4008.

Steen, M.P., Di Lemma, L., Finnegan, A., Wepa, D., McGhee, S., 2021. Self-compassion and veterans health: a scoping review. J. Veterans Studies 7 (1), 86–130. https://doi.org/10.21061/jvs.v7i1.219.

Tricco, A.C., Antony, J., Zarin, W., Strifler, L., Ghassemi, M., Ivory, J., Perrier, L., Hutton, B., Moher, D., Straus, S.E., 2015. A scoping review of rapid review methods. BMC Med. 13 https://doi.org/10.1186/s12916-015-0465-6.

Wang, X., Cai, Z.D., Jiang, W.T., Fang, Y.Y., Sun, W.X., Wang, X., 2022. Systematic review and meta-analysis of the effects of exercise on depression in adolescents. Child Adolesc. Psychiatry Ment. Health 16 (1), 16. https://doi.org/10.1186/s13034-022-00453-2.

Whiting, P., Savović, J., Higgins, J.P.T., Caldwell, D.M., Reeves, B.C., Shea, B., Davies, P., Kleijnen, J., Churchill, R., 2016. ROBIS: a new tool to assess risk of bias in systematic reviews was developed. J. Clin. Epidemiol. 69, 225–234. https://doi.org/10.1016/j.jclinepi.2015.06.005.

Younas, A., Ali, P., 2021. Five tips for developing useful literature summary tables for writing review articles. Evid Based Nurs 24, 32–34. https://doi.org/10.1136/ebnurs-2021-103417.