



## Response Comment on “Chlamydia Infection as a Risk Factor for Cervical Cancer: A Systematic Review and Meta-Analysis”

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### Dear Editor-in-Chief

We welcome the comments from the readers. It has been a pleasure for us to know that our work has been read critically and taken into account. From our understanding, we believe in any manuscript, if the method was described in a way that is replicable, then it should already meet the requirement. Therefore, we do not think that our method section is “concise” as described by our learned commenter. Another point raised in the letter that our search strategy is “quick search” without specifying what would be the appropriate improvement is insufficient, as we already have outlined our search strategy clearly in the manuscript. The commentator also mentioned that we only used Cochrane and PubMed databases for our searches. This may be listed as one of the limitations of this study rather than labeling as “lack of knowledge” as far as we know; there are no hard rules on how many databases that need to be searched for a systematic review.

Another issue raised is the grey literature. We do agree with the commenter on this issue. Most meta-analyses do not include grey literature, and this needs improvement. In fact, a study by McAuley et al, estimated that only 33% of the studies included grey literature (1). Grey literature is important for reducing impact of publication bias; provide useful context

on how, why and in whom complex public health intervention is effective, and provide full range of evaluation and where further intervention needed (2). However, we think we covered all those aspects in our studies. We do not deny the importance of grey literature for meta-analysis; we will improve our future work on this matter.

We also did not think Newcastle-Ottawa Scale (NOS) is a wrong choice, as it has been considered as a suitable tool for use in a systematic review albeit with some limitation (3). Other method available including the checklist suggested by the commenter also have their own limitation.

Finally, we do agree that the data extraction information should be included in the result section rather than the methodology. We will improve this in future works. The commenter mentioned that we have “lack of understanding” in conducting meta-analysis, but we hope that any contribution (no matter how little it is) could benefit the readership.

### References

1. McAuley L, Pham B, Tugwell P, et al (2000). Does the inclusion of grey literature influence estimates of intervention effectiveness report-



- ed in meta-analyses? *Lancet*, 356:1228–1231.
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  3. Deeks J, Dinnes J, D'Amico R, Sowden A, Sakarovitch C. Evaluating non-randomised intervention studies. *Health Technol Assess* 2003;7(27: iii-x, 1-173.