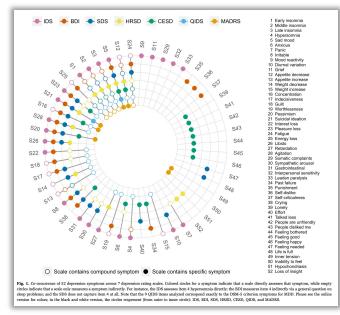


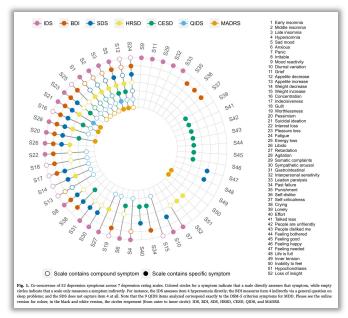
- We learned that meta-analysis is a technique which summarizes quantitative outcomes from several studies.
- In a primary study, it is usually quite easy to calculate **summary statistics** through which we can describe the data (e.g., the mean \bar{X} or standard deviation S of a continuous outcome)
- This is possible because the outcome has been measured in the same way across all study subjects
- → This is typically not the case in meta-analyses, where studies use different instruments to measure the outcome



Fried, 2017



- → We must find an effect size measure that can be summarized across all studies
- Effect sizes are sometimes directly reported in the published article
- More often, we must calculate them from other reported summary information



Fried, 2017



Criteria for "good" effect size metrics:

- Comparable: Needs to have the same meaning across al studies
- **Computable**: Needs to be calculatable for (almost) all included studies
- Reliable: A valid estimator of the sampling variance (standard error) of the effect size must exist

Interpretable:

- The metric should be appropriate for our research question
- Optimally, the effect size should have a straightforward clinical interpretation
- There can be a trade-off between interpretability and other criteria (e.g., odds ratios versus NNTs)



What is an effect size?

General definition: "a metric that quantifies the **relationship** between to entities in terms of **direction and magnitude**"

- → But this is only *one* way to define effect sizes!
- → Some only talk of effect sizes when referring to the results of intervention studies, expressed as differences between the treatment and control group (e.g., Cohen's d)
- → Others disapprove of the term altogether, because the word "effect" in "effect size" suggests that there is a causal relationship; but this is not automatically the case