References to EBM commentaries published between December 2016 and September 2017 thought to be practice changing:

Peto J, Gilham C. Longer screening intervals are recommended following a negative HPV test in primary cervical screening *Evidence-Based Medicine* 2017;**22:**178.

Cazzola M, Rogliani P. In stable COPD, long-acting muscarinic antagonist plus longacting beta-agonists resulted in less exacerbations, pneumonia and larger improvement in FEV 1 than long-acting beta-agonists plus inhaled corticosteroids *Evidence-Based Medicine* 2017;**22:**183-184.

Dudley D. Serial transvaginal cervical length measurements and quantitative vaginal fetal fibronectin concentrations did not predict spontaneous preterm birth in low-risk nulliparous women

Evidence-Based Medicine 2017;22:188.

Travers CP, Carlo WA. Antenatal corticosteroid administration between 24 hours and 7 days before extremely preterm delivery is associated with the lowest rate of mortality *Evidence-Based Medicine* 2017;**22**:189.

de Gara C, Falk V. Over half of the patients who undergo adjustable gastric banding may require revision bariatric surgery *Evidence-Based Medicine* 2017;**22:**191.

Sihvonen R. Meniscal resection may not benefit patients with traumatic meniscal tears *Evidence-Based Medicine* 2017;**22:**193.

Rivera-Caravaca JM, Lip GYH. Apixaban may have lower risk of GI bleeding compared with dabigatran and rivaroxaban in patients with atrial fibrillation *Evidence-Based Medicine* 2017;**22:**154-155.

Dumont-Mathieu T. Use of the M-CHAT follow-up interview (M-CHAT/F) by paediatricians during well-child care visits is feasible, valid and reliable *Evidence-Based Medicine* 2017;**22:**156.

Dahm P, Ilic D, Wilt T. Similar prostate cancer and all-cause mortality in men with localised prostate cancer undergoing surgery or radiation therapy versus active monitoring at 10 years of follow-up *Evidence-Based Medicine* 2017;**22:**93.

Sandset EC, Fischer U. Intensive blood pressure lowering provides no additional benefits and results in more adverse events *Evidence-Based Medicine* 2017;**22:**102. Onakpoya I. Oral antibiotics are as effective as intravenous antibiotics for postdischarge treatment of complicated pneumonia in children *Evidence-Based Medicine* 2017;**22:**105.

Murphy BM. Stress management training should be an integral component of cardiac rehabilitation

Evidence-Based Medicine 2017;22:65.

Doggrell SA. Liraglutide, a GLP-1 receptor agonist, prevents cardiovascular outcomes in patients with type 2 diabetes *Evidence-Based Medicine* 2017;**22:**28.

Rutherford GW, Anglemyer A. Early initiation of antiretroviral therapy prevents HIV transmission to seronegative sexual partners *Evidence-Based Medicine* 2017;**22:**29.

Weber MA. Intensive treatment of hypertension to a SBP <120 mm Hg in patients aged 75 and over reduces mortality and cardiovascular events *Evidence-Based Medicine* 2017;**22:**30.

Castanon A. Cone depth increases risk of adverse obstetric outcomes following treatment for cervical preinvasive disease *Evidence-Based Medicine* 2017;**22:**37.

Adams J, Mills SDH. Consuming meals prepared at home more frequently appears to reduce the risk of type 2 diabetes, weight gain and obesity *Evidence-Based Medicine* 2017;**22:**38

Tyson JE, Miller CC. Whether neonatal phototherapy increases the risk of cancer in children is a disturbing unresolved issue *Evidence-Based Medicine* 2017;**22:**39-40.

Lee SK. Implementing evidence-based practices improves neonatal outcomes *Evidence-Based Medicine* 2016;**21:**231.

Løkkegaard E. Low-dose second-generation oral contraceptives are associated with the lowest increased risk of cardiovascular adverse effects <u>Evidence-Based Medicine</u> 2016;21:232.

Neovius M, Stephansson O. Careful monitoring of fetal growth and maternal nutritional status should be practiced in pregnant women with a history of bariatric surgery *Evidence-Based Medicine* 2016;**21:**233.

Than M. Traditionally taught clinical variables and risk factors perform poorly in the prediction of acute coronary syndromes in the emergency department *Evidence-Based Medicine* 2016;**21:**236.