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## Editorial

### The Use of Living Systematic Reviews (LSRs) in the Area of Suicide Studies

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There are different types of review studies, including narrative, systematic and meta-analysis. In a narrative review, an expert synthesizes evidence relating to a specific topic or research question without detailing the methods used for gathering that evidence.

In a systematic review a group of experts typically synthesize the evidence under the guidance of a pre-written protocol in which the methods of data collection and analysis are well-explained. Meta-analyses statistically combine the results of quantitative studies to provide a more precise effect on the results [1].

Since experts in different branches of science produce ever increasing amounts of new evidence, systematic reviews and meta-analyses need be updated on a regular basis. In 2014, a new type of review, the Living Systematic Review (LSR), was proposed to facilitate this process and narrow the gap between the production of evidence and the delivery of remedial action [2]. In LSRs, the painstaking review process is carried out at pre-defined intervals, e.g. monthly or three-monthly [3]. It has also been claimed that more effective and efficient use of machine automation and human effort could extensively improve the output of a typical systematic review [4].

One of the disciplinary areas that would benefit from use of LSRs is suicide studies (“suicidology”). That is especially the case in this pandemic era when the mental health of vulnerable individual and communities has been massively affected [5]. In a very short space of time, there has been an explosion of articles, commentaries and other publications on the impact of the pandemic, and of infection-control counter-measures taken by governments worldwide on suicidal behavior. In order to take advantage of this new and increasing evidence base, continuous reviewing and assessment are vital so that policy and practice can be aligned with the latest knowledge. Fortunately, a new protocol has recently been published which establishes a LSR to study the impact of the COVID-19 pandemic on self-harm and suicidal behavior [6]. I would like to

welcome this proposal to extend the use of LSR methodology newly published protocol as a timely reaction in the use of LSRs in this area of suicide studies.

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