

Letter to the Editor

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Comments regarding "Effectiveness of telenursing in improving quality of life in patients with heart failure: A systematic review and meta-analysis"

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Dear Editor,

We are writing to provide constructive feedback on the recently published article titled "Effectiveness of Telenursing in Improving Quality of Life in Patients with Heart Failure: A Systematic Review and Meta-Analysis."¹ While the study presents valuable insights into the potential benefits of telenursing for heart failure patients, we would like to highlight an area of methodological concern that could significantly impact the validity of the findings.

In the context of systematic reviews and meta-analyses, a comprehensive assessment of bias is essential to ensure the reliability and credibility of conclusions.^{2,3} Although the authors presented funnel plots to assess publication bias in the meta-analysis, these are not sufficient on their own to comprehensively evaluate all forms of bias. The article does not provide a detailed explanation of the methods used to evaluate the risk of bias in the included studies, which raises questions about the robustness of the review process. Specifically, systematic approaches, such as those outlined in the Cochrane Handbook for Systematic Reviews of Interventions, emphasize the need for evaluating critical domains, including selection bias (random sequence generation and allocation concealment), performance bias (blinding of participants and personnel), detection bias (blinding of

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outcome assessment), attrition bias (incomplete outcome data), and reporting bias (selective outcome reporting).⁴

Without explicit details on how these domains were assessed and addressed, it becomes challenging for readers to ascertain the methodological rigor of the review. For instance, did the authors utilize standardized tools such as the Cochrane Risk of Bias tool or any equivalent framework? Were multiple reviewers involved in independently assessing the risk of bias, and if so, how were discrepancies resolved? Addressing these questions would enhance the transparency and reproducibility of the review process.

Additionally, we would like to address inconsistencies observed in the forest plot presented in Figures 4 and 5. The data points displayed in these figures do not align with the extracted data reported in Table 3. The authors concluded that telenursing improves quality of life among patients with heart failure.¹ However, the forest plots show the overall effect estimate located in the quadrant of the control group, which contradicts the stated conclusion and the data extraction table. This discrepancy raises concerns about the accuracy and interpretation of the meta-analytic results. Clarifying these inconsistencies is critical to ensure the validity of the findings and their implications for clinical practice.

We appreciate the authors' efforts to synthesize evidence on an important topic and acknowledge the challenges inherent in conducting a systematic review and metaanalysis. However, incorporating a detailed and systematic risk-of-bias assessment, along with a thorough review and correction of inconsistencies in the forest plots, would strengthen the article's contribution to the field and provide readers with greater confidence in the findings. Thank you for considering these comments. We hope they are helpful in fostering further discussion and refinement of systematic review methodologies in nursing research.

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