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**Reporting Characteristics of Health Policy Briefs in HSE and WHO Databases**

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**Objectives/aims**

We aim to analyze the epidemiology and reporting characteristics of health policy briefs in the Health System Evidence (HSE) and WHO databases.

**Methods**

Two researchers independently hand-searched HSE and WHO databases before January 31, 2018, and included health policy briefs in English and Chinese. Two reviewers independently completed data extraction and resolved disagreements by discussions.

**Main findings**

A total of 110 policy briefs were included. 70 (64%) reported background, 108 (98%) reported health problem, 70(64%) policy briefs in the last 4 years (2010-2013), with no updates in 2016 and 2017. 41(53%) reported appendixes and 108 (98%) references, 70 (64%) background were clearly reported; 60 (55%) methodologies, 59 (54%) funding and 56 (51%) conflicts of interest, four of them have conflicts of interest; 92 (84%) policy options were clearly reported，92 (84%) reported the definition of problem, 86 (78%) reported the size of problem, 91 (83%) reported the impact of problem; 60 (55%) reported development methods, 50 (46%) reported search databases, and 50 (46%) reported comprehensive of evidence; 48 (44%) and 44 (40%) reported advantages and harm of options respectively, 50 (46%) and 26 (24%) reported cost and equity respectively; 74 (67%) reported the implementation of policy options, and 64 (58%) reported potential implementation barriers, 39 (36%) reported strategies of potential obstacles. The formats and contents of the health policy briefs are very different and the format of the report on their methodologies is too simple. Development of different briefs varied a lot by different organizations in reporting characteristics, can learn from clinical practice guidelines for reporting standards and provide the reference for brief developers in the future.