

LETTER TO THE EDITORS

Poor reporting of randomized controlled trials in solid organ transplantation is indicative of a wider problem in surgery

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Liu *et al.* discuss the poor-quality reporting of solid organ transplantation randomized control trials (RCTs) [1]. A weighting calculation related to each point and the associated importance may further clarify the relative poor adherence of individual items in the statement. Numeric scoring on a 25-point scale (totalled to 30 by the authors, as some parts of the checklist required expansion) does not give the whole picture. Certain aspects of the statement are more important with regard to the quality than others (e.g. randomization is more important than introduction). The lack of reporting registration (17%; 49/290) and location of the protocol (0.003%; 1/290) are reporting errors that highlight the poor use of the statement. If they do not, then they highlight the much more worrying possibility that only 49 were in fact registered. Hypothesizing after results are known (HARKing) seems a problem in this cohort, with only half prespecifying their outcomes [2].

By creating a tool to enable adequate and uniform reporting of trials, it was hoped that the quality of evidence, upon which modern medical practice is based, would improve [3]. The formulation of the consolidated standard of reporting trials (CONSORT) statement and its subsequent revisions provided such a tool [3].

CONSORT compliance has been assessed across a large spectrum of the available literature. The figures obtained by Liu *et al.* [1] correlate with work done in other areas of the literature [4]. Those journals with CONSORT endorsement having greater CONSORT compliance align with previous work [5]. What does, however, surprise is that those articles published by CONSORT endorsing journals only complied with 17/30 items. Why is this so low? Although a large number of journals have endorsed the statement, how many have made compliance to it an absolute requirement before acceptance or indeed before sending the article for peer-review?

Many submissions to journals are now made electronically and we feel that RCT compliance with CONSORT should be hardwired into this process [6]. Poor quality of evidence reduces the availability of data for systematic review and meta-analysis, makes critical appraisal difficult and skews perceptions of best practice with the potential for unsound clinical judgement to follow [6]. Perhaps there

is a role for indexes (such as Pubmed) to make this a requirement before acceptance for indexing.

We implore all stakeholders involved with publishing and research to try and improve uptake and use of the CONSORT statement.

Conflicts of interest

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