Openness and transparency in medical publishing: Challenges and opportunities

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Challenges and opportunities in openness

- Open peer review
- Sharing clinical data
Why use open peer review in medical journals?

• Transparency is essential in medical research (names, affiliations, COIs)
• Reviewers receive credit and recognition for their work
• Comments from peer reviewers can help improve a work
Challenges of open peer review in medical journals

• More difficult to find reviewers?
• Occasionally reviewers will ask that their names aren’t published for legitimate reasons (we can accommodate)
• Critics on controversial papers have ammunition openly available
• Issues with partial transparency
How can we improve open peer review?

- Increase the value of peer reviews by assigning them a DOI
- Increase the visibility of peer reviews and the prepublication history
- Find ways to automate the processes
Why share clinical trial data?

• Putting the patient first
• The public also has an interest
• Replication and validation of important research
• Research data should not go to waste
• **Sharing patient data will give it the fullest, broadest impact possible**
• The challenge is maintaining confidentiality and respecting consent

Why share data? Minimizing misconduct

Motive/Pressure

Rationalization: My theory/reasoning is sound, the data is wrong/skewed!

Opportunity: I control the data and can easily change them.

Fraud Triangle (by Donald R. Cressey) adapted to Scientific Misconduct
ICMJE and data sharing

• 2016: ICMJE propose authors share deidentified individual-patient data (IPD) underlying the results no later than 6 months after publication.
  • *The Lancet* responds, saying the proposal is unrealistic and doesn’t consider alternatives
• 2017: ICMJE changes their recommendation to requiring a data statement
• Authors are not required to make data available, but if it’s not available, they need to say so
BMJ Open Data policy

• “As of January 2013, The BMJ will no longer publish any trial of drugs or devices where the authors do not commit to making the relevant anonymised patient level data available, on reasonable request.”
BMJ Open Data policy: Is it working?

Medical publishing and peer review
Research

Has open data arrived at the British Medical Journal (BMJ)? An observational study

Anise Rowhani-Farid, Adrian G Barnett

• Survey of 160 randomly sampled BMJ research articles from 2009 to 2015.
• 3 articles contained the data in the article. 7/157 research articles shared their data sets (4.5%). For 21 clinical trials bound by the BMJ data sharing policy, 24% shared their data.
• Conclusion: It might be time for a more effective data sharing policy and better incentives for health and medical researchers to share their data.
• Pessimistic interpretation: We are falling far short of what we are trying to achieve.
• Optimistic interpretation: 24% shared is better than 0%
Is data sharing possible in medical research?
Yes

• Existing data policies need revising, but sharing clinical data is achievable
• The ICMJE policy along with the AllTrials campaign have had an enormous positive impact on clinical trial registration
• A strong policy in data sharing could do the same
Thank you