

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	Assessment of reporting quality in randomized controlled clinical trial abstracts of dental implantology published from 2014 – 2016
AUTHORS	Knippschild, Stephanie; Loddenkemper, Jeremias; Tulka, Sabrina; Loddenkemper, Christine; Baulig, Christine

VERSION 1 – REVIEW

REVIEWER	Koletsis, Despina University of Zurich Faculty of Medicine
REVIEW RETURNED	25-Nov-2020

GENERAL COMMENTS	<p>This paper addresses a very important topic, which is related to reporting quality of published research in implantology. This is inevitably further related to translation of findings to clinical practice.</p> <p>I would have otherwise been very positive for this work if it had not been for a single but significant drawback. It is apparently outdated. Sample consists of articles published back in 2014-2016, which is 5 to 7 years ago. Relevant publications (even earlier), do exist, although not cited in the present study: Kiriakou J, Pandis N, Madianos P, Polychronopoulou A. Assessing the reporting quality in abstracts of randomized controlled trials in leading journals of oral implantology. J Evid Based Dent Pract. 2014 Mar;14(1):9-15. doi: 10.1016/j.jebdp.2013.10.018. Epub 2013 Dec 19. PMID: 24581704.</p> <p>To this end, I believe the readership and scientific community within dentistry and implantology would benefit from an update in the topic, and assessment of articles published at least within the most recent 1-2 years. This will allow for a comparison with such earlier reports and also allow for an assessment of a temporal change.</p> <p>If the authors are willing to update this paper, I would be very much willing to see a new submission.</p> <p>Thank you for asking me to see this work.</p>
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REVIEWER	Poklepović Peričić, Tina University of Split, research in Biomedicine and Health
REVIEW RETURNED	15-Dec-2020

GENERAL COMMENTS	<p>Congratulations for your work, and a nicely written manuscript. I have some details that I would like you to have a look at.</p> <p>Methods section in the Abstract seems to require some explanations about search, how was accuracy defined, and why was Poisson done. Please add some info to make the methods more clear.</p>
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	<p>Line 15 in the Background regarding making decisions based on abstracts seems very inappropriate since it is strongly advised not to do so, and I would leave this out.</p> <p>I would also refer to the importance of a well defined abstract in terms of screening for the purposes of doing a systematic review, which is in turn related to decision making and guideline development. Also, an evidence based approach in research (Lund et al) requires detailed insight in the available literature base before conducting new research, so please refer to this as well, and the importance of well reported abstracts in that sense.</p> <p>Line 32: reference 4 „since full texts are primarily published in Chinese in this discipline“,</p> <p>I wouldn't refer to traditional medicine reports in the paper that is intended to explore RCTs in dental implantology.</p> <p>I think the search results should be placed in the results section. Insert references for Excel and the SPSS.</p> <p>Discussion page 16, line 3, please rephrase the sentence. Are you suggesting that more databases would provide different results? Could you add explanation about the representativeness of the sample considering that PubMed was used?</p> <p>There are few typos, please correct.</p>
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REVIEWER	Levey, Colin University of Dundee
REVIEW RETURNED	15-Dec-2020

GENERAL COMMENTS	<p>This is a useful addition to the growing body of evidence which suggests that word limits on abstracts can have a significant impact upon the completeness of reporting, and therefore on application of findings. Failure to fully report contributes to research waste and can have real-world harms, especially where the presence of a paywall prevents access to full reports.</p> <p>While this research adds to this evidence, there are a number of issues which need to be addressed before this could be considered for publication in BMJ Open. I have listed some specific areas below. Overall, the terminology in the manuscript needs to be tightened so it is clear what is being described.</p> <ol style="list-style-type: none"> 1. Abstract: Objectives: The final sentence is unclear. "The question is to what extent the CONSORT criteria for abstracts (CONSORT-A) are considered in the preparation of RCT publications thereof." Consider rewording to reflect "compliance with reporting guidelines" or similar? 2. "Correct implementation" is not defined in the abstract so this concept is unclear to the reader. It may require a different term or a brief explanation. 3. Page 1. Background and Objective. You have used the term "controlled clinical trials (RCTs)" but not all controlled trials are randomised. Therefore tightening of the wording is required here. I notice later in the manuscript, that controlled clinical trials are included and this appears to be in addition to randomised controlled trials (page 4). These should be listed as "CCTs" rather than "RCTs". This should also be reflected in the title of the
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	<p>manuscript if CCTs are included. If they are not included, then I would ensure that terminology is consistent throughout the manuscript to avoid confusion.</p> <p>4. Page 3. "various areas of medical indication". I don't understand this terminology. Does this mean "various areas of medicine and surgery"?</p> <p>5. Page 4 "At the start of the project, a tool to evaluate abstract quality was available from a preceding study,[6], which the planners of the study had to slightly adapt and extend for the purposes of the new area of indication" What adaptations were required? And again, not sure what "area of indication" means.</p> <p>5. The literature search is limited to one database (which is highlighted as a limitation in the paper) however, it is not clear why such a short timeframe (01/2014-12/2016) was chosen. Perhaps this could be explained or listed as a limitation.</p> <p>6. Page 8: in "methods" section. "dosis/therapy" isn't clear to me. Does this mean description of the intervention?</p> <p>7. page 11/12 "when interpreting the findings of this study, readers should therefore be aware that inclusion of further databses might lead to a bias of results." It isn't clear to me. Do you mean that inclusion of more databases would result in bias (which would be a bad thing)? Or that there is bias in this study which could be overcome by using other databases? And what type of bias do you mean?</p> <p>8. Page 12 and 13: "rate of implication". I don't know what this means. Do you mean implementation?</p> <p>9. Page 15: " One option would be to check abstracts/publications for completeness of reporting as a preliminary step, followed by the actual review procedure". This is an interesting idea. One which might focus the mind when writing abstracts. However, there could be some negatives.</p> <p>10. References: there are more oral health related papers which also identify the word count as a problem. Perhaps these could be referenced.</p> <p>11. Registration of project.</p>
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VERSION 1 – AUTHOR RESPONSE

Reviewer: 1

Dr. Despina Koletsi, University of Zurich Faculty of Medicine

Comments to the Author:

Re article: bmjopen-2020-045372

This paper addresses a very important topic, which is related to reporting quality of published research in implantology. This is inevitably further related to translation of findings to clinical practice.

I would have otherwise been very positive for this work if it had not been for a single but significant drawback. It is apparently outdated. Sample consists of articles published back in 2014-2016, which is 5 to 7 years ago. Relevant publications (even earlier), do exist, although not cited in the present study:

Kiriakou J, Pandis N, Madianos P, Polychronopoulou A. Assessing the reporting quality in abstracts of randomized controlled trials in leading journals of oral implantology. *J Evid Based Dent Pract.* 2014 Mar;14(1):9-15. doi: 10.1016/j.jebdp.2013.10.018. Epub 2013 Dec 19. PMID: 24581704.

Thank you very much for this comment. The above-mentioned publication was indeed the reason for compiling this doctoral thesis. We wanted to evaluate the actual reporting quality (project start: 2017). Due to our own investigations on the reporting quality in RCT abstracts, we used the already existing evaluation tool for data collection.

We have cited the publication from Kiriakou et al. and added the results to the Background and Objective section, as well as to the Discussion section.

To this end, I believe the readership and scientific community within dentistry and implantology would benefit from an update in the topic, and assessment of articles published at least within the most recent 1-2 years. This will allow for a comparison with such earlier reports and also allow for an assessment of a temporal change.

If the authors are willing to update this paper, I would be very much willing to see a new submission. Thank you for asking me to see this work.

Reviewer: 2

Dr. Tina Poklepović Peričić, University of Split, University of Split School of Medicine Library
Comments to the Author:

Congratulations for your work, and a nicely written manuscript. I have some details that I would like you to have a look at.

Methods section in the Abstract seems to require some explanations about search,

We did a very unrestricted search in order to get as many hits as possible. Table 2 in the Supplementary Material, search #8, shows that our data pool comprised 268 publications. how was accuracy defined, and

We have replaced the word 'accuracy' by 'correctness' and included a reference in the Material and Methods section.

why was Poisson done. Please add some info to make the methods more clear.

We used Poisson regression because we modelled count data. We have included this information in our main text. Hopefully, this will lead to a better understanding and transparent documentation.

Line 15 in the Background regarding making decisions based on abstracts seems very inappropriate since it is strongly advised not to do so, and I would leave this out.

Thank you very much for your comment. We consider this aspect worth mentioning as literature suggests that this procedure is not unusual. We have added the literature reference to the text in the Background section.

I would also refer to the importance of a well defined abstract in terms of screening for the purposes of doing a systematic review, which is in turn related to decision making and guideline development. Also, an evidence based approach in research (Lund et al) requires detailed insight in the available literature base before conducting new research, so please refer to this as well, and the importance of well reported abstracts in that sense.

This is absolutely correct! We have added the reference and the aspects mentioned to the main text.

Line 32: reference 4 „since full texts are primarily published in Chinese in this discipline“,

I wouldn't refer to traditional medicine reports in the paper that is intended to explore RCTs in dental implantology.

We have deleted this reference.

I think the search results should be placed in the results section.

We have moved the literature results to the Results section.

Insert references for Excel and the SPSS.

The paper already included a reference to the Excel software programme. Please see reference no. 15.

We have added a reference to SPSS. Please see reference no. 16.

Discussion page 16, line 3, please rephrase the sentence. Are you suggesting that more databases would provide different results? Could you add explanation about the representativeness of the sample considering that PubMed was used?

We inserted a more explicit description in order to explain this limitation.

There are few typos, please correct.

We corrected typos and had the manuscript revised by a professional editing service.

Reviewer: 3

Dr. Colin Levey, University of Dundee

Comments to the Author:

This is a useful addition to the growing body of evidence which suggests that word limits on abstracts can have a significant impact upon the completeness of reporting, and therefore on application of findings. Failure to fully report contributes to research waste and can have real-world harms, especially where the presence of a paywall prevents access to full reports.

While this research adds to this evidence, there are a number of issues which need to be addressed before this could be considered for publication in BMJ Open. I have listed some specific areas below. Overall, the terminology in the manuscript needs to be tightened so it is clear what is being described.

1. Abstract: Objectives: The final sentence is unclear. "The question is to what extent the CONSORT criteria for abstracts (CONSORT-A) are considered in the preparation of RCT publications thereof." Consider rewording to reflect "compliance with reporting guidelines" or similar?

We have restructured the sentence.

2. "Correct implementation" is not defined in the abstract so this concept is unclear to the reader. It may require a different term or a brief explanation.

We have changed the terminology. Unfortunately, the restrictive requirements regarding the number of words in the abstract leads to this short explanation at this point.

3. Page 1. Background and Objective. You have used the term "controlled clinical trials (RCTs)" but not all controlled trials are randomised. Therefore tightening of the wording is required here. I notice later in the manuscript, that controlled clinical trials are included and this appears to be in addition to randomised controlled trials (page 4). These should be listed as "CCTs" rather than "RCTs". This should also be reflected in the title of the manuscript if CCTs are included. If they are not included, then I would ensure that terminology is consistent throughout the manuscript to avoid confusion. In fact, we only included RCTs in this investigation.

4. Page 3. "various areas of medical indication". I don't understand this terminology. Does this mean "various areas of medicine and surgery"?

We have changed the terminology.

5. Page 4 "At the start of the project, a tool to evaluate abstract quality was available from a preceding study,[6], which the planners of the study had to slightly adapt and extend for the purposes of the new area of indication" What adaptations were required? And again, not sure what "area of indication" means.

The previous investigation only checked whether the 16 CONSORT criteria were included. However, this turned out to be insufficient so that this study also checked "complete implementation" for 6 items. The survey tool had been adapted accordingly.

5. The literature search is limited to one database (which is highlighted as a limitation in the paper) however, it is not clear why such a short timeframe (01/2014-12/2016) was chosen. Perhaps this could be explained or listed as a limitation.

The search was limited in time to the three-year period of 01/2014 - 12/2016. Up to 2012, implantological abstracts had been examined by Kiriakou et al. A follow-up examination should therefore be carried out on more recent studies.

6. Page 8: in "methods" section. "dosis/therapy" isn't clear to me. Does this mean description of the intervention?

We have changed the sentence structure and terminology.

7. page 11/12 "when interpreting the findings of this study, readers should therefore be aware that inclusion of further databses might lead to a bias of results." It isn't clear to me. Do you mean that inclusion of more databses would result in bias (which would be a bad thing)? Or that there is bias in this study which could be overcome by using other databses? And what type of bias do you mean? Thank you for your comment. There is a bias in this study due to the inclusion of only ONE database. This means that the degree of implementation (CONSORT-A) presented here could differ slightly as some publications may not have been found.

We have corrected this issue in the main text and added a more detailed description.

8. Page 12 and 13: "rate of implication". I don't know what this means. Do you mean implementation?

We have corrected this mistake – thank you.

9. Page 15: " One option would be to check abstracts/publications for completeness of reporting as a preliminary step, followed by the actual review procedure". This is an interesting idea. One which might focus the mind when writing abstracts. However, there could be some negatives.

We have added a statement to explain this idea in more detail.

10. References: there are more oral health related papers which also identify the word count as a problem. Perhaps these could be referenced.

We have added a reference to the correlation between abstract quality and word count.

11. Registration of project.

This project was a doctoral thesis and therefore had not been registered.

Reviewer: 1

Competing interests of Reviewer: none declared

Reviewer: 2

Competing interests of Reviewer: None declared

Reviewer: 3

Competing interests of Reviewer: None Declared

VERSION 2 – REVIEW

REVIEWER	Levey, Colin University of Dundee
REVIEW RETURNED	30-Mar-2021

GENERAL COMMENTS	Thank you for making changes to the manuscript. It reads much more clearly and it is easier for the reader to interpret your descriptions and rationale. Despite this, there remain a number of minor typos which need to be looked at. I would suggest you get someone unfamiliar with the work to proofread it in detail.
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