



## EDITORIAL

## Presentation of studies at conferences and their final full publication in the field of neonatology in Spain



## Presentación de estudios en congresos y publicación final completa de los mismos en el ámbito de la neonatología Española

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The transfer of scientific knowledge to the medical community is essential for the advancement of medicine, especially in neonatology, a recent speciality with an enormous clinical impact on the most vulnerable population. The congresses of the Sociedad Española de Neonatología (SENeo, Spanish Society of Neonatology) provide a crucial platform for this purpose, allowing professionals to share and discuss their recent research, in addition to learning and integrating advances into their everyday practice. To date, no data had been reported regarding the publication of articles following the presentation of research findings at SENEo congresses. In the current issue of *Anales de Pediatría*, Bachiller Carnicero attempts to fill this gap.<sup>1</sup> His study offers a meticulous analysis of the translation of oral communications to publication in scientific journals, providing a unique perspective on the relevance and impact of these meetings on the medical lit-

erature. Few studies of the kind have been published that focused in the field of paediatrics.<sup>2</sup>

The study highlights the importance of SENEo meetings as catalysts of scientific progress in Spain, underscoring the quality of the presented research. With a publication rate of 40.4% for research presented in the form of oral communications, the findings were comparable with those for other paediatric specialities domestically and internationally,<sup>2,3</sup> which is indicative of a collective that is active and committed to excellence and scientific collaboration. The use of a cross-sectional design to assess the communications of three consecutive congresses also made possible to quantify the impact of research over time. The study also evinced that studies with a multicentre design and on specific topics, such as respiratory disease, were more likely to be published, which could guide future research planning and collaborations. The journals in which the articles were published were diverse, 70% were journals in the paediatrics or neonatology fields and 30% general medicine journals. The median journal quartile was the Q2, and the impact factor grew progressively over the 3 congresses under study. We ought to highlight that *Anales de Pediatría* was the journal most

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frequently used for publication, which reflects its position as a central resource in Spanish paediatrics.

Although this is a relevant study in terms of bibliometrics, these works can have certain limitations, mainly in relation to the risk of bias in the selection of articles and the duration of follow-up in identifying publication. The process for evaluating the abstracts submitted to the SENEo congress has been significantly standardised for many years, although it may not be known in detail by authors submitting the works.<sup>4</sup> This system rewards studies with high methodological quality, which are more likely to be accepted for presentation as an oral communication. On the other hand, studies with a poor design or a small sample size, with few exceptions, tend to be accepted for poster presentations. Previous studies have shown that results presented as oral communications are nearly twice as likely to be published compared to those presented as posters.<sup>2</sup> A detailed study of the proportion of studies published based on the form of presentation and the study design would be essential to determine the quality of neonatal research overall.

The process of identifying published studies can also give rise to bias. In his analysis, Bachiller Carnicero<sup>1</sup> used the Medline and Scopus databases. Most studies published to date (95.8%) used the Medline database.<sup>2</sup> Other sources that could be used to reduce search bias include Embase, Google/Google Scholar, the Cochrane Library, etc, in addition to data obtained by sending questionnaires directly to authors, manual journal searches, reference lists, etc.

The method used to link an abstract with full text publication, the agreement in the title and at least one author, seems adequate. However, it is well known that studies of large scope produce large volume of findings, so in congresses these findings may be split into several presentations with different titles, leading to underestimation of the proportion of presented studies that are actually published. For this reason, the simultaneous use of various criteria, besides the title and authors, such as the population under study, sample size, methods, key words, etc, or direct contact with the author of the abstract, could be useful to reduce the potential bias. Lastly, it is important to take into account that the name of the organization featured in meeting abstracts may not coincide with the name accepted by the Global Research Identifier Database, the database of research-related organization identifiers most frequently used in medical journal databases.

An aspect that is difficult to interpret in the study by Bachiller Carnicero<sup>1</sup> is the time elapsed between the presentation of results at the congress and their publication, partly because a large proportion (44.8%) had been submitted for publication or published prior to presentation in the congress. Other than that, the median time elapsed from presentation to submission to the journal, of 6 months (IQR, 5–17.5) or to publication, of 10 months (IQR, 1–23), was fairly consistent with the previous literature, in which it ranges from a few months to a few years.<sup>2</sup> The challenge in interpreting these results is that the reported mean or median time elapsed to publication depend on the duration of follow-up. For this reason, perhaps it would be necessary to carry out a survival analysis taking into account the duration of follow-up and censoring abstracts not published by the end of the follow-up period, as there is no way of knowing whether they were published at a later time.

In any case, the main questions that arise from the study by Bachiller Carnicero<sup>1</sup> are why more than half of the results presented as oral communications in SENEo congresses are not subsequently published and the potential reasons for it. We do not know how many of these studies were not submitted for publication and how many were submitted but rejected. There seems to be a discrepancy between the standards of acceptance in scientific meetings and the requirements of scientific journals. Congresses allow presentation of partial results that may be published later when the study has been completed. Other reasons that have been suggested in the past are a lack of time to submit or lack of agreement between authors.<sup>5</sup> Although the findings of Bachiller Carnicero<sup>1</sup> are encouraging as far as the progressive increase in the proportion of results presented in oral communications that are eventually published, a broader body of data shows that a growing number of projects are presented in congresses while the publication rate exhibits a declining trend.<sup>2</sup>

In conclusion, the study of Bachiller Carnicero<sup>1</sup> provides a valuable overview of the proportion of neonatal abstracts presented in SENEo congresses between 2017 and 2021 that are subsequently published, which showed positive results compared to other studies conducted in other fields or countries. The fact that fewer than half of the studies were eventually published merits further investigation of the reasons for it and the development of potential solutions. Some of the solutions that could be considered are the effective training and mentorship of young researchers in the context of residency and/or speciality training programmes, promoting a culture that supports research and providing adequate time and resources to ensure that the abstracts presented in scientific meetings lead to full publication, thus contributing to the advancement of medical knowledge and the quality of perinatal and neonatal care.

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