Does authors’ biodata in clinical trials registry affect blind peer review process? For the consideration of medical journal editors

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Summary

The clinical trial registry is an important platform to register clinical trials to be conducted, along with all the related information of the study, the institutions involved and the details about the authors. In the author’s opinion, this disclosure of information can effect the blind peer review process. Although medical journal editors try best to evaluate all related information, relationships and conflicts, but the disclosure in trials registry can effect the double-blind review process. This can also effect the reviewer’s decision and can be a source of bias. The authors of medical journals should consider this to further keep the review process transparent and unbiased.

Key words: Trials registry; Clinical trial; Medical journal; Review; Bias

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The clinical trials registry is a platform that registers clinical trials with the purpose to minimize the risk of bias during trial reporting and publication. This is mandatory for any randomized controlled clinical trials (RCTs) by the International Committee of Medical Journal Editors (ICMJE) as well as the World Association of Medical Editors (WAME). In September 2004, registration of clinical trials was made publicly available when the first edition was published by members of ICMJE and the journals listed in it follow its policies and guidelines.

The ICHR states that all the protocols will be made publicly available when a trial protocol gets a registration number. On the completion of the scientific study/trial, the article is sent to any journal for publication. For any submitted article an unbiased critical appraisal and an independent peer review of all submitted scholarly work is an important part of it. According to the policy of ICMJE, stated in Section II C.2.a-c of ‘Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals’, updated December 2021, the editors should maintain the privacy of authors and peer reviewers. The articles submitted to any journal like the Journal of Pakistan Medical Association (JPMA) undergo external peer review which is double-blind. Anaesthesia Pain and Intensive Care (APICARE) has also stated that they had a double-blind peer review process. However, it is practically impossible for the journal editors to send for double-blind peer review when full information and the data is available in the clinical trials registry. On the other hand, Rawal Medical Journal guidelines about the peer review process state that ‘it can be possible if the reviewer discloses conflicts, relations, financial interest, or otherwise’. According to the Pakistan Journal of Medical Sciences (PJMS), they have an open peer review system and the author can assign a reviewer, then the submitted manuscript is sent to two external reviewers, and that all the journal editors have editorial independence and do not always follow recommendations or decisions by any peer reviewer. These steps can also further justify the transparency and efforts of the editors, but the judgment of every peer review from different angles can be a difficult task for editors and their board members.

One of the statements given for anonymous preparation of manuscript is that the author should remove their references just to facilitate the editorial office to select a referee for blind peer review and the good thing is to replace the references after peer review. Eloisa Martin
states that peer review works and it’s an essential part of accreditation of the scientific knowledge. But a productive and reliable peer-review process along with unbiased views depends upon the selection of the reviewers and keeping the author's data masked. Andrew Tomkins stated that in the computer sciences, the research presented in a conference is just like having a peer review conducted by the journals. This author also favors a single-blind peer-review process as it has more advantages because of the addition of authors’ names with high prestige educational institutions. Mengyi Sun also seconded Andrew Tomkins that the peer review process can be affected because of the author’s prestige and many other related factors can bias the review process. The only way to make this process transparent is by using double-blind peer review process. But still mixed and limited evidence is used to support it. Some researchers have assessed records of 5027 files and found that the review format transition from single to double-blind resulted in fewer scores for the prestigious authors. Another study has compared the peer review process and its quality. This study has found that in all three levels of manuscript processing, e.g., the authors, the editors, and the peer-reviewers’ levels, significant improvement is associated with the review quality. It has been stated that double-blind peer review resulted in more accepted papers of women as the first authors, and less institutional bias/prestige was reported. Daniel has stated that among their survey of 322 journal editors from medicine, psychology, economics and ecology, only 61% permitted their authors to add specific reviewers and also against any reviewer to disclose any conflict with them. The majority of them were in favor of reviewing and co-reviewing, but they have highlighted another point for recommendation; the reviewers' work needs citation.

In Pakistan, peer review is considered as an ad hoc job, and a formality during the manuscript processing for publication. Another factor that merits due attention, and which can also affect the transparency is that the seniors forward their reviews to junior faculty. Such reviews affect the quality of scientific writing. A specific peer review performa can be a good evaluator for peer review. Masking of author’s identity improves the fairness and quality of peer review process, as was proved by a study carried out at five biomedical journals.

The author opines that the journals put in their maximum effort to improve the process of peer reviewing, and take unbiased, transparent, and fair decisions regarding acceptance or rejection of the papers; although some may argue in favor of linking it to the reviewer suggestions. The point is that the publicly available trials stating full particulars about the authors and their affiliations are available on the trial registries, which can affect the peer review process to some extent. This is the prime responsibility of the authorities including journal editors, trial registries, and ICMJE to consider this issue, as the disclosure of the author’s identity can affect the peer review process. Trial registries can mask the identity of authors, their institutions, and the responsible persons. The author’s details/information can be customized to responsible persons on specific account login. Secondly, the peer-review process should be exclusively by the reviewers from out of the country institutions, to avoid any personal and institutional associations. The peer reviewers having conflicts, interests and relations with the authors and their organization should be disclosed before peer review and act as neutral assessors.

Even though starting from in-house evaluation to peer review and the final decision is made by the editors of the journals, but it should be considered that double-blind peer review leads to the transparent evaluation of scientific knowledge and ensures the quality of research. The editors of medical journals have to work hard and make the best possible efforts along with their team members and reviewers in producing quality work. Paying due attention towards the small issues raised here can result in better outcomes in the future.

Conflict of interest
Authors own opinion about the peer review process and written in good will.

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