



26 March 2015

Memorandum

To: Trialists

Fr: Curtis Meinert

Re: Registration of trials

Registration of IND trials became a requirement with the Food and Drug Administration Modernization Act of 1997.

Registration was placed in the path of publication in 2005 when the International Committee of Medical Journal Editors (ICMJE) announced that trials, starting after 1 July 2005, had to be registered before the start of enrollment to be considered for publication in ICMJE journals.

Part of the reason for the ICMJE policy had to do with worries regarding publication bias. But the reality is that editors are as responsible for the bias as authors. Hence, it is difficult to see the policy as a fix for that problem.

So how is registration going?

Only 45% of the 2,168 publications (full length; English) indexed by the National Library of Medicine (NLM) to the publication types [randomized controlled trial] AND [multicenter study] published in the first half of 2014 carried registration numbers. The corresponding figure for the 7,869 publications indexed to the publication type [randomized controlled trial] NOT [multicenter study] was 31%.

How many of the trials were actually registered? No one knows. Absence of registration numbers in publications of trials means they were not registered or registered but numbers not reported.

Registrations contain information not usually found in publications (e.g., like when enrollment started and when data collection ended) and, hence, provides useful supplements to information in publications.

The focus should be on randomized trials. If a paper an editor is about to publish relates to results of a randomized trial, readers should be informed if the trial was registered and, if registered, should be provided the registration number(s).

An editor should regard a paper as containing results from a randomized trial if the results being presented are from two or more groups created by randomization, if the study is described as a randomized trial, or if results are analyzed as a randomized trial.

The information on registration should be in abstracts. Registration numbers in the bodies of manuscripts is less useful because it is more difficult to find and because, unlike abstracts available to anyone with access to PubMed, manuscripts are not so readily available.

The reason for the focus is because it is difficult to differentiate trials from observational studies without randomization. Many of the 10,892 publications indexed by NLM to [clinical trial] NOT [randomized controlled trial], on cursory inspection, were indistinguishable from observational studies. Only 7% carried registration numbers. Without randomization, it is difficult to distinguish trials from observational studies.

The ICJME policy of "no registration prior to the start of enrollment, no publication" is draconian. It should be revised along the lines proposed and thereby set a standard all journals could follow.

Trialists and sponsors of trials have been pushed, coaxed, urged, and coerced into registering. Now journal editors should do their part to make registration more useful.