EDITOrial

Better research reporting
for better patient care

L. Feetham, E. Raffan

HOW can vets in practice ensure that they are giving their patients the best possible treatment? This question lies at the heart of evidence-based veterinary medicine (EBVM), which states that the best evidence is needed, alongside clinical expertise, to make optimal treatment decisions.

The veterinary world is increasingly recognising the importance of EBVM and recent years have seen the establishment of the Centre for Evidence-Based Veterinary Medicine at the University of Nottingham (www.nottingham.ac.uk/cevm), the first meeting of the Evidence-Based Veterinary Medicine Network (Anon 2014a), and EBVM being included in two BVA Congress debates in 2013 (Anon 2013, 2014b).

EBVM is nothing without the evidence itself. A key, but sometimes overlooked, aspect of ensuring that the best evidence is available to practitioners is making sure studies are reported clearly, accurately and in a way that allows for results to be validated and repeated. Put simply, it isn’t enough to do good research; it must be reported well, too.

In human medicine, the movement towards improving the way that research is reported is in full swing. The Equator Network (www.equator-network.org) aims to ‘improve the reliability and value of published health research literature by promoting transparent and accurate reporting and wider use of robust reporting guidelines’. Reporting guidelines, put together by panels of experts and tailored specifically to different study types, provide researchers with a step-by-step guide on how to report their methods, results and conclusions clearly and accurately.

When these guidelines are followed, the information should be available to readers to check that the research was carried out ethically and in a scientifically valid way. They ensure that information is included which means that studies could be repeated elsewhere, and which facilitates comparison of data from different papers in a systematic way.

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review. An overview of the main reporting guidelines can be found in Table 1.

In medical publishing, research has shown that reporting guidelines can have a beneficial impact on the quality of reporting clinical studies. Cobo and others (2011) compared two sets of manuscripts – those subjected to conventional peer review alone and those that had conventional peer review as well as a review from a statistician who asked authors to provide extra details on any reporting guideline items that were incomplete or missing. They found papers that had undergone additional reporting guideline review were of higher quality than those that had not, although authors were not always compliant with the statistician’s requests for more information. Others have assessed the impact of the CONSORT guidelines for randomised trials (Moher and others 2001, Hopewell and others 2010), with results indicating that the quality of reporting in medical journals increased after they adopted the guidelines.

More than anything, adherence to reporting guidelines increases the credibility of published research. Those reading the final paper can know that they have all of the information they need to assess how robust the findings are and whether they should be taken into account in clinical decision-making.

All papers published in Veterinary Record undergo rigorous peer review, but this is not a flawless system and it can be particularly hard to notice where information has been left out. Use of reporting guidelines puts the onus on authors for full disclosure, rather than reviewers and editors to spot the ‘unknown unknowns’. For instance, the CONSORT guidelines for randomised clinical trials ask authors to report important changes to methods after trial commencement (such as eligibility criteria), with reasons. Mostly, omitting that information is a simple error, in which case the guidelines will prompt a correction. Unfortunately, however, experience in other fields has shown that, in some instances, authors might be tempted to omit such information to mask flaws in their research; in such cases, the act of signing a checklist explicitly stating they have done something might be enough to force a more honourable decision to include all the relevant information.

Many medical journals already require authors of clinical research to refer to the relevant reporting guidelines when writing their manuscript. From now on, Veterinary Record will also be asking authors to use a relevant reporting guideline checklist when writing up their research. Peer reviewers will also be made aware of these checklists, allowing them to assess whether the manuscript fulfils these important criteria.

The hope is that, by making the research we publish as clear, accurate and transparent as possible, the standard of evidence available to vets in practice will increase, allowing them to offer the best possible treatments to their patients.

For more information on how we will be incorporating reporting guidelines into our submissions process, please see our instructions for authors at: http://veterinaryrecord.bmj.com/site/about/guidelines.xhtml

### References

ANON (2015) Evidence-based medicine: can we trust the evidence? Veterinary Record 177, 540

ANON (2011a) Making evidence-based veterinary medicine work for clinicians. Veterinary Record 175, 499

ANON (2011b) Overcoming barriers to evidence-based veterinary medicine. Veterinary Record 174, 37-38


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**TABLE 1: Characteristics of several of the main research reporting guidelines**

<table>
<thead>
<tr>
<th>Name of guidelines</th>
<th>Full name</th>
<th>Used for</th>
<th>Example of checklist item</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONSORT</td>
<td>Consolidated Standards of Reporting Trials</td>
<td>Randomised trials</td>
<td>How sample size was determined</td>
</tr>
<tr>
<td>STROBE</td>
<td>Strengthening the Reporting of Observational Studies in Epidemiology</td>
<td>Observational studies</td>
<td>Indicate the study design with a commonly used term in the title or the abstract</td>
</tr>
<tr>
<td>PRISMA</td>
<td>Preferred Reporting Items for Systematic Reviews and Meta-Analyses</td>
<td>Systematic reviews and meta-analyses</td>
<td>Describe all information sources (eg, databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched</td>
</tr>
<tr>
<td>STARD</td>
<td>Standards for Reporting of Diagnostic Accuracy</td>
<td>Studies of diagnostic accuracy</td>
<td>State the reference standard and its rationale</td>
</tr>
<tr>
<td>COREQ</td>
<td>Consolidated Criteria for Reporting Qualitative Research</td>
<td>Qualitative research</td>
<td>How many data coders coded the data?</td>
</tr>
<tr>
<td>ARRIVE</td>
<td>Animal Research: Reporting of In Vivo Experiments</td>
<td>Research using laboratory animals</td>
<td>Provide details of animal housing (type of facility, eg, specific pathogen-free, type of cage or housing, bedding material, number of cage companions, tank shape and material etc for fish)</td>
</tr>
<tr>
<td>CARE</td>
<td>Case Reports</td>
<td>Case reports</td>
<td>The words ‘case report’ should be in the title along with the area of focus</td>
</tr>
</tbody>
</table>

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