

## **Clinical Trial reporting and the Journal of Investigative Dermatology**

**Hywel Williams**

The *Journal of Investigative Dermatology* (JID) is the leading scientific dermatology journal with an impact factor of 5.25 in 2008. The JID publishes original research on all aspects of cutaneous biology and skin disease. Although the majority of the journal content deals with basic science, its scope includes clinical research, clinical trials and epidemiology. I have been fortunate in working for the JID for the last 6 years as section editor, with particular responsibilities for clinical trials. In 2006, the JID made a clear announcement that it would welcome high quality clinical trial submissions, providing they were registered prospectively and that they adhered to the CONSORT checklist<sup>1</sup>.

Stating such intent is all very well, but how does a journal like the JID go about implementing CONSORT and compulsory trial registration and how does it check on compliance to CONSORT?

This is how we did it. I first met with the Managing Editor, Elizabeth Blalock. We devised a system whereby submissions referring to clinical trials are reviewed by the JID office for trial registration details and adherence to CONSORT (i.e., submission of CONSORT checklist, flowchart, and appropriate manuscript headings). When the editorial office is in doubt whether the submission is a therapeutic trial (which is not always easy with studies that mainly look at disease mechanisms), the staff sends me the article to check. If it is deemed to be a therapeutic trial, then the editorial office contacts the authors for proof of trial registration and adherence to CONSORT prior to admitting the manuscript for peer review. Only those submissions in compliance with the full CONSORT (and journal) requirements are sent for content and methodological peer review. Otherwise, I send a note to the Editor-in-Chief recommending immediate rejection.

The project has been quite successful with little additional resource implications. The editorial staff (two members) have had to undertake some additional work in screening submissions and querying those they are unsure of, but they have enjoyed the work and they have acquired some new skills in assessing good clinical trial reporting. Most of the work ie explaining where in the document key items have been reported, is pushed back to the authors. The authors are highly motivated to do this as they know that the manuscript will not be processed further until they have met these requirements (which are clearly placed on the journal's online author instructions). Whilst it is true that the JID publishes few trials, those that are published are of high quality<sup>2</sup>.

On a personal level, the project has been good fun, and has meant little additional work to my role as section editor with responsibilities for clinical trials. In fact, it has made my job of checking manuscripts much easier as I can quickly see where on the manuscript the key CONSORT items are meant to be described. It is clear from some of the submissions that some authors have not heard about trial prospective trial registration. When queried, some authors try and register their trial retrospectively after the analysis has been carried out, which defies the purpose of registration. Such papers are returned by the Editor to the authors without further review. I hope this model of working with journal editorial staff teams can help other journals improve reporting of trials in an efficient way. The key ingredients are (i) a committed journal editor (ii) editorial staff willing to take on new roles and (iii) a section editor with an interest in clinical trials to take responsibility for being arbiter for checks and borderline decisions.

Hywel Williams is Clinical Trials Editor, *Journal of Investigate Dermatology* and Professor of Dermato-Epidemiology, Centre of Evidence-Based Dermatology, University of Nottingham

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### **References**

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