



Editorial

Presentation of free papers at SCHOT Congress and its publication rate: What is our reality?

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One of the most important stages of medical research is the presentation of scientific results with the best possible evidence. Publication in peer-reviewed journals is considered the “gold standard” of scientific dissemination, since they provide more detailed information allowing a critical analysis of what is presented.¹ On the other hand, podium presentations at congresses are the fastest way to disseminate, but they are presented in abstracts with limited information and that could influence clinical decisions without necessarily being high-quality evidence.² That is why one of the parameters to assess quality of medical congresses has been to measure the publication rate of articles presented on the podium.

Publication rates have been reported in Orthopedics and Traumatology Congresses between 40 and 67%,^{3–6} with up to 90% of the abstracts published in a 4-year period in some societies.⁷

The SCHOT congress has had significant growth in recent years both in its quality, number of attendees and increase in free papers sent and accepted, becoming one of the largest scientific congresses in our country and Latin America. However, despite the fact that the ways of communicating scientific information are now more expeditious, the publication of articles remains poor. In the last 7 years (2013–2019), 1,599 papers were presented on the podium at the SCHOT congress. The publication rate was 13.45% (215/1599), with the knee (23.72%), foot and ankle (17.67%), hip (17.21%) and spine (13.91%) the committees with the highest number of publications found.

The years of the congress that registered the highest publication rate were 2014 and 2017 with 18.71% and

16.42%, respectively. The year 2016, despite having a high number of submissions (318), had a publication rate of 11.6%.

Despite not being statistically significant, the prevalence is higher in the articles from academic affiliations (50.98%), followed by clinical-academic affiliations (14.21%), and lastly, by exclusively clinical affiliations (34.80%). This correlates to what was previously described by Castaldi et al,⁸ which highlighted that 68% of the publications are related to a university institution. Therefore, it is essential to promote the development of research in centers not linked to university institutions and to generate the appropriate conditions for this, since their casuistry and experience can be fundamental for the scientific community.

According to our results, the publication rate at the SCHOT congress is 13.45%, which is significantly lower than that described in the international literature^{3–6} and lower than the 26.6% reported by Ejnisman et al in 2013⁹ in the Brazilian Congress of Orthopedics and Traumatology, showing that despite the great efforts to publish, we are still in deficit.

Most of the presentations that were published were observational (79.53%), this being associated with a lower quality of evidence compared to experimental studies. Finally, it is important to highlight that, of those published works, 55.81% were published within 2 years of their presentation, presenting similar results to those described by Lee et al.¹⁰

It is important to be aware that more than 80% of the abstracts presented at the SCHOT Congress are not published and that our rate of publication of papers presented on podium in international journals and our RSCHOT journal are frankly lower than those reported. Therefore, it is a challenge for our Society and RCHOT Editorial Committee

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to stimulate research in our country and increase our publication rate, which is frankly lower than the standards of other congresses.

This editorial, based on research on the publication rate of papers presented at the SCHOT Congress, only shows us we are still far from the accepted standards in other publications and congresses. This should stimulate the researchers who present in our congress to transform their works into publications which are the “gold standard” and the way to adequately transmit the clinical experience and research for increasing knowledge in favor of a better management and better results for our patients, who are our final goal.

Both our Society, journal and institutions involved in research must take the leap to improve this deficit that we have not been able to improve.

Conflict of Interest

No conflict of interest has been declared by the author(s).

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