Identifying trials run in India that are registered in other clinical trial registries

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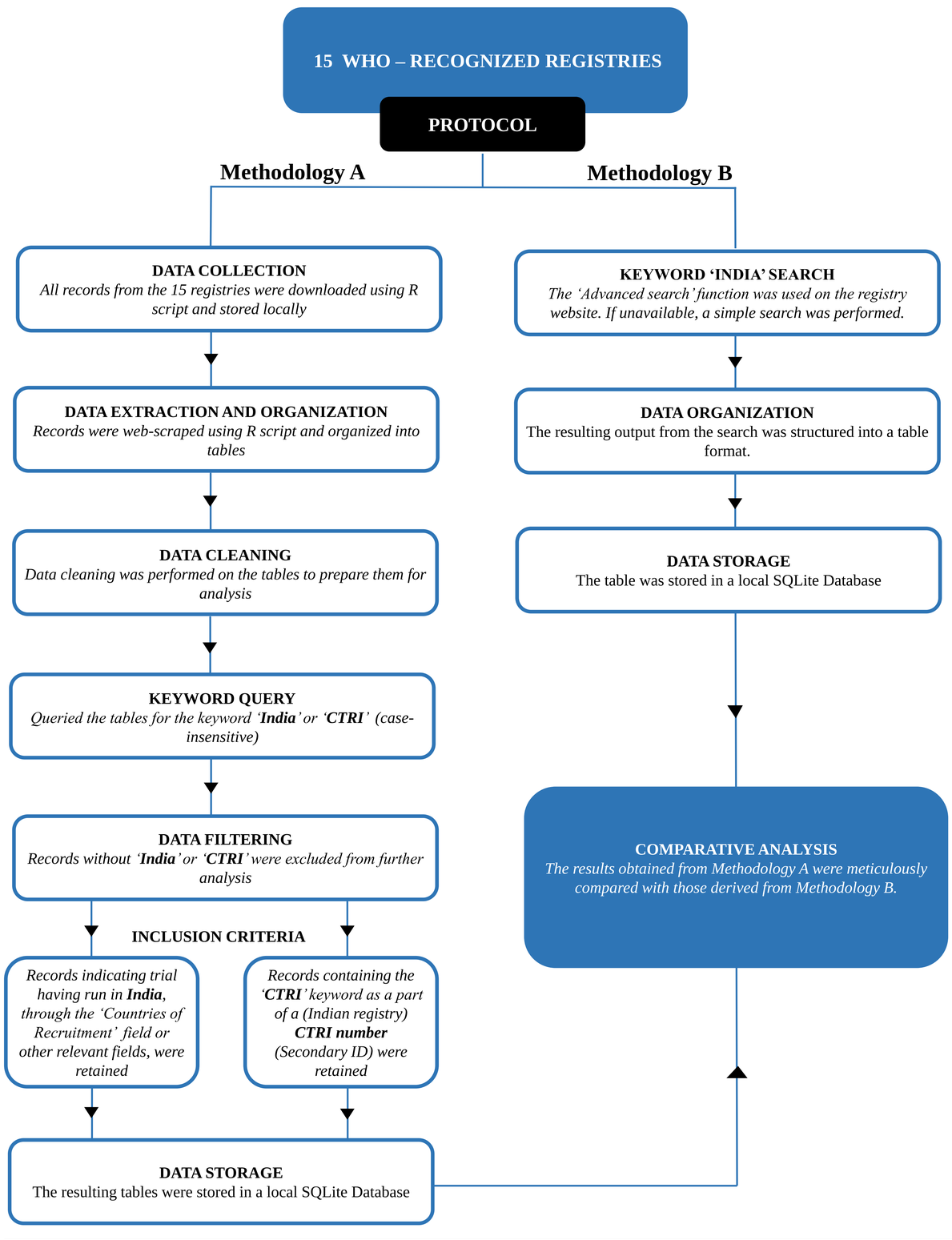
ABSTRACT

Clinical trial registries play a vital role in promoting transparency and accountability of clinical research. These repositories of information serve as essential resources for researchers, healthcare professionals, regulators, and the public. The World Health Organization recognizes almost two dozen registries as data providers to its International Clinical Trials Registry Platform.
The timely, correct, and comprehensive recording of study details such as protocols and findings in a public register helps in the transparency of the clinical research enterprise. Despite the importance of trial registries, several deficiencies exist. Challenges include unregistered studies, false or incomplete data, non-reporting or delayed reporting of results, and discrepancies in the details of registered studies.
This study aims to identify the steps required to locate all studies conducted in India registered in 15 of the (non-Indian) WHO-recognized registries which are, ANZCTR, ChiCTR, CRIS, DRKS, IRCT, ISRCTN, ITMCTR, jRCT, LBCTR, PACTR, ReBEC, REPEC, RPCEC, SLCTR, and TCTR. Two methodologies were employed for each registry, where applicable. Methodology A involved downloading all registry records and querying for the keywords 'India' and 'CTRI' to identify Indian studies. Methodology B involved searching the registry websites for the keyword ‘India’, preferably using advanced search options, and when unavailable, utilizing simple search functions. Not all registries facilitated the use of both methodologies.
The findings of this study provide insights into the limitations of the search options of various registries in identifying trials conducted in India. This study aims to contribute to the improvement of trial registry practices and enhance transparency in clinical research.

OBJECTIVE

To determine the number of trials in the above-mentioned registries, conducted in India

MATERIALS AND METHODOLOGY



RESULTS

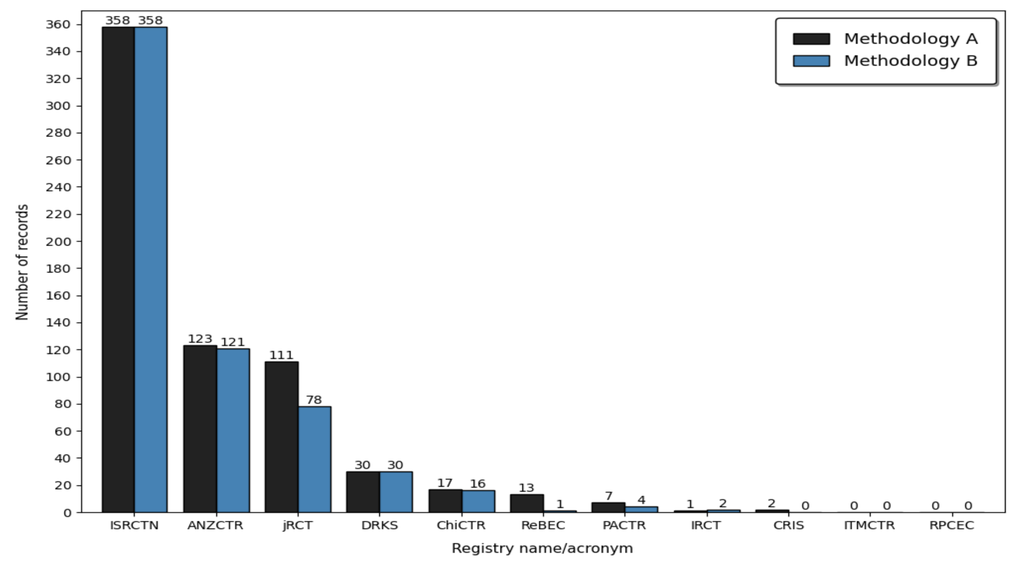
The results obtained by Methodology A and Methodology B (where feasible) are summarized in the table below:

	Registry name or acronym*	Methodology A			Methodology B
		Methodology A, overall	From the Countries of recruitment field	From other fields	
I. Registries for which both Methodology A and Methodology B could be used					
(a) Those for which Methodology A and Methodology B yielded the same result					
1.	DRKS	30	30	0	30
2.	ISRCTN	358	358	0	358
3.	ITMCTR	0	0	0	0
4.	RPCEC	0	0	0	0
(b) Those for which Methodology A and Methodology B did not yield the same result					
5.	ANZCTR	123	121	2	121
6.	ChiCTR	17	16	1	16
7.	CRIS	2	2 (from Study site)	0	0
8.	IRCT	1	0	1	2
9.	jRCT	111	111	0	78
10.	PACTR	7	4	3	4
11.	ReBEC	13	13	0	1
II. Registries for which only Methodology A could be used					
(a) Those for which the field Countries of recruitment yielded all the trials that had run in India					
12.	LBCTR	23	23	0	Not feasible
(b) Those for which the field Countries of recruitment did not yield all the trials that had run in India					
13.	REPEC	346	345	1	Not feasible
14.	SLCTR	29	27	2	Not feasible
III Registry for which only Methodology B could be used					
15.	TCTR	Not feasible	-	-	6

*** Expansions of the acronyms of the registries listed above:**

1. **ANZCTR**: Australian New Zealand Clinical Trials Registry
2. **ChiCTR**: Chinese Clinical Trial Registry
3. **CRIS**: Clinical Research Information Service, Republic of Korea
4. **DRKS**: German Clinical Trials Register
5. **IRCT**: Iranian Registry of Clinical Trials
6. **ISRCTN**: (ISRCTN is not an acronym any more)
7. **ITMCTR**: International Traditional Medicine Clinical Trial Registry
8. **JRCT**: Japan Registry of Clinical Trials
9. **LBCTR**: Lebanese Clinical Trials Registry
10. **PACTR**: Pan African Clinical Trials Registry
11. **ReBEC**: Brazilian Registry of Clinical Trials
12. **REPEC**: Peruvian Clinical Trials Registry
13. **RPCEC**: Cuban Public Registry of Clinical Trials
14. **SLCTR**: Sri Lanka Clinical Trials Registry
15. **TCTR**: Thai Clinical Trials Registry

Number of trials that had run in India as identified by Methodology A and Methodology B



DISCUSSION

The primary objective of our study was to establish a comprehensive approach for identifying all clinical studies conducted in India and registered in 15 non-Indian registries recognized by the World Health Organization (WHO) as data providers to its registry portal. Our findings revealed that only four registries provided a consistent and unambiguous count of clinical studies using both methods. However, we encountered discrepancies in six registries where certain records displayed conflicting information by Methodology A, with one field indicating that the trial ran in India, and another field suggesting otherwise. This ambiguity has significant implications for the accuracy and transparency of clinical trial reporting. Although the number of discrepant records was relatively small, we recognize the significance of this phenomenon and the potential impact on future trial-related meta-research. Being mindful of these discrepancies will improve the reliability and quality of clinical trial data.

In conclusion, our study sheds light on the complexities involved in identifying clinical studies conducted in India across various international registries. By highlighting the need for consistent and reliable data reporting practices, we aim to contribute to the advancement of evidence-based research and the overall integrity of clinical trial data.

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