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REWARD | EQUATOR Conference 2020

BOOK OF ABSTRACTS

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Practices of transparency and reproducibility in systematic reviews with meta-analyses of physical activity interventions: a report from the SEES initiative

Botton C.E.¹, Oliveira N.L.¹, Umpierre D.²

¹Universidade Federal do Rio Grande do Sul / Health Institute for Technology Assessment / Exercise Pathophysiology Laboratory, Hospital de Clínicas de Porto Alegre, Porto Alegre, Brazil, ²Universidade Federal do Rio Grande do Sul / Department of Public Health / Health Institute for Technology Assessment / Exercise Pathophysiology Laboratory, Hospital de Clínicas de Porto Alegre, Porto Alegre, Brazil

Background: Some measures, such as registry platforms and methodological protocols, increase the transparency, reproducibility and accountability to multiple stakeholders. However, the uptake of such recommendations and good practices is challenging. The Strengthening the Evidence in Exercise Science (SEES Initiative) proposes that lively surveillance, openness and respectful feedback to authors and journal editors may foster the efforts to reduce the avoidable waste in research. Herein, our aim was to quantify the practices regarding registration, methodological protocol, selective reporting and data sharing on systematic reviews with meta-analyses (SRMAs) from selected journals in the field of exercise sciences, from January to July/2019.

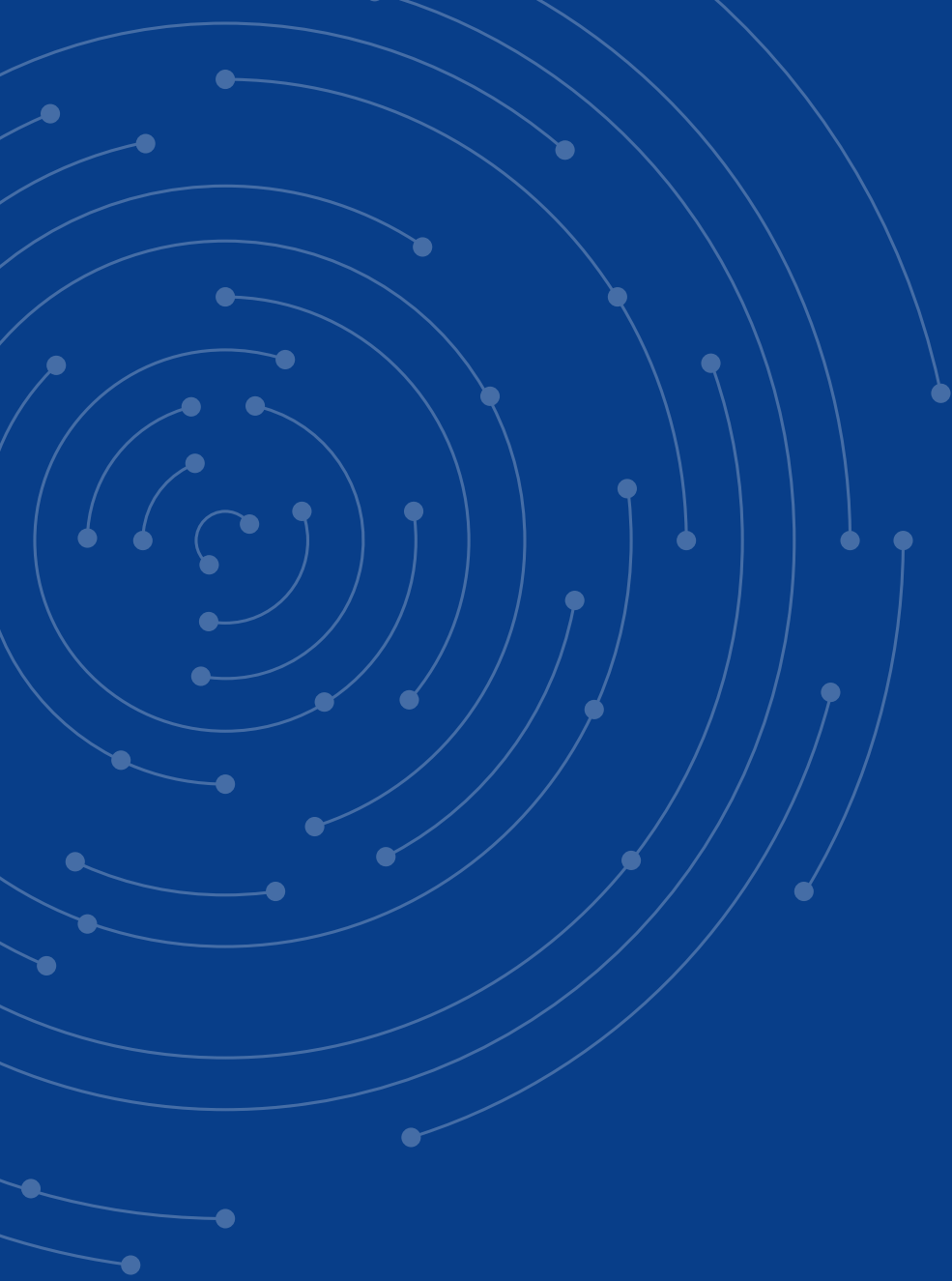
Methods: This work derives from the SEES Initiative and a full protocol is available at sees-initiative.org/protocol. Structured search queries using PubMed/MEDLINE were conducted for 9 journals on a monthly basis. Eligible criteria were SRMAs summarizing clinical trials with at least one arm consisting of interventions of physical activity/exercise or observational studies with well defined physical activity exposures. Two independent researchers extracted the following information from included reports: (1) public database registration, (2) registered and published outcomes; (3) publicly available methodological protocol; (4) statement of data availability. Our assessment is based on PRISMA¹ and AMSTAR-2².

Results: From 63 SRMAs, 32 (50.7%) were registered, all in the PROSPERO database, whereas only two (3.1%) had a publicly available methodological protocol. Out of the registered SRMAs, 10 (31.2%) had apparent selective reporting, either omitting or switching outcomes from the registration to the publication records. The data sharing statements were present in 18 (28.5%) reviews. One article stated no additional data available for sharing, 7 (11.1%) indicated the need to contact corresponding authors, 7 (11.1%) made data available in a supplementary material, and 3 (4.7%) in public repositories.

Conclusions: Although several guidelines and journals endorse registration of SRMAs, and highlight the importance of available methodological protocols to increase transparency and reproducibility, a low proportion of SRMAs followed these practices. Likewise, less than 1/3 of SRMAs declared data sharing policy, and only 10 (out of 63) made the summarized data readily accessible.

Literature references: 1. Liberati A, Altman DG, Tetzlaff J, Mulrow C, Gøtzsche PC, Ioannidis JPA, et al. The PRISMA statement for reporting systematic reviews and meta-analyses of studies that evaluate health care interventions: explanation and elaboration. *PLoS Med*. 2009 Jul 21;6(7):e1000100.

2. Shea BJ, Reeves BC, Wells G, Thuku M, Hamel C, Moran J, et al. AMSTAR 2: a critical appraisal tool for systematic reviews that include randomised or non-randomised studies of healthcare interventions, or both. *BMJ*. 2017 Sep 21;358:j4008.



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