



## In reply: A two-stage review process for randomized controlled trials: the ultimate solution for publication bias?

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### To the Editor,

Drs Law and Lo raise some intriguing points in their letter proposing a two-stage approach to peer review.<sup>1</sup> Although there are most definitely some limitations with their proposed approach, I fully agree with the concept of assessing the *validity* of a manuscript (via its research question, hypothesis, methods, and baseline characteristics of its participants) separately from its *results*. Indeed, several journals have already established whole sections dedicated to accepting papers for publication even *before the conduct of the experiments* under the proviso that the authors have received an “in-principle acceptance” after peer review of their submitted study protocols from the journal.<sup>2</sup>

According to Law and Lo, one of the potential drawbacks of their proposal is that the impact factor of a particular journal may be affected (presumably negatively) if the journal elects to publish more negative studies. Implicit in this argument is the assumption that a negative study is somehow less citable than a positive study. It also assumes that the impact factor is an important quality metric, which is a highly debatable assertion. I believe the assumption of a negative study being less citable than a positive study is untrue. Indeed, in an era of worldwide fiscal austerity where healthcare cutbacks are occurring in

virtually every country, negative studies - which can result in the disinvestment of wasteful practices or expensive but ineffective therapies<sup>3,4</sup>—have particular value and deserve even more citations so more healthcare providers are aware of the research.

**Conflicts of interest** None declared.

**Editorial responsibility** This submission was handled by Dr. Hilary P. Grocott, Editor-in-Chief, *Canadian Journal of Anesthesia*.

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