

Original Article

Quality Evaluation of Abstracts Presented at the Society of Gynecologic Surgeons Annual Scientific Meeting

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ABSTRACT **Study Objective:** To examine the rate of abstract publication from the Society of Gynecologic Surgeons Annual Scientific Meeting (SGSASM), 2004 to 2012.

Study Design: This is a retrospective study in which all abstracts presented at the SGSASM from 2004 to 2012 were reviewed. Information was collected on oral (O), oral poster (OP), and poster (P) presentations. To evaluate for publication, all abstracts were searched for in the US National Library of Medicine's PubMed database. Chi-square tests were used to evaluate whether there were differences in distribution of published studies by first author location and affiliation and number of abstract authors.

Design Classification: Canadian Task Force III.

Measurements and Main Results: In total, 867 abstracts were reviewed, including all O, OP, and P presentations. Video and tips and tricks presentations were excluded. Overall rate of publication for all abstracts from 2004 to 2012 was 55.7%, comprising 82.4% for O presentations, 60.9% for OP presentations, and 41.4% for P presentations. There was no significant difference in location for published abstracts ($p = .878$), although published abstracts had a significantly greater number of authors ($p < .001$). Abstracts presented by authors from university programs were more likely to be published ($p < .001$). For all presentation types, the mean number of citations for published abstracts was different for the 9-year period (O, OP, and P: $p < .001$), with an overall decline toward the end of the assessment period.

Conclusion: Over a 9-year period (2004–2012), the rate of abstract publication at the SGSASM was 55.7%, which is similar to other academic meetings. The comparability of this publication rate shows that the abstract selection committee is able to select high-quality research with limited information provided in abstract submissions. Journal of Minimally Invasive Gynecology (2015) 22, 1045–1048 © 2015 AAGL. All rights reserved.

Keywords: Abstracts; Society of Gynecologic Surgeons; Publication rate

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Scientific meetings play a vital role in the exchange of information. Meetings are widely attended by individuals

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from diverse locations with a variety of clinical and research experience. These gatherings provide a vital role for exchange of ideas. Because of widespread attendance, it is vital that information presented at clinical meetings is of high quality. Research presented at annual scientific meetings does not undergo the close scrutiny that peer-reviewed journals provide. The selection committee for each program must evaluate all submissions and select projects to be presented using limited data. Examining publication rates of abstracts presented at conferences provides a measure of quality of the selection committee's work.

Publication rates of meeting abstracts vary widely across disciplines, from 21% at dentistry meetings [1] to 69% at

otorhinolaryngologic conferences [2]. Within this range, we found general surgery at 56% to 57% [3,4], plastic surgery at 45% [5], neurology at 37% [6], and anesthesia at 43% [7]. A recent study by Muffly et al [8] found the rate of abstract publication from the 2007 to 2008 Annual Scientific Meeting of the American Urogynecologic Society to be 56%. To date, there are no studies examining the rates of abstract publication in surgical gynecology. In this study we examined the rate of abstract publication from the Society of Gynecologic Surgeons Annual Scientific Meeting (SGSASM) from 2004 to 2012.

Methods

The Institutional Review Board at Hartford Hospital exempted this study from oversight. This is a retrospective study in which all abstracts presented at the SGSASM from 2004 to 2012 were reviewed. Information was collected on oral (O) presentations, oral poster (OP) presentations, and poster (P) presentations. Video and tips and tricks presentations were excluded from this review. To evaluate for publication, all titles of abstracts were searched in the US National Library of Medicine's PubMed database. Abstracts were sought using both matching and similar to presented abstract titles to capture all publications. The following information for each abstract was collected: title, author names, primary author affiliation, number of authors, type of presentation (O, OP, or P), journal of publication (if published), impact factor of publishing journal (if published), affiliation of primary author (community or university hospital), number of citations (if published), time from conference presentation to publication (if published), location of first author (United States or international). If authors were from both US and international locations, the abstract was classified based on the location of the first author. Number of citations was evaluated using Google Scholar.

To evaluate for publication, the US National Library of Medicine's PubMed database was queried for abstract title and author's name. An abstract was considered published if the objective and data in the abstract and the published article were similar. If the published work differed in study objective despite inclusion of the same data, this was not considered publication.

We examined overall rate of publication, which is reported as a percentage using all submissions to SGSASM (in each year and cumulatively) as the denominator. Publication was categorized by abstract type (O, OP, or P presentation). We evaluated if author location (United States or international), author affiliation (community or university), or number of abstract authors

were associated with publication by examining the difference in distribution of published studies by location type using a χ^2 test. Number of citations was further used to evaluate the quality of studies.

All statistics (descriptive and inferential) were analyzed with SPSS version 21 (IBM, Armonk, NY). Descriptive statistics comprised means and standard deviations (SDs). Weighted averages were calculated for overall numbers by year and by type of presentation within a given year. Inferential statistics comprised χ^2 analyses for categorical data and analyses of variance for continuous data between more than 2 groups. An a priori alpha level of .05 was used such that all results yielding $p < .05$ were deemed statistically significant.

Results

In total, 867 abstracts were reviewed: 205 O presentations (23.6%), 203 OP presentations (23.4%), and 459 P presentations (52.9%). The success of publication for all abstracts from 2004 to 2012 was 55.7%, comprising 82.4% for O presentations, 60.9% for OP presentations, and 41.4% for P presentations. These percentages remained constant over the 9-year period examined (Table 1). When comparing likelihood of publication between O and OP presentations, O presentations were 35% more likely to be published (odds ratio, 1.35; 95% confidence interval, 1.19–1.54; $p < .001$). When OP and P presentations were compared, OP presentations were 47% more likely to be published (odds ratio, 1.47; 95% confidence interval, 1.26–1.72; $p < .001$).

Time to publication for all 3 categories of abstracts ranged from 5 months before abstract presentation to 82 months after abstract presentation, with a mean \pm SD of 12.7 ± 11.7 months. Comparing abstracts that were published versus those that were not, there was no significant difference in location ($p = .461$). Published abstracts had a statistically greater number of authors ($p < .001$); the mean number of authors for published abstracts was 5.0 (SD, 20.6) and for nonpublished abstracts, 4.5 (SD, 1.9). Abstracts presented by authors from university programs were more likely to be published ($p < .001$). Of abstracts presented by university programs, 57.8% were published, compared with a publication rate of 26.8% of abstracts presented by community programs. Of the 213 SGSASM abstracts that were published in the *American Journal of Obstetrics and Gynecology* between 2005 and 2012, 84.8%

Table 1

| Yearly rate of abstract publication | | | | | | | | | | |
|-------------------------------------|------|------|------|------|------|------|------|------|------|-----------|
| Presentation type | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | All years |
| Oral | 90.0 | 78.3 | 91.3 | 87.0 | 78.3 | 76.2 | 78.9 | 75.0 | 82.6 | 82.4 |
| Oral poster | 58.3 | 61.5 | 58.3 | 73.3 | 81.3 | 55.0 | 52.4 | 66.7 | 54.2 | 60.9 |
| Poster | 44.0 | 30.2 | 43.8 | 46.8 | 47.6 | 54.8 | 25.0 | 34.0 | 44.0 | 41.4 |
| All | 57.6 | 47.2 | 56.6 | 62.4 | 63.0 | 60.2 | 46.1 | 50.5 | 55.7 | 55.7 |

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