

Reply to “Are Meeting Presentations a Springboard to Publication?”

TO THE EDITOR:

We appreciate the efforts of Dr Pautrat, et al to explore rates of publications arising from conference presentations.¹ Working within the Military Primary Care Research Network (MPCRN), we noticed a similar phenomenon: authors presented high-quality studies at conferences, but did not submit them to peer review, thus limiting their impact. We would like to offer our experience in attempting to tackle this problem.

MPCRN founded a virtual peer-supported writing coaching program, called Writing Rounds, and recruited participants presenting at the Uniformed Services Academy of Family Physicians conferences. Writing Rounds is a series of five virtual meetings occurring once a month with a small group of peers and an experienced writing coach. The rounds are hosted virtually through an online videoconferencing platform. During the sessions, Writing Rounds members engage in the weekly discussion topic and provide constructive feedback on each other's work. We are happy to report that our small pilot program has had nine participants across two cohorts. These nine authors submitted seven works to peer review (77.8% submission rate), with two publications to date.² Many of our participants reported that without the program, they would have been unlikely to even submit their work to peer review.

Though small in scope and with a selective sample, we feel our work builds on that of Dr Pautrat's team. While many presentations are not moving on to publication, perhaps with the right kind of support and coaching, more conference presentations could enter the sphere of peer-reviewed literature. Furthermore, in this issue, Drs Mainous and Saultz³ point out there is significant faculty development value in the process of presenting. We agree, and think there is a similar faculty development value in moving through the peer-review process, even if a rejection results, thus we measured our success in terms of submissions, rather than acceptances.

We encourage further research to explore the best strategies to support authors who want to use their conference presentations as a foundation to publish. We found our curricular design, based in self-determination theory,⁴ increased motivation and facilitated submissions. The expertise of the coach, feedback from peers, and accountability to the group were also key facilitators. Other research networks, family medicine departments, and research teams should leverage as many of these principles as possible when designing programs to increase publication of previously presented works.

doi: 10.22454/FamMed.2022.752944

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French Innovation to Improve the Publication Rate of Primary Care Studies

TO THE EDITOR:

We thank Dr Winnie and Mr Jackson for their interest in our work and for sharing their innovative programmes to promote publications within their research teams. In response, we would like to share our experience.

The first step in transferring scientific knowledge is to identify outstanding and potentially publishable studies from the wide pool of research produced. As Drs Mainous and Saultz reported, “traditional wisdom in academic medicine has considered peer-reviewed research presentations at scientific meetings to be the first step in a virtuous cycle that leads to peer-reviewed publications.”¹ We agree with the authors that it is time to reconsider the goals of scientific meetings. The value of many studies presented at congresses is to stimulate networking, and exchange and challenge ideas with colleagues. Only a few studies have the potential to be accepted for publication in peer-reviewed-scientific journals. However, innovative formats such as “one slide, 5 minutes” sessions have become popular to help these studies emerge. These sessions are specifically designed to quickly and proactively distinguish whether a study is robust enough to reach publication and explore appropriate journals.

The second step is to support the research team throughout the entire publication process. Drs Winnie and Jackson describe the virtual peer-supported writing program called Writing Rounds, founded by the Military Primary Care Research Network.² Working in a small group of peers led by an experienced scientific writer, and benefiting from each other’s constructive feedback, is an effective way of improving the quality of articles. It also keeps the team motivated. Similarly, in France, a continuing professional development programme for general practitioners entitled “Write and Publish” provides adequate help to turn a completed research project into an article ready for submission.³ In parallel, to improve the reporting quality of studies, there are other hurdles to jump over during the publication process. From a sample of 1,191 French researchers, 87% would accept technical support, especially in English editing, critical editing, or formatting.⁴ Interregional clinical research and innovation groups (GIRCI-Groupements

interrégionaux pour la recherche clinique et l’innovation) were designated by the French Ministry of Health in 2011. In western France, the west France GIRCI created a specialized team to support primary care research. One of the functions of this team is to provide medical writing assistance for those researchers who need additional support. This research support involves any part of the publication process from the study protocol to the results and publication.⁵ This team was created in September 2019 to structure and promote clinical research alongside local medical research teams in each and every department of the five primary care departments of western France. The team is composed of a clinical research manager, a professor of general practice and consultant statisticians and medical writers. Up until September 2021, with the support of the team, 20 articles have been published, of which one is the article Dr Winnie and Mr Jackson cited, and eight research grants worth over 1.3 Million euros have been won.

doi: 10.22454/FamMed.2022.935143

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