An Analysis of Duplicate Presentations at the 2014 Through 2016 AOSSM and AANA Annual Meetings

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Background: Previous studies have shown a high incidence of duplicate presentations at research conferences within different medical disciplines.

Purpose: To determine the rate and analyze characteristics of duplicate presentations at the American Orthopaedic Society for Sports Medicine (AOSSM) and Arthroscopy Association of North America (AANA) Annual Meetings.

Study Design: Cross-sectional study.

Methods: Meeting programs for the 2014 to 2016 AOSSM and AANA Annual Meetings were searched. All podium presentation abstracts from each AOSSM meeting were cross-referenced with podium presentation abstracts from AANA meetings from all 3 years of the study period to locate all duplicate presentations. Duplicate presentations were then analyzed for changes in abstract title, author order, and addition or removal of authors.

Results: A total of 192 and 213 abstracts were accepted for podium presentations at the AOSSM and AANA Annual Meetings, respectively, during the study period. This included 65 presentations at the 2014 AOSSM Annual Meeting, 72 in 2015, and 55 in 2016. Overall, 28 AOSSM presentations (15%) were also presented at an AANA Annual Meeting, including 9 (14%) from the 2014 AOSSM meeting, 15 (21%) from the 2015 meeting, and 4 (7%) from the 2016 meeting. Of the 28 duplicate presentations, authors often altered their abstracts in several ways, including changing the abstract title (14; 50%), changing the author order (17; 61%), and adding or removing authors (10; 36%). Duplication rates were not significantly different between the years (P = .10).

Conclusion: A moderate proportion of abstracts presented at the AOSSM and AANA Annual Meetings are duplicates. Meeting committees may want to consider stricter guidelines to ensure only original work is presented at these meetings.

Keywords: AANA; AOSSM; duplicate presentations; podium presentations

National and international research conferences are a valuable way in which medical researchers can share their findings with a large audience. An objective of these meetings is often to present original work, and typically there are guidelines in place that attempt to prohibit the submission of abstracts that have already been presented at another meeting. Despite this, studies have shown that duplicate presentations do exist at large conferences within different fields of medicine, including orthopaedic surgery, urology, and family medicine. Kraeutler et al found that among all articles published in the American Journal of Sports Medicine (AJSM) in 2014, 83% were presented at a national or international conference and, among those studies presented, 33% were presented at more than 1 meeting.

No study has previously sought to determine the rate of duplicate presentations at different orthopaedic sports medicine conferences. The purpose of this study was to determine the rate and analyze the characteristics of duplicate presentations at the American Orthopaedic Society for Sports Medicine (AOSSM) and Arthroscopy Association of North America (AANA) Annual Meetings.
METHODS

Meeting programs for the 2014 to 2016 AOSSM and AANA Annual Meetings were searched. All abstracts for podium presentations at each AOSSM meeting were reviewed and cross-referenced with all podium presentation abstracts from all AANA meetings during the study period. Abstracts were considered duplicates if the following criteria were met: similar or identical author list, similar or identical abstract title, and similar study design and purpose. This process was repeated for each of the 3 years analyzed. Abstracts for poster presentations were excluded for the purposes of this study. The percentages of AOSSM presentations that were duplicated at an AANA meeting for each year analyzed and as an overall total were then calculated.

After extracting abstracts of all duplicate presentations, these abstracts were analyzed to determine how they were altered between the 2 meetings. Modifications of the abstract title, author order, or addition/removal of authors were noted. These modifications were recorded for each year analyzed as well as overall.

Statistical Analysis

A chi-square test was used to compare duplicate presentation rates between the years of interest. A chi-square test was also used to compare the rates at which duplicate presentations were altered (changing the title, changing the author order, adding/removing authors) between the years analyzed.

RESULTS

A total of 192 and 213 abstracts were presented as podium presentations at the AOSSM and AANA Annual Meetings, respectively, during the study period. Among the 192 AOSSM presentations, 28 (15%) were also presented at an AANA Annual Meeting during the study period (Table 1). No significant difference was observed for the duplication rate between the years analyzed ($P = .10$).

Among the 28 duplicate presentations, the title was modified in 14 abstracts (50%), the author order was modified in 17 abstracts (61%), and addition or removal of authors occurred in 10 abstracts (36%) (Table 2). No significant difference was found in the rates at which the title was modified ($P = .36$), the author order was modified ($P = .26$), or addition/removal of authors occurred ($P = .84$) between the years analyzed.

DISCUSSION

The results of this study suggest a moderate rate of duplicate presentations at the AOSSM and AANA Annual Meetings. Often, authors of duplicate presentations will alter their abstracts in several ways from one submission to another. These alterations include changing the abstract title, changing the author order, or adding/removing authors.

The ultimate goal of presenting original research at a meeting is to demonstrate preliminary or incomplete results of a study before it is ready for publication in a peer-reviewed journal. Meeting committees often place guidelines on abstract submissions to ensure only original work is presented. These guidelines are often ignored or are insufficient, leading to the same abstracts being presented at multiple meetings. Several studies have shown this to be a common practice within multiple fields of medicine. The AOSSM does not have explicit guidelines prohibiting presentation of a previously presented study. However, AOSSM’s guidelines do state,

AOSSM designs its educational programs to highlight new research. Presenters are requested to advise AOSSM staff immediately if accepting another invitation to present this abstract at a non-AOSSM venue up to and including the AOSSM Annual Meeting or Specialty Day meeting in question.

Kraeutler et al analyzed the number of studies published in AJSM in 2014 that were presented at national or international meetings. The authors found that a high percentage (83%) of studies published in AJSM were presented at a national or international meeting, with the
AOSSM and AANA Annual Meetings being the most and sixth-most common meetings, respectively, at which these studies were presented. Among those studies presented, 33% were presented at more than 1 meeting.

Bhandari et al\(^1\) examined the rate of duplicate presentations at the American Academy of Orthopaedic Surgeons (AAOS) and the Canadian Orthopaedic Association (COA) 2001 and 2002 Annual Meetings. The authors found that, among all abstracts presented at the 2001 COA meeting, 19.5% were also presented at the 2001 or 2002 AAOS Annual Meetings. Similarly, Cameron et al\(^2\) found that 15% of the studies presented at several general surgery meetings in the United Kingdom and Ireland were duplicated in the years 1993 to 1994. Pop et al\(^3\) found that 1 in 5 abstracts presented at the 2006 American Urological Association Annual Meeting was also presented at the European Urological Association Annual Meeting. Abstracts were altered from one meeting to the next in several ways, including changing the title in 24% of presentations, changing the author order in 34%, and adding or removing authors in 38%. These studies suggest a high rate of duplicate presentations in various surgical disciplines.

Presenting the same findings at multiple meetings can be beneficial, as it allows for impactful and significant results to be shared with a larger and more diverse audience. However, duplicate presentations take up valuable presentation time from other potentially significant studies, which may impede the overall progress of research. Additionally, physicians and researchers in the field may be deterred from attending multiple meetings for fear of listening to the same presentations.

Ramchandren and Schiffer\(^4\) analyzed the motives behind presenting the same findings at multiple meetings. The authors found that, of the duplicate presentations given at the 2009 and 2010 American Society of Hematology (ASH) and American Society of Clinical Oncology (ASCO) Annual Meetings, 75% were supported by the pharmaceutical industry. This finding suggests that pharmaceutical companies may influence researchers to present at multiple meetings as a marketing strategy. There are likely many other motivational factors for submitting duplicate abstracts, and pharmaceutical advertising may not be as prevalent of a factor within the field of orthopaedics. We believe that, in many cases, duplicate presentations occur so that the researchers may list the same study on a curriculum vitae (CV) multiple times. Another reason for duplicate presentations within orthopaedics is that sometimes abstract submission deadlines for different meetings are close together. For example, abstract submissions for the 2017 AANA and AOSSM Annual Meetings were due on September 9 and October 3, 2016, respectively. In cases such as these, authors will often submit the same abstract to both meetings with the hope that it will be accepted to at least one of the meetings. However, if it is accepted to both meetings, authors will frequently accept both presentation invitations rather than declining one of them. Submission committees may want to consider setting deadlines farther apart from other, similar meetings in order to eliminate this common practice. Stricter submission guidelines may also be considered by organizations such as AOSSM and AANA in order to prevent duplicate presentations.

The strengths of this study include analysis of a large sample size of abstracts presented at the AOSSM and AANA Annual Meetings over a recent 3-year period. This study is also the first to determine the rate of duplicate presentations at these prominent orthopaedic sports medicine conferences. The limitations of this study should also be noted. First, only podium presentations were included. Additionally, this study only determined the rate of duplicate presentations at the AOSSM and AANA Annual Meetings, and therefore potential duplicate presentations at other meetings (such as the AAOS Annual Meeting or the International Society of Arthroscopy, Knee Surgery and Orthopaedic Sports Medicine [ISAKOS] Biennial Congress) were not evaluated.

CONCLUSION

There is a moderate rate of duplicate presentations at the AOSSM and AANA Annual Meetings. Authors of duplicate presentations often make changes to their abstract, including modifying the title, modifying the author order, or adding/removing authors to make the presentations appear different. This practice can limit the amount of important research findings shared within the research community. Therefore, stricter abstract submission guidelines should be considered to prevent this practice in the future.

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