

Impact of archiving manuscripts in institutional /subject repositories on knowledge translation

Submission date 08/07/2008	Recruitment status No longer recruiting	☐ Prospectively registered ☐ Protocol
Registration date 08/08/2008	Overall study status Completed	☐ Statistical analysis plan ☐ Results
Last Edited 11/07/2014	Condition category Other	☐ Individual participant data ☐ Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Protocol serial number
MOP-84476

Study information

Scientific Title

Study objectives

New public policies in the United States of America (USA), Canada, and other countries stipulate that publicly funded research must be made publicly accessible, for example by depositing it in subject repositories such as PubMed Central or in institutional repositories. It is unclear if this

results in higher visibility and higher number of citations. We will investigate whether manuscripts which are accessible through PubMed Central (PMC) or other repositories receive a higher citation count than manuscripts which are not made accessible through "self-archiving" (i. e., depositing manuscripts in subject repositories).

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval pending from the University Health Network Research Ethics Board (UHN REB) as of 10/07/2008. Application submitted on 07/07/2008.

Primary study design

Interventional

Study design

Randomised controlled trial

Study type(s)

Other

Health condition(s) or problem(s) studied

Medical publishing

Interventions

The unit to be randomised are published manuscripts. The authors will be sending their manuscripts to be randomised so that the authors will not know whether the manuscript will be either archived on Pubmed Central (intervention) or not (control). A citation analysis will be performed every 6 months for a minimum of 3 years.

Subset analyses.

The data analysis plan involves comparing the mean number of citations as well as the proportion of uncited manuscripts between the control and intervention group every 6 months. We are also planning three separate subset analyses:

1. We will compare the two groups within discipline-specific subgroups
2. We will compare the two groups in subgroups depending on the timing of open access (e.g. a subgroup of only those articles which are immediately open access, or within a subgroup of manuscripts which are open access after 12 months)
3. We will compare the groups in subgroups of highly cited and less cited manuscripts at baseline

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

Citations within the scientific literature, assessed every 6 months.

Key secondary outcome(s)

Other measurements for uptake and dissemination of scientific knowledge, including:

1. Citations in news articles
2. Citations on the Internet
3. Uptake by end-users and policy makers

Assessed every 6 months.

Completion date

01/08/2013

Eligibility

Key inclusion criteria

1. Authors of manuscripts with at least one NIH-funded co-author
2. Manuscript published between January 1st 2008 and April 7th 2008
3. Manuscript is not already accessible on PMC or as free full text elsewhere
4. The copyright policies of the journal allow 'self-archiving' on subject repositories such as PMC

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Other

Sex

All

Key exclusion criteria

1. Authors whose email address is not listed in the affiliation field of PubMed
2. Letters, editorials, and reviews

Date of first enrolment

01/08/2008

Date of final enrolment

01/08/2013

Locations

Countries of recruitment

Canada

Study participating centre

190 Elizabeth St

Toronto

Canada
M5G 2C4

Sponsor information

Organisation

University Health Network (Canada)

ROR

<https://ror.org/042xt5161>

Funder(s)

Funder type

Research organisation

Funder Name

Canadian Institutes of Health Research (Canada), ref: MOP-84476

Alternative Name(s)

Instituts de Recherche en Santé du Canada, The Canadian Institutes of Health Research (CIHR), Canadian Institutes of Health Research (CIHR), Canadian Institutes of Health Research | Ottawa ON, CIHR - Welcome to the Canadian Institutes of Health Research, CIHR, IRSC

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Canada

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary