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Rapid Reporting: The Influence of Simultaneous Publication on the Speed of Oncology Clinical Trial Data Dissemination

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Objective

- We explored trends in publication times over the past decade to assess whether time to full publication of industry-affiliated clinical trial data has decreased, and if this is driven by an increased focus on simultaneous manuscript publication at the time of congress presentation
- For studies conducted in breast cancer, we also investigated whether faster publication led to more rapid inclusion of treatments into clinical guidelines

Conclusions

- Simultaneous manuscript publication of pivotal oncology trial data with first conference presentation significantly accelerates time to full publication
- Our results may support the planning and timely dissemination of important data
- Our exploratory analysis of studies conducted in breast cancer suggests that simultaneous publication does not affect the speed at which new data are included in breast cancer treatment guidelines
- Although emerging technologies could further accelerate publication time, the trade-off between speed, integrity and compliance, alongside the wider impact of simultaneous and accelerated publications, needs to be considered

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Introduction

- Simultaneous publication of practice-changing clinical trial data in a journal at the time of first conference presentation is increasingly sought-after and provides the medical community with immediate access to additional information on study findings
- The potential advantages of this strategy include increasing access to new clinical information and promoting the engagement and reach of a publication[1]
  - Some prior work has assessed the impact of simultaneous publication on the metrics of the publication itself, finding a significant increase in the number of citations ($p<0.001$)[2]
- However, there is little research examining the effect of simultaneous publication on time from DCO to full publication, approval or inclusion in treatment guidelines
  - Understanding how simultaneous publication impacts drug development beyond publication engagement is critical when considering how to prioritise competing outputs during strategic planning

Methods

Study identification
Publications reporting results from pivotal clinical trials were identified using FDA drug approval listings and PubMed

Inclusion criteria
- Studies conducted in selected solid tumour indications (biliary tract, bladder, breast, cervical, colorectal, endometrial, gastric, gastro-oesophageal, head and neck, hepatocellular, lung, melanoma, ovarian, pancreatic, prostate, renal and thyroid)
- Studies sponsored by selected leading pharmaceutical companies (AbbVie, Amgen, Astellas, AstraZeneca, Bristol Myers Squibb, Daiichi Sankyo, Genentech, Lilly, Merck & Co Inc, MSD, Novartis, Pfizer and Roche)
- Studies published in the past 10 years (September 2014 to September 2024)

Data extraction (N=193)

Publication date

DCO date

Simultaneous publication[a]

Data analysis
- **Primary:** Data were summarised using descriptive statistics
- **Exploratory:** Date of treatment inclusion in NCCN breast cancer recommendations was extracted to evaluate the impact of simultaneous publication on guidelines

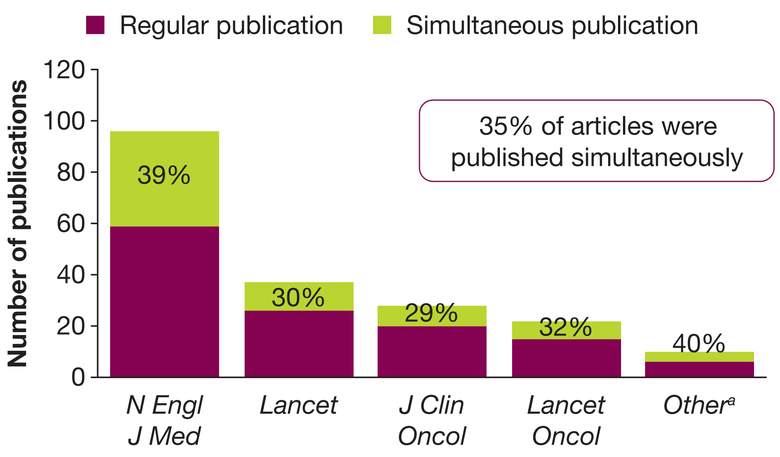
[a]Defined as presentation of primary data at a congress within 1 week of journal publication.

Results and interpretation

Summary of studies identified by analysis

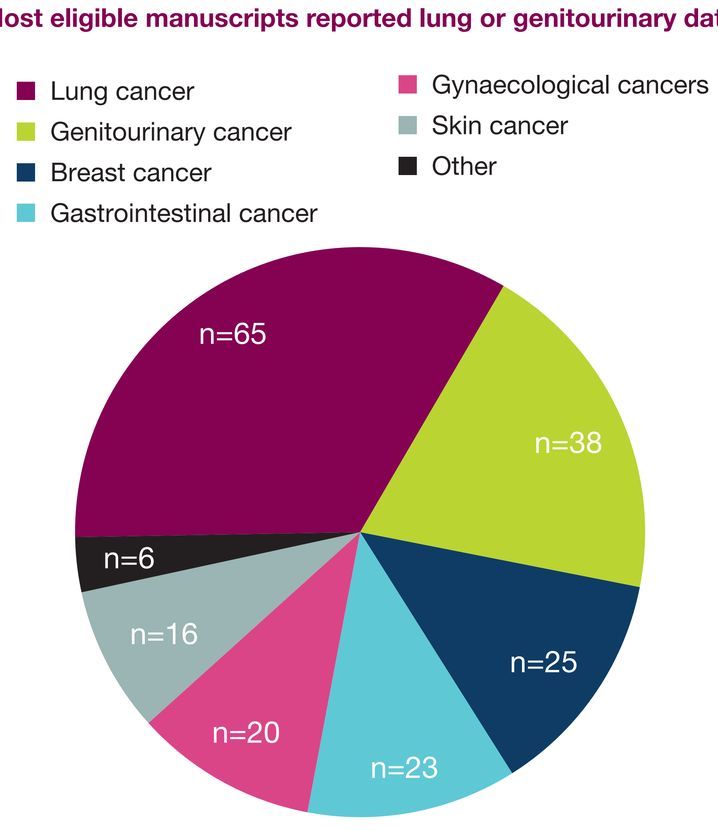
193 eligible articles identified

Most eligible manuscripts were published in *N Engl J Med*



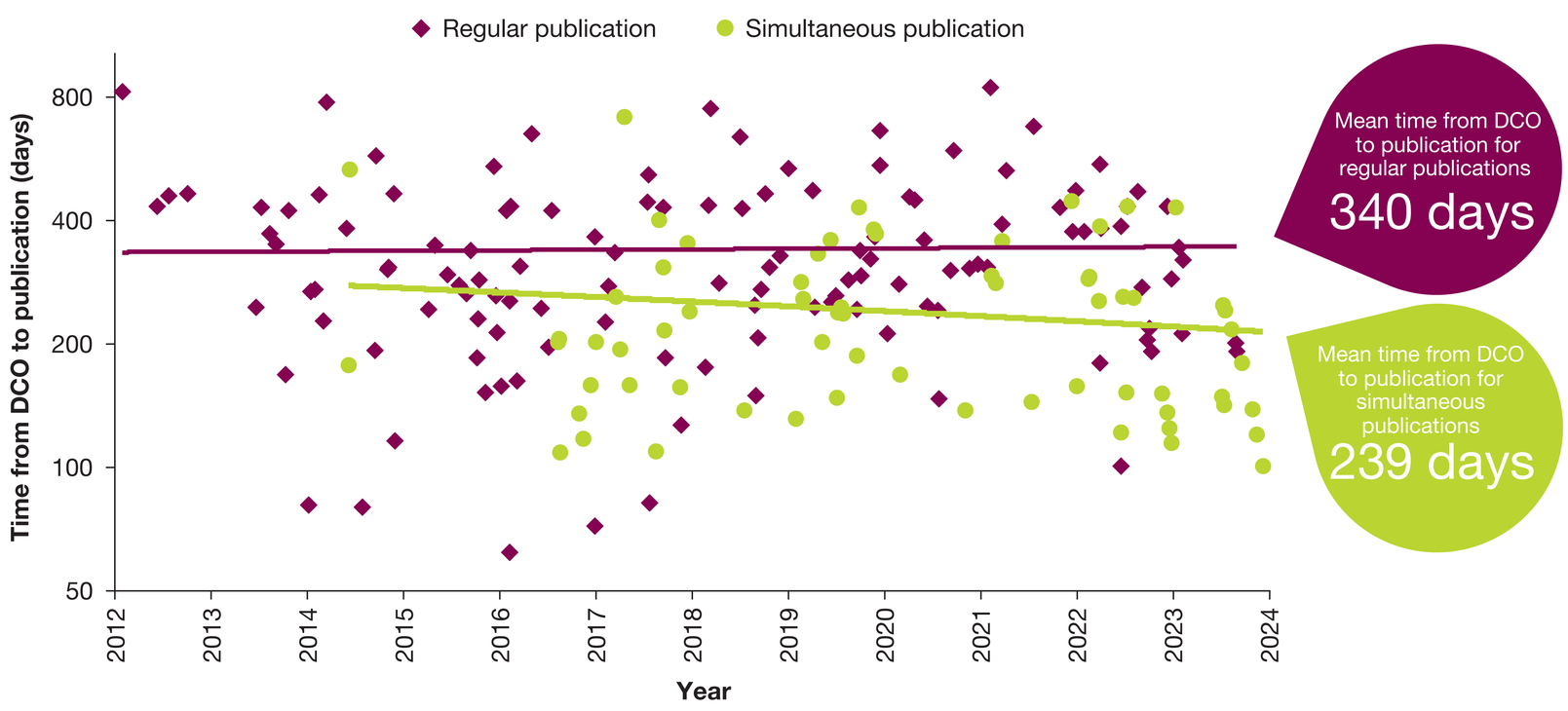
[a]Other includes *JAMA Oncol* (n=3), *NEJM Evid* (n=2), *Nat Med* (n=2), and *Ann Oncol*, *Lung Cancer and Nature* (all n=1).

Most eligible manuscripts reported lung or genitourinary data



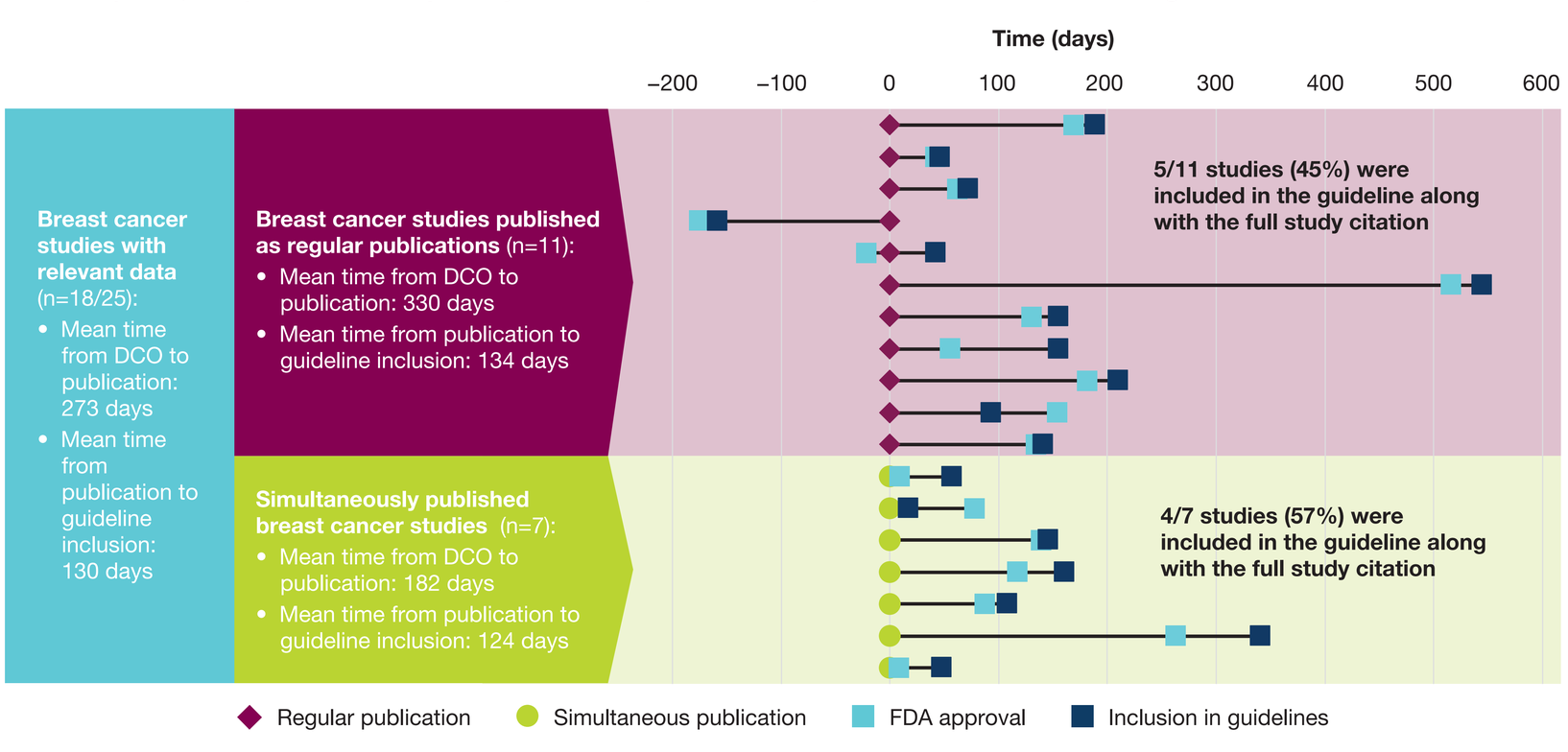
Time from DCO to publication has gradually accelerated over the past decade for simultaneous publications

- **Mean time from DCO to publication was significantly shorter for simultaneous publications than regular publications (difference: 101 days [95% CI: 57–144]; $p<0.001$)**



Simultaneous publication does not appear to affect the speed at which new data are included in guidelines

- **We investigated how simultaneous manuscript publication affected the speed at which new data were integrated into treatment guidelines, focussing on breast cancer data**
- **Most (17/18; 94%) breast cancer primary data were published in a journal before inclusion in the guidelines**



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Disclosures

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1. Schuler KW, et al. *Curr Med Res Opin* 2022;38:875–880.
2. Spagnolo M, et al. *Rev Esp Cardiol (Engl Ed)* 2024;77:324–331.

Abbreviations

CI, confidence interval; DCO, data cut-off; FDA, US Food and Drug Administration; NCCN, National Comprehensive Cancer Network.