

ANALYSIS OF PALLIATIVE CARE RETRACTED PUBLICATIONS INDEXED IN PUBMED

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BACKGROUND

Retraction means that a research paper has been formally removed from the scientific body of literature. The main purpose of retractions is to correct the literature and ensure its integrity¹. In recent years the retraction of scientific papers is an increasing worldwide phenomenon. The retraction of biomedical articles published in Europe has quadrupled from 2000 to 2021².

What is unclear is whether the growth of literature retractions is due to rising misconduct or improvements in abilities to detect them³. The retraction of articles in the Palliative Care (PC) literature has not been examined yet. Therefore, it is imperative to analyze the phenomenon of paper retractions, identifying the indicators that can help to understand the retraction situation in this discipline and gaining a deeper understanding of the reasons behind these retractions.

AIM

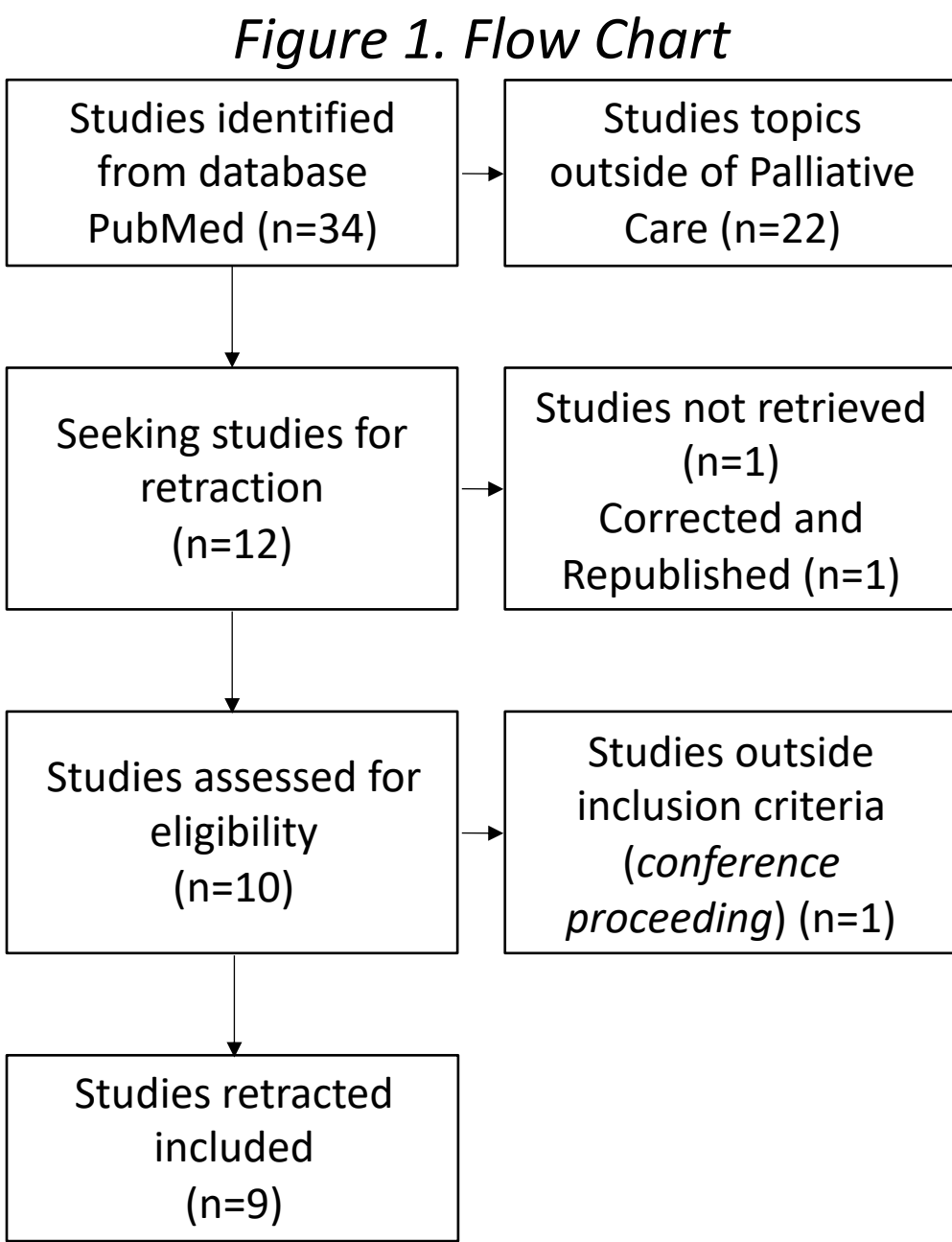
The aim of this study is to estimate the frequency, the characteristics and the reasons for retracting publications in PC.

METHODS & STATISTICAL ANALYSIS

A literature review of the articles retracted in PC literature has been carried out using PubMed database from 1987 to November 2024. The search was conducted on 25 November 2024 and the articles were searched in PubMed with MeSH (Medical Subject Headings: the PubMed vocabulary thesaurus used for indexing articles in the database). All unrelated and non-retracted articles, abstracts, conference papers were excluded. The extracted data were relevant to the bibliographic information of the articles and for the retraction notices. The characteristics of retracted articles were reported by mean and standard deviation (SD); by counts (n) or proportions (%) for categorical variables. All analysis were performed using Microsoft Excel and JMP.

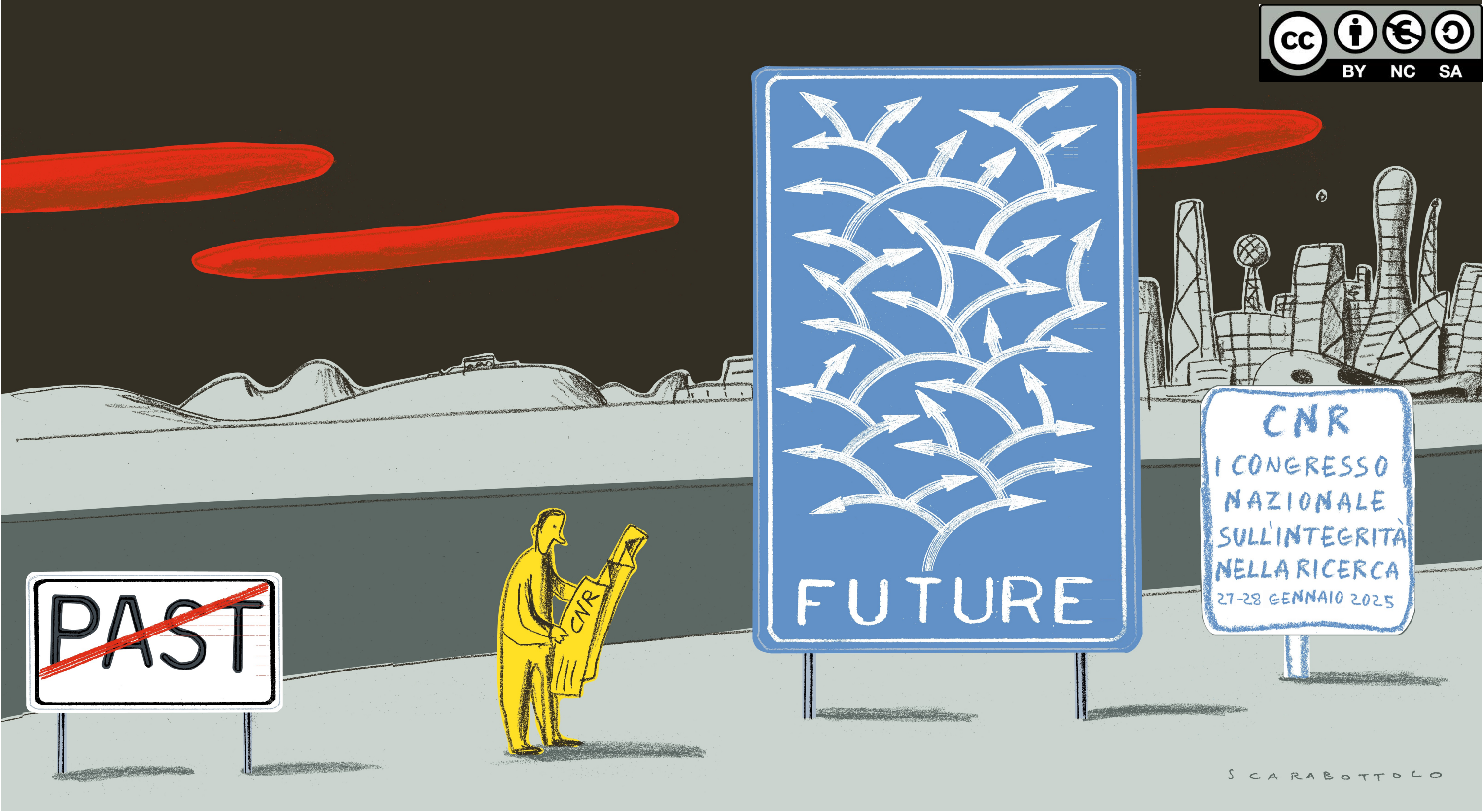
RESULTS

The search strategy returned 34 citations, out of which 22 (64.7%) with topics unrelated to PC and 12 (35.3%) represented by articles sought for retrieval. After the selection process, 9 (26.5%) PC retracted articles were included in the study. Figure 1 shows the flow chart of identification of retracted articles. The characteristics of retracted articles are reported in Table 1. The most cited article was referenced 120 times, 79 before and 41 after the retraction. All retraction notices were available from web site journals, linked to the retracted article and clearly labelled. Six papers (66.6%) were watermarked. The reasons for retraction were misconducts (n=5; 55.6%), honest errors (n=2; 22.2%), publisher's error (n=1; 11.1%) and not stated for one (n=1; 11.1%).



REFERENCES

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CONCLUSION

This is the first study that investigates PC publications' retraction. Retraction in biomedical literature has been explored in some biomedical specialties between 2012-2024 and identified a minimum of 37 articles for rehabilitation and sport science⁴ and a maximum of 1582 for genetics⁵. Further, a recent study identified the highest number of retractions, about 2373, in oncology from 1990 to 2022 and an increased trend of retracted articles year by year⁶. Our review reports a very low number of retracted articles in PC literature compared to other medical specialties. The low number of palliative care retracted publications, the different time frames of the studies and the different definitions of retraction reasons are the main problems that make a comparison study between PC and other disciplines impossible. The leading retraction reason was misconduct errors (55.6%), followed by honest errors (22.2%), such as error in analyses and in results and/or conclusion; finally, publisher's error (11.1%). This is consistent with a systematic review that found that misconduct errors are more frequently recorded in biomedical literature⁷, with a cross-sectional study of retraction notice at BioMed Central⁸ and with an article published in Nature and reporting information on the increase in retractions of biomedical papers over the past 20 years⁹. Retracted articles are still referenced even after their retraction, enhancing the risks of spreading misinformation, hindering scientific progress, harming research integrity and public trust in research, and misguiding policy decisions.