


Estimating clinical research project duration from idea to publication

Dmitry Tumin ¹, Kori L Brewer,² Doyle M Cummings,³ Keith L Keene,⁴ Kendall M Campbell⁵

¹Division of Academic Affairs and Department of Pediatrics, Brody School of Medicine at East Carolina University, Greenville, North Carolina, USA

²Department of Emergency Medicine and Department of Physiology, Brody School of Medicine at East Carolina University, Greenville, North Carolina, USA

³Department of Family Medicine and Department of Public Health, Brody School of Medicine at East Carolina University, Greenville, North Carolina, USA

⁴Department of Biology and Center for Health Disparities, East Carolina University, Greenville, North Carolina, USA

⁵Division of Academic Affairs and Research Group for Underrepresented Minorities in Academic Medicine, Brody School of Medicine at East Carolina University, Greenville, North Carolina, USA

The scientific response to the COVID-19 pandemic has elicited commentaries on the quickening of biomedical research,¹⁻³ contrasting with literature on prolonged time to publication for clinical research projects.⁴⁻⁶ We investigated research project duration for three clinical departments (emergency medicine, family medicine, and pediatrics) with centralized research leadership in a community-based US medical school. Following institutional review board (IRB) approval, we identified original research reports published or accepted in academic year 2019–2020, originating at our institution, and involving faculty from these departments. Of 39 eligible publications, we reconstructed study timelines (table 1) for 17 publications based on departmental records, and 10 publications based on a survey of corresponding authors.

The median overall project duration was 18 months (IQR 10–26). Median durations of specific phases were 2 months for project development (IQR 1–4), 6 months for execution (IQR 1–18), 2 months for writing (IQR 1–4), and 4 months for publication (IQR 2–5).

Durations are compared by project type and stage in table 2. On multivariable Cox regression analysis, time to publication was prolonged for prospective versus retrospective projects (HR of publication 0.14, 95% CI 0.02 to 0.83, $p=0.030$) and funded versus unfunded projects (HR 0.13, 95% CI 0.02 to 0.80, $p=0.027$). Twelve articles were accepted or published during the COVID-19 pandemic (April–June 2020). Median project duration was longer compared with pre-COVID publications in our sample (20, IQR 19–25 months, vs 13, IQR 9–40 months), but this difference did not reach statistical significance (rank-sum $p=0.271$).

Qualitatively, centralized research support programs have been described as ‘expediting’ clinical research⁷ by addressing limitations of time, funding, and expertise among investigators.⁸⁻¹⁰ Short-term evaluations of such programs (<2 years) have focused on activities which can be completed in a few months, such as IRB protocol or grant submission⁸; or manuscript submission, but not necessarily publication.¹⁰ Indeed, within this time frame, many projects receiving central support may not

Correspondence to

Dr Dmitry Tumin, Brody School of Medicine at East Carolina University, Greenville, NC 27834, USA; tumind18@ecu.edu

Accepted 27 April 2021



© American Federation for Medical Research 2021. No commercial re-use. See rights and permissions. Published by BMJ.

To cite: Tumin D, Brewer KL, Cummings DM, et al. *J Investig Med* Epub ahead of print: [please include Day Month Year]. doi:10.1136/jim-2021-001915

Table 1 Data points on project stages, by project type

| Project stage | Number of projects with available data | | | |
|---|--|------------------------|------------------------|--------------------|
| | Prospective research | Retrospective research | Basic science research | Other project type |
| Conception First written outline or synopsis of project rationale and aims | 5 | 18 | 1 | 2 |
| Funding First funding received in direct support of the project | 2 | 5 | 1 | 0 |
| Regulatory submission First submission to IRB/IACUC | 5 | 8 | 1 | 0 |
| Regulatory approval Receipt of all approvals needed to conduct the project | 4 | 9 | 1 | 0 |
| Start of data collection | 5 | 18 | 1 | 1 |
| End of data collection | 4 | 18 | 1 | 1 |
| Manuscript draft First draft of manuscript, including introduction, methods, and results | 5 | 18 | 2 | 2 |
| Manuscript submission First submission of manuscript to peer-reviewed journal | 5 | 18 | 2 | 2 |
| Manuscript acceptance* Date of acceptance decision from journal | 5 | 18 | 2 | 2 |
| Publication date Date of earliest publication online or in print | 4 | 17 | 2 | 2 |

*Data set included two prospective studies, nine retrospective studies and one basic science study accepted on or after April 1, 2020. IACUC, Institutional Animal Care and Use Committee; IRB, institutional review board.

Table 2 Project duration (in months) by project characteristics (N=27)

| Characteristic | Median (IQR) project duration (months) | | | | |
|-------------------------------------|--|-------------|-------------|----------|------------|
| | Total | Development | Execution | Writing | Submission |
| Project type | | | | | |
| Retrospective | 17 (11–19)* | 2 (<1–4) | 2 (1–9) | 2 (1–4) | 3 (2–5) |
| Prospective | 42 (24–42)* | 5 (2–8) | 20 (7–28) | 9 (2–15) | 4 (4–7) |
| Bench science or other | 7 (5–24)* | 6 (<1–12) | 12 (1–23) | 1 (1–2) | 3 (<1–4) |
| Regulatory approval required | | | | | |
| No | 11 (5–19)† | <1 (<1–4) | 1 (<1–3)† | 2 (1–3) | 3 (2–5) |
| Yes | 20 (17–38)† | 3 (2–5) | 7 (2–26)† | 2 (1–6) | 4 (3–5) |
| External funding received | | | | | |
| No | 16 (9–20)‡ | 2 (<1–4)‡ | 2 (1–9)‡ | 2 (1–4) | 3 (2–4)‡ |
| Yes | 38 (29–58)‡ | 9 (5–12)‡ | 25 (15–27)‡ | 1 (1–12) | 7 (6–14)‡ |
| Trainee participation | | | | | |
| No | 16 (5, 24) | <1 (<1–4) | 2 (1, 7) | 3 (1, 8) | 2 (1, 4) |
| Yes | 19 (11, 32) | 2 (1, 4) | 7 (2, 22) | 2 (1, 4) | 4 (3, 5) |
| Prior presentation | | | | | |
| No | 18 (10, 19) | 3 (1, 4) | 2 (1, 8)§ | 2 (1, 4) | 3 (2, 5) |
| Yes | 21 (11, 40) | 2 (<1, 5) | 7 (3, 26)§ | 2 (1, 4) | 4 (3, 6) |

*Statistically significant difference across project types ($p < 0.05$) on Kruskal-Wallis test.

†Statistically significant difference according to need for regulatory approval ($p < 0.05$) on rank-sum test.

‡Statistically significant difference according to receipt of external funding ($p < 0.05$) on rank-sum test.

§Statistically significant difference according to prior presentation ($p < 0.05$) on rank-sum test.

reach publication. We propose that tracking project duration from conception to publication, in addition to discrete steps such as conference presentation or grant submission, can help identify opportunities for improving the research process for investigators.

Our data also have important implications for faculty career development and mentorship. In light of the typical research project duration, pursuing projects concurrently rather than sequentially is important for building a strong file for promotion and tenure. While faculty with extramural funding ultimately tend to achieve higher academic productivity,^{11 12} an important finding was that grant-funded research took significantly longer from conception to publication than unfunded research. Delays on grant-funded projects may be addressed by optimizing institutional grant-related processes and developing a diverse portfolio of funded and unfunded research. Lastly, we present an early comparison of project duration for publications accepted before and during the early months of the COVID-19 pandemic. Considering the long life cycle of a typical project, the impact of the pandemic on project duration and publication is likely to continue accumulating in the months ahead and may pose serious career challenges for active scientists.

Contributors All authors participated in study conceptualization and design. DT, KB and DC participated in data collection. DT performed data analysis and drafted the manuscript. KB, DC, KK and KC interpreted the results and critically revised the manuscript. All authors approved the final version to be submitted.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient consent for publication Not required.

Provenance and peer review Not commissioned; internally peer reviewed.

This article is made freely available for use in accordance with BMJ's website terms and conditions for the duration of the covid-19 pandemic or until otherwise determined by BMJ. You may use, download and print the article for any lawful, non-commercial purpose (including text and data mining) provided that all copyright notices and trade marks are retained.

ORCID iD

Dmitry Tumin <http://orcid.org/0000-0002-9180-7656>

REFERENCES

- Balaphas A, Gkoufa K, Daly M-J, *et al.* Flattening the curve of new publications on COVID-19. *J Epidemiol Community Health* 2020;74:jech-2020-214617.
- Palayew A, Norgaard O, Safted-Harmon K, *et al.* Pandemic publishing poses a new COVID-19 challenge. *Nat Hum Behav* 2020;4:666–9.
- Crumb L, Campbell KM, Crowe A, *et al.* Responding to COVID-19: perspectives on curricular changes in a rural medical school. *South Med J* 2020;113:368–71.
- Gottlieb M, Dehon E, Jordan J, *et al.* Getting published in medical education: overcoming barriers to scholarly production. *West J Emerg Med* 2018;19:1–6.
- Weber-Main AM, Finstad DA, Center BA, *et al.* An adaptive approach to facilitating research productivity in a primary care clinical department. *Acad Med* 2013;88:929–38.
- Dennis M, Batalini F, Demers L, *et al.* Overcoming barriers to resident scholarly productivity and research at a large academic institution. *MedEdPublish* 2019;8.
- Manring MM, Panzo JA, Mayerson JL. A framework for improving resident research participation and scholarly output. *J Surg Educ* 2014;71:8–13.
- Tsikis S, Fleishman A, Chaikof EL, *et al.* Design and implementation of an infrastructure program to support clinical research in surgery. *J Surg Res* 2019;241:264–70.
- McKinney CM, Mookherjee S, Fihn SD, *et al.* An academic research coach: an innovative approach to increasing scholarly productivity in medicine. *J Hosp Med* 2019;14:457–61.
- Thompson LA, Mercado RE, Gurka MJ, *et al.* A centralized research hub in a pediatric academic center. *J Pediatr* 2020;218:5–6.
- Bajaj SS, Wang H, Williams KM, *et al.* National Institutes of health R01 grant funding is associated with enhanced research productivity and career advancement among academic cardiothoracic surgeons. *Semin Thorac Cardiovasc Surg* 2020;S1043-0679:30428–7.
- Boddapati V, Sachdev R, Fu MC, *et al.* Increasing industry support is associated with higher research productivity in orthopaedic surgery. *J Bone Joint Surg Am* 2018;100:e36.