

Discrepancies Between Published Randomized Controlled Trials and Their Registry Entries: A 6-Year Analysis of Top General Orthopaedic Journals

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INTRODUCTION:

The integrity of clinical research is essential for advancing orthopaedic practice and ensuring optimal patient care. Randomized controlled trials (RCTs) are considered the gold standard of clinical evidence, but their effectiveness depends on strict reporting and transparent methodology. Registering RCTs in advance is crucial to avoid selective reporting and bias research. This study aimed to comprehensively examine the alignment between registered protocols and the published reports of RCTs in prominent orthopaedic journals from 2019 to 2025.

METHODS:

A comprehensive review was conducted of RCTs published in the five highest-ranked general orthopaedic journals, as determined by the 2022 Scientific Journal Rankings. A systematic PubMed search identified 620 candidate publications, of which 337 RCTs met specific inclusion criteria. For each trial, nine key items from the 24-item WHO Minimum Data Set were extracted and compared between the published article and its corresponding trial registry entry, with particular attention to health condition, intervention, sample size, outcomes, and eligibility criteria.

RESULTS:

Among the 337 RCTs analyzed, 72.7% (245 studies) were conducted outside the United States, and 65% (219 studies) were registered on ClinicalTrials.gov. Alarming, 7.4% (25 studies) lacked any registry entry, while 1% reported incorrect registration codes. Nearly half (47.5%, 160 studies) focused on joint reconstruction, and 86.9% (293 studies) employed a double-arm design. Additionally, our analysis of registered studies (N=312) revealed considerable discrepancies: 38.2% (119 studies) failed to report the sample size in either the registry or publication. Moreover, 27.2% (85 studies) altered their primary outcome between registration and publication, 62.2% (194 studies) modified key secondary outcomes, 35.3% (110 studies) changed the inclusion criteria, 55.8% (174 studies) changed exclusion criteria, and 88.8% (277 studies) did not submit results to the registry prior to publication.

DISCUSSION AND CONCLUSION:

These findings highlight substantial and widespread inconsistencies between registered protocols and published reports in orthopaedic RCTs. Such lapses in transparency and reporting integrity not only compromise the reliability of the scientific record but also threaten the foundation of evidence-based orthopaedic practice. The failure to adhere to registered protocols undermines clinical decision-making, erodes trust in published research, and ultimately jeopardizes patient outcomes. Therefore, it's crucial for the orthopaedic research community—including investigators, peer reviewers, and journal editors—to adopt more stringent standards for trial registration, reporting, and enforcement.

Table 1. Characteristics of included studies

Items	Characteristic	No. (%) of RCTs
Orthopedic subspecialties	Oncology	3 (0.9%)
	Joint reconstruction	160 (47.5%)
	Sport and arthroscopy	17 (5%)
	Spine	16 (4.7%)
	Foot and ankle	17 (5%)
	Trauma	44 (13.1%)
	Upper extremity	47 (13.9%)
	Pediatrics	7 (2.1%)
	General	26 (7.7%)
	Journal	J Bone Joint Surg Am
Clin Orthop Relat Res		55 (16.3%)
Acta Orthop		42 (12.5%)
Bone Joint J		96 (28.5%)
J Am Acad Orthop Surg		21 (6.2%)
Publication year	2019	65 (19.3%)
	2020	62 (18.4%)
	2021	54 (16%)
	2022	55 (16.3%)
	2023	44 (13.1%)
	2024	48 (14.2%)
Study Location	2025 (Until February)	9 (2.7%)
	US	81 (24%)
	Non-US	245 (72.7%)
Clinical Trial Registry	Multicenter (US and non-US)	11 (3.3%)
	Clinicaltrials.gov	219 (65%)
	ISRCTN.com	20 (5.9%)
	Netherlands Trial Register	18 (5.3%)
	Other	55 (16.3%)
	No registry found	22 (6.5%)
	No registry found despite of reporting code in article	3 (1%)
Number of Arms	2	293 (86.9%)
	3	32 (9.5%)
	4	11 (3.3%)
	>4	1 (0.3%)

Table 2. Registry and Publication Discrepancies in the Included Studies

Item	Category	Same	Whole different or missing in registry or article		
			Added/Removed	Not defined in article or registry	Changed from secondary
1	Condition	310 (99.4%)	2 (0.6%)		
2	Intervention	301 (96.5%)	11 (3.5%)		
3	Study Type	307 (98.4%)	5 (1.6%)		
4	Sample Size	193 (61.8%)	119 (38.2%)		
5	Primary Outcome	Same	Added/Removed	Not defined in article or registry	Changed from secondary
		227 (72.8%)	41 (13.1%)	33 (10.6%)	11 (3.5%)
6	Secondary Outcome	Same	Added/Removed	Not defined in article or registry	Changed from primary
		118 (37.8%)	96 (30.8%)	79 (25.3%)	19 (6.1%)
7	Inclusion Criteria	Same	Added/Removed	Not defined in article or registry	
		202 (64.7%)	97 (31.1%)	13 (4.2%)	
8	Exclusion Criteria	Same	Added/Removed	Not defined in article or registry	
		138 (44.2%)	154 (49.4%)	20 (6.4%)	
9	Summary Results Before Publication	Yes	No		
		35 (11.2%)	277 (88.8%)		