Quality of Abstracts in Contemporary Hematology-Oncology Trials: A CONSORT Adherence Analysis of Over 15 Years

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INTRODUCTION

- Randomized controlled trials (RCTs) are a cornerstone of evidence-based medicine.[1]
- Physicians frequently rely on abstracts to rapidly assess a study's relevance.[2]
- Incomplete abstract reporting can limit critical appraisal and contribute to misinterpretation of trial findings.[3]
- CONSORT Extension for Abstracts (CONSORT-A) provides standardized guidance for reporting RCT abstracts.[4]
- No prior systematic study has evaluated CONSORT-A adherence in hematology-oncology RCT abstracts.

AIM

- To evaluate adherence to CONSORT-A guidelines among RCTs published in major hematology-oncology journals from 2010-2026.

METHODS

- Systematic MEDLINE search identified eligible RCTs.
- Five major hematology-oncology journals were included:

(Blood, Lancet Haematology, Leukemia, Journal of Hematology and Oncology, and Blood Cancer Journal).

- Total of 518 abstracts were analyzed.
- Pre-specified 19-item CONSORT-A checklist was used to assess adherence.
- Post-hoc, interim, and economic sub-analyses were excluded from the review.
- Two blinded, independently trained investigators assessed the abstracts.
- Discrepancies were resolved by a third investigator.
- Chi-square goodness-of-fit test assessed adherence against the 70% threshold.

CONCLUSIONS

- Overall CONSORT-A adherence across hematology-oncology RCT abstracts remained below the predefined 70% adherence benchmark.
- Key gaps included randomization method, allocation concealment, blinding, and funding disclosure.
- These omissions may limit assessment of trial rigor from abstracts alone and hinder evidence-based care.
- Structured abstracts and journal-level CONSORT-A checklists should be widely adopted.

RESULTS

Figure 1: Adherence to CONSORT-A Checklist Items (N=518)

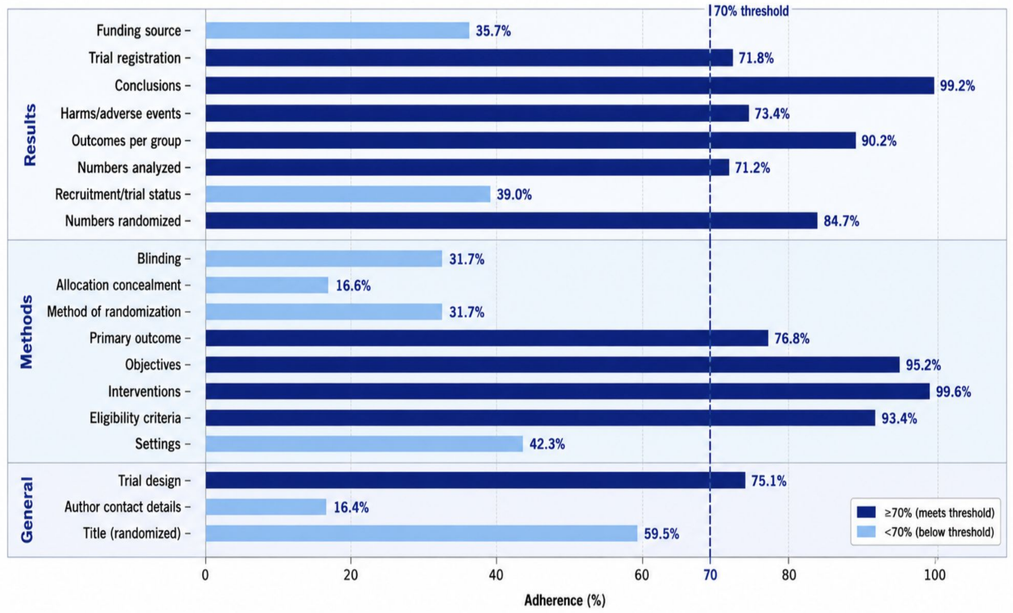
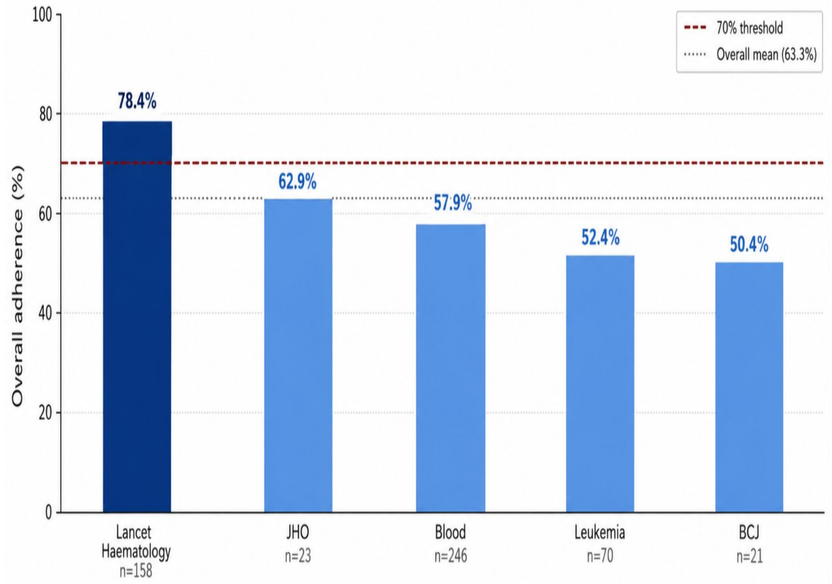


Figure 2: Overall CONSORT-A Adherence by Journal



Overall adherence was 63.3% (95% CI, 62.4–64.3%), significantly below the predefined 70% threshold (P < 0.001).

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