Polluting the well

To the editor

"When the marketplace is full of dangerous and defective goods, there is no free market because the trust requisite to support a market has evaporated."

As clinicians with a passion for research and training we wish to voice our vociferous support for the sentiments expressed by Biccard, Dyer, Swanevelder, Coetzee and Shafer in their editorial, "Is the HPCSA requirement for a research dissertation for specialist registration the best option?"²

South Africa faces the challenge of training our specialists to critically engage with published scientific literature, while ensuring that the research we conduct is robust, reliable and clinically significant.^{1,3}

Ironically, our attempt to address these issues has resulted in registrars, many of whom have no affinity or interest in research, attempting to fulfil their research requirements by publishing underpowered surveys, audits or small observational studies. This has created a constant stream of inconclusive, and often irrelevant research that adds to publication pollution and undermines research reliability. And the tragedy is that despite the introduction of the research component most registrars still cannot meaningfully critique published medical literature, explain the meaning of a p-value or a 95% confidence interval, or describe the components of a forest plot.

In addition, requiring every registrar to produce original research drags overburdened supervisors away from meaningful longer term projects, and impedes real knowledge advancement. At its worst some have abandoned meaningful intensive research altogether for the short-term lure of publishing high-volume low-quality research with the aim of maximising research productivity and personal financial and academic gain.

Our current system is: 1) failing to achieve its training goals, 2) damaging the quality of South African research and polluting the research pool, and 3) incurring a significant time cost on specialists with a desire to develop meaningful research programmes. In unison with Biccard et al. we propose that the research component for registrar training be revised. Where registrars show an interest in undertaking original research this should be actively encouraged but rather than uniformly insisting on original research, clinicians should be trained in the critical evaluation of medical literature, the principles of evidence-based medicine, and the basics of bio-statistics. These principles should be included in the formal examination process. This issue should be urgently addressed at a national level.

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