

ACADEMIC PUBLICATION

Key elements required to publish a good article: consensus among executive editors of Traditional Chinese Medicine and integrative medicine journals - a Delphi study

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Abstract

OBJECTIVE: To explore consensus among Traditional Chinese Medicine (TCM)/ integrative medicine (IM) journal executive editors in China regarding: (a) Their perceptions about the differences between papers published in Chinese/English journals; (b) the key elements required for publishing a good quality paper; (c) how editors manage and decide on the manuscripts submitted to their journals.

METHODS: A three classic round Delphi was conducted with a purposive sample of TCM/IM Chinese journal executive editors. The key themes and items generated from six open ended questions in the first round were redistributed to the editors in two subsequent questionnaire rounds and scored on a five-point Likert scale. Consensus, reliability and stability of responses were assessed between the editors in the same round and between rounds.

RESULTS: All ten editors initially agreeing to partici-

pate completed the three rounds, provided 60 comments in the first round, relating to 6 themes on: elements of publishing good quality article; differences between Chinese and English published articles; reasons for low quality of Chinese studies; maintaining the journal's good reputation; initiatives and strategies; and differences between Chinese and English versions of the same journal. High levels of consensus were reached for 97% items. Intra-class correlation (ICC) coefficient for agreement among editors was high in both second and third round and there was a good stability between the two rounds.

CONCLUSION: High inter/intra-editor agreement was identified in the differences between TCM/IM research papers published in English and Chinese. Publishing standards and probity are keys in elevating the reputation of research. Editors' perspectives in maintaining and improving quality journal can be viewed as fundamental for editors and researchers in publishing any articles.

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Key words: Medicine, Chinese Traditional; Integrative medicine; Delphi; Publication quality; Editors' perspectives

INTRODUCTION

Traditional Chinese Medicine (TCM) researchers increasingly realize the importance and necessity of including studies conducted in China in systematic reviews, but many are published in the Chinese language

and are not disseminated to the wider international audience. The value of such research is also important in guiding clinical practice and driving clinical guidelines.¹ However, the quality of papers published in the Chinese language has been perceived as being of a lower quality (especially in terms of reporting) compared with papers published in English language journals.¹ This compromises the inclusion of Chinese research in systematic reviews, particularly since many Chinese papers are written using a similar structure, which might not be the best approach to suit the pragmatic nature of Chinese medicine.^{2,3} Review has demonstrated that many randomized controlled trials (RCT) published in Chinese could not be distinguished as RCTs from their titles, they had comparably weaker introductions with limited references, lacked information on randomization and allocation, blinding was not considered, explanations regarding the treatment provided was insufficient, had no power calculation or information on ethical approval, protocol and registration information.⁴ A comparatively large number of papers may not follow accepted checklists such as the Consolidated Standards of Reporting Trials (CONSORT) or Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA).^{5,6}

This study aimed to develop consensus among TCM/integrative medicine (IM) journal executive editors in China regarding: how they perceived the differences between published papers in Chinese/English journals; the key elements required for publishing a good quality paper; and how as an editor they managed and decided on articles submitted to their journals.

METHODS

The research group identified various questions based on their personal experiences and a review of current literature on publishing research papers in the field of TCM/IM in order to explore Chinese executive editors' perceptions. A three-round classic Delphi using an online survey requiring both quantitative and qualitative answers was conducted among a purposive sample of Chinese TCM/IM journal executive editors.

Participants

In order to capture a broad range of editorial experience, a purposive sample of the key executive editors for Chinese TCM and/or IM journals were identified on the basis of (a) having different numbers of years of being an editor; (b) journal location (published in different main cities in China); (c) when the journal was first established and (d) the number of issues per year.⁷ These four items were checked by searching for representative journals and their executive editors' basic information online.

Inclusion criteria: being a journal editor for at least 24 months; the journal having been established more than 5 years ago; being able to access the internet and use survey monkey; happy to be involved in this study for 3 months; be able to read and answer in Chinese. There were no restrictions on the quality/rank/impact factor (IF) of the journal or whether it was indexed by Medline or science citation index (SCI). University journals were also included. An invitation to take part in the study was sent in Dec. 2013. Only the editors who made the final decision regarding selecting/accepting papers were included in the study (including executive/associate editors). One editor was invited per journal.

Languages used in the survey

All questions were prepared in English, and then back translated to Chinese.⁸ All the responses from participants were categorized and analyzed in both Chinese and English. Final results are presented in English.

Procedure

First round survey was emailed in Dec. 2013 (Figure 1) and data collected on: the editor's demographics, basic information about the journal, and six open ended questions were asked (Table 1). Responses from the editors were reviewed and categorized into items and themes identified. Up to 10 items were generated from the each question and responses summarized for the second round survey, which were subsequently emailed and collected in February 2014. The same six questions were asked again in the second round, with a five-point Likert scale⁹ for each item to score ("strongly

Table 1 Six open ended questions in the first round

No.	Question
1	What do you think are the key elements required to publish good quality papers? This applies to both publishing research in Chinese and Chinese research published in English. Please provide details.
2	Are there any main differences between Chinese and English TCM & IM journals and articles? Please explain why.
3	There is an increasing number of systematic reviews including Chinese studies, and some have shown that papers published in Chinese may have a relatively lower quality. Do you agree with this or not and why?
4	What do you think are the main factors needed to improve and maintain the reputation of your journal (i.e. experiences with authors/peer reviewers/editorial board/journal quality assessment etc)?
5	What kind of future initiatives/strategies (any planned changes over the next 12 months) do you have for the journal?
6	If the journal has both Chinese and English version, please discuss are there any differences.
Any other comments:	

agree" = 1, "agree" = 2, "neutral" = 3, "disagree" = 4, "strongly disagree" = 5). In the third round, the same survey used in the round two was sent and collected in Apr. 2014, in order to obtain consensus. In the 2nd/3rd round, participants had an opportunity to comment on their responses, or provide additional information. Participants were informed that their details would be anonymous to the panel apart from the principle researcher (XYH). They were also asked to respond within 10 days, in order to minimize dropout.^{10,11} All questionnaire items irrespective of whether they reached consensus were redistributed to the editors for reconsideration *via* a second and a third round of questionnaires.

Data analysis

Data were collected electronically using survey monkey (www.surveymonkey.com). Demographic and journal information obtained in the first round was imported and analysed *in vivo* (version 10, QSR International, Melbourne, Australia) using a thematic analysis. Two researchers (XYH & HY) independently generated items and themes from one response and discussed with consensus made, followed by independent coding for another response.

Items generated from thematic analysis were imported into IBM® SPSS® Statistics (version 21, Armonk, NY, USA). In the first round, consensus was determined by the percentage of the editors' who were in agreement.¹² In the following two rounds, responses to each item were used for agreement analysis using the two-way ICC for consensus among different editors on the same round;¹³ and a Wilcoxon matched pairs signed rank test within same editor in different rounds.¹⁴ The strength of reliability was defined as: very good (0.81-1.00), good (0.61-0.80), moderate (0.41-0.60),

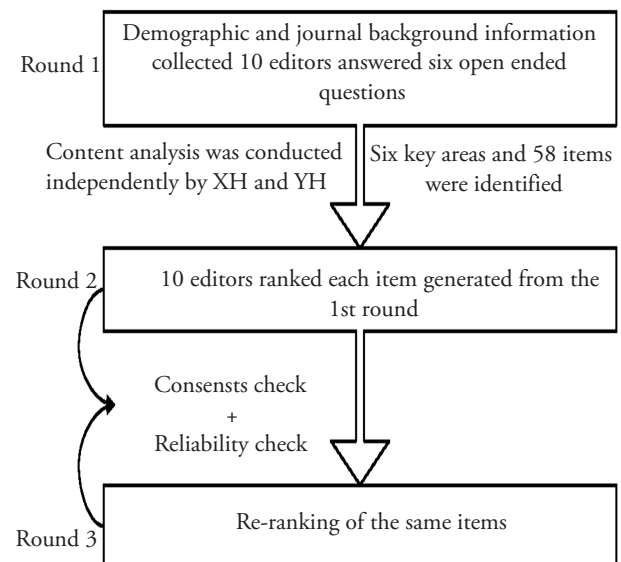


Figure 1 Structure of the Delphi process

fair (0.21-0.40), and poor (≤ 0.20). Analyses were employed at a predetermined alpha level of 0.05.

RESULTS

Demographic characteristics

Fourteen executive editors were identified through purposive sampling and in accordance with the criteria set. Ten with regular internet access agreed to complete the survey and participate in all further rounds. Figure 1 shows the Delphi process. Due to the anonymity of the research, editors reported that they did not want to be identified therefore journal's year of establishment and location was not reported. Table 2 gives details on the background of the editors and their journals.

Table 2 Profile of editors and journals

Item	Characteristic	N (total $n = 10$)
Educational background	Below doctoral level	7
	Doctoral level	3
	Median length of time as an editor (yrs, median & IQR)	9 (2.6 -15.5 years)
	A member of editorial board of other journals	6
No. of issues per year	4/year	1
	6/year	3
	12/year	4
	24/year	2
	No. of articles per issue (range)	10-50
Articles currently not included in your journal but plan to in the future (top three)	No. of pages per issue (range)	60-150
	Open access option availability	3
	Regulation and guidelines	4
	Evidence-based medicine	3
	Showcasing key researchers	2

Findings

Two researcher (XYH & HY) independently analyzed the responses and generated six key areas including 25 themes and 58 items.

Though the consensus among editors in the first round varied, high levels of consensus were reached in the following rounds, with only two items failing to reach consensus: reason for low quality of Chinese studies included in SRs was thought to be because of the comparably poorer computer hardware and research infrastructure in China; and the need to have the same requirements for both Chinese and English version of the same journal.

In particular, a few items reached high consensus throughout all three rounds: 'Optimising the focus of the articles they wish to publish', 'rigorous design methodology' and 'adopting and following a checklist' were perceived as the most important elements of publishing good quality articles (Table 3).

The most significant differences in perceptions between published articles in the two languages were 'fewer different types of intervention in English articles',

'differences in terminology', and 'differences in quality' (Table 4).

Top reasons for low quality of Chinese studies included in SRs were 'pressures due to obtaining promotion being linked with the number of articles published, administrative positions, and project funding', 'lack of details in instructions for authors', 'high quality articles have been submitted abroad as there are only a few SCI indexed journals in China', and 'there are huge number of articles published evaluating the same topic/intervention because of the lack of regulations and guidelines, which results in less authority in the published papers' (Table 5).

In order to maintain a journal's in good reputation, editors reached consensus through all three rounds. The key issues were to 'invite editorial board members, academic leaders and commission articles', 'priority selection of reputable researchers', and 'choosing the right reviewer who is expert in corresponding area' (Table 6); Regarding future initiatives and strategies, only nine editors answered this question as one refused to give an answer as they believed that they did not have enough

Table 3 Elements of publishing good quality articles ($n = 10$)

Theme	Item	1st round	2nd round	3rd round
Research conditions - the environment	Optimising the focus of the articles editor's wish to publish	9	1.0±0.0	1.1±0.3
	Rigorous design methodology	10	1.2±0.4	1.7±0.5
	Follow checklists	6	1.7±0.7	1.4±0.7
	Providing the correct statistics	1	1.7±0.5	1.7±0.5
	Reasonable in-depth discussion	2	1.6±0.5	1.8±0.4
	Writing skills	3	1.9±0.3	1.8±0.4
Expertise	High-quality, multi-disciplinary academic team	3	1.9±0.6	1.8±0.4
Equipment	Up-to-date equipment, i.e. software, databases etc.	1	2.3±0.5	2.0±0.5

Table 4 Differences between Chinese and English published articles ($n = 10$)

Theme	Item	1st round	2nd round	3rd round
Differences in understanding -perspective of demands, subject, scope	Differences in perspectives	3	2.2±0.9	2.1±0.7
	Differences in understanding of basic theories	2	2.4±0.7	2.5±0.7
	Less variety of diseases in English articles	4	2.4±0.5	2.0±0.5
	Fewer types of different intervention in English articles	7	2.2±0.4	2.1±0.3
	Differences in terminology	6	1.6±0.4	1.5±0.4
Differences in quality	Differences in perspectives	3	2.2±0.9	2.1±0.7
	C: high similarity; E: with details of protocol, registration information, and detailed report details	10	1.8±0.5	1.8±0.4
Differences in quantity	More Chinese articles than English articles published	1	2.5±0.7	1.9±0.3
	Differences in perspectives	3	2.2±0.9	2.1±0.7
	Differences in understanding of basic theories	2	2.4±0.7	2.5±0.7
	Less variety of diseases in English articles	4	2.4±0.5	2.0±0.5
	Fewer types of different intervention in English articles	7	2.2±0.4	2.1±0.3
	Differences in terminology	6	1.6±0.4	1.5±0.4

Notes: C: Chinese; E:English.

Table 5 Reasons of low quality of Chinese studies included in SRs ($n = 10$)

Theme	Item	1st round	2nd round	3rd round
Increasing the number of published articles	Expansion in master's programme submissions and pressure to publish papers	2	2.1±0.6	1.9±0.3
	Pressures to get promotion, administrative positions, and project funding	8	1.8±0.6	1.3±0.5
Weaknesses in methodology	The existence of 'ghostwriting companies'	1	2.5±1.0	2.4±0.7
	Late start compared to Western countries	1	2.0±0.0	2.0±0.0
	Teaching research methodology has not become compulsory in every TCM universities)	1	1.8±0.4	1.7±0.7
	Barriers in using different checklists for different study designs	6	1.5±0.5	1.6±0.7
	The lack of reporting standards for many journals	7	1.4±0.5	1.6±0.7
High quality articles are submitted abroad, only a few Chinese SCI indexed journals		6	1.8±0.4	1.6±0.5
Poorer hardware and research infrastructure, i.e. equipment, biotechnology etc.		2	3.1±0.8	3.3±0.8
Lack of regulations and guidelines leading to an increase in articles evaluating the same topic/ intervention and resulting in published papers being less authoritative		6	1.8±0.6	1.5±0.5
Chinese journals vary in quality (mutual profitable relationship)		1	2.5±0.7	2.1±0.3
Differences in journal market environment and commercial investment		2	2.3±0.5	2.0±0.0

Table 6 Factors of maintaining journal good reputation ($n = 10$)

Theme	Item	1st round	2nd round	3rd round
Increase good quality manuscripts	Invite editorial board members, academic leaders and commission articles	9	1.6±0.5	1.7±0.5
	Priority selection of reputable researchers	7	1.9±0.3	1.7±0.5
	Use high-level reviewers	2	1.5±0.5	1.9±0.3
Improve the quality of review	Limit review time	4	1.9±0.3	2.0±0.0
	Choose the expert reviewers for the corresponding area	6	1.8±0.4	1.5±0.5
Improve the quality of editing	Requirements on editor' capacity and efficiency (timely and effective communication with the authors)	5	1.9±0.3	1.9±0.3
	Requirements on editors' responsibilities	2	1.9±0.3	1.8±0.4
Regular journal quality assessment		1	1.8±0.4	1.8±0.4
A clear idea of the direction, positioning, and strategy of the journal		2	1.7±0.5	1.8±0.4

experience. High consensus on the need to state the 'requirements of using different checklists for different study designs' was reached (Table 7).

The editors were also asked about the differences between the Chinese version and (potential) English versions of their journal and high consensus was reached on the fact that there were 'differences in the review system' (Table 8).

High levels of reliability coefficient (Cronbach alpha) were found between editors in the second and third rounds. The average measure ICC was 0.706 with a 95% confidence interval (*CI*) from 0.371 to 0.912 ($F(9, 531) = 3.397, P < 0.0005$) in the second round; ICC was 0.769 with a 95% *CI* from 0.506 to 0.931 ($F(9, 531) = 4.330, P < 0.0005$) in the third round. Wilcoxon signed-rank test showed that there was no statistically significant change ($P > 0.05$) in second and third round in 93% items, indicating good stability between rounds.

DISCUSSION

This study covered ten key journals in the field of TCM/IM, with high levels of consensus reached in 97% items. Participating editors believed that English journals in TCM/IM were of higher quality compared with their Chinese counterparts. The reasons for this were varied:

High quality articles have been submitted abroad

There are also unavoidable differences in perspectives and understandings about basic theories (i.e. English articles tend to focus on acupuncture which is more accepted in conventional healthcare and has a higher degree of integration in western countries.¹⁵ There seems to be a 'disconnection' between languages because of the differences in terminology, policy, education, insurance and the whole system, as well as in the journal market environment and commercial investment.

Table 7 Initiatives and strategies (*n* = 10)

Theme	Item	1st round	2nd round	3rd round
Screening high quality manuscripts	Invite editorial board members, academic leaders, peer reviewers and commission articles	5	1.7±0.5	1.8±0.4
	Ensure the use of checklists for different study designs	7	1.4±0.5	1.4±0.5
	Strict primary screening criteria to select quality manuscripts	2	1.8±0.4	1.9±0.3
Improve the internal quality and standards of the journal	Set up feasible assessments for editorial board members, reviewers and editors	1	2.0±0.0	1.9±0.3
	A careful analysis and implementation and feedback from journal management organizations, i.e. publishers	2	1.9±0.3	1.8±0.4
	Meaningful editorial events	1	2.0±0.0	2.0±0.5
Expand awareness of own journal	More academic activities (high quality academic conferences, exhibitions, and training courses)	3	2.2±0.4	1.9±0.3
	Carry out conferences focusing on valuable topics	2	2.0±0.5	1.8±0.4
	Send out journal categories for each issue to attract and target potential authors	4	1.8±0.4	2.1±0.3

Table 8 Differences between Chinese and English version of the same journal (*n* = 10)

Theme	Item	1st round	2nd round	3rd round
Differences in context	Topics, i.e. diseases, treatments	2	2.2±0.6	1.9±0.3
	Details of terminologies	3	2.2±0.6	2.0±0.0
	English versions lack deep understanding and interpretation of Chinese medicine theory	1	2.2±0.4	1.9±0.3
	English versions prone to accept more externally funded project articles	4	2.0±0.7	2.0±0.5
Differences in requirements	Same requirements for both versions	1	3.5±0.8	3.6±0.7
	Higher requirements for the English version	4	2.1±0.3	2.1±0.3
Differences in journal itself	Editorial board composition (English version has a large proportion of international members)	4	1.9±0.3	1.8±0.4
	English versions receive more international research articles	1	2.0±0.0	1.8±0.4
	Review system	6	2.0±0.0	1.8±0.4
	Publishers	4	2.0±0.0	1.8±0.4
	Advertising strategies	1	2.1±0.3	2.0±0.0
	Costs	3	1.7±0.5	1.6±0.5
Differences in audiences		1	2.0±0.0	2.0±0.0

The editors believe published articles in Chinese cover a wider subject area and scope. Chinese journals tend to publish more 'Chinese featured TCM research' as many of the articles perceive and interpret the results in TCM way, with a variety of interventions used for different conditions (i.e. there are many English complementary and alternative medicine (CAM) articles on acupuncture, but not on interventions such as bleeding; CHM research is often on a single herb to suit the requirements of Western 'evidence based medicine'). It also suggests that the Chinese articles are more likely to contain more syndrome differentiation and understanding regarding TCM theory.

Not enough high standard journals in China

'Academia's reward and promotion systems shape the choices of researchers, scientists at all stages of their career'.¹⁶ The requirement to publish certain number of articles in many organizations and hospitals is directly linked with graduation, getting promotion, administrative positions, and securing project funding. Therefore many students, clinicians and researchers have commitments/obligations and are expected to publish a certain amount of research papers in comparably short time frame. In addition, journal publication is a highly profitable business that attempts to maximize income. These emerge as an increasing number of 'ghostwriting companies' and open access

journals that put profit and publicity above quality, though there are many high standard journals exist in China. Those journals having potential mutual profitable relations and perverse incentives with the researchers who have the need to publish articles because of academic pressure may have problems with falsification of research findings.

The needs of rigorous methodology

The editors acknowledged the existence of weaknesses in the methodology of Chinese articles. Ensuring standards in research design has not become compulsory. Only a few TCM universities have compulsory courses in research methodology. Ge *et al.*¹⁷ assessed the quality of reporting in systematic reviews (SRs) and meta-analyses (MAs) of diagnostic tests published by authors in China; and determined the changes in the quality of over reporting. The numbers of diagnostic SRs/MAs is increasing annually, with many deficiencies in reporting but the quality has been improved over the previous years.

Repetitive work with less authority

There are huge number of articles published evaluating the same topic/intervention because of the lack of standard regulations and guidelines for the interventions for each specific condition, which results in less credibility in the published papers. This does not only happen with Chinese journals, it also happens in western journals, even with 'luxury journals', as discussed in a recent issue of the Lancet's publication special issue on 'Research: increasing value, reducing waste'.^{16,18} Though this debate within medical and experimental research was not focused on TCM or IM, it is a likely to be true for all healthcare research. As much as 85% - equating to \$200 billion of investment in 2010 was wasted¹⁹ and suggests that the system for assessing scientific research quality has 'gone wrong' and the article posed the question: 'why is research that might transform health care and reduce health problems not being successfully produced?'¹⁶

EDITORS' MESSAGE

Editors are looking for high quality manuscripts, with an interesting topic, a clear positioning and rationale and detailed report following appropriate checklists. It has been suggested that methodological rigor and full dissemination of their research should be judged, rather than the basis of the impact factors of the journals.¹⁶ Apart from basic requirements of writing good scientific paper, high quality articles require support of a good research environment, high level expertise, equipment, in combination with high level teamwork from editors, editorial board, and reviewers in multidisciplinary areas, in order to improve the internal quality and standards of the journal. The regulation of a journal needs regular journal quality assessment as well as a

clear idea of the direction, positioning, and strategy for the future.

Regulation and guidelines, and evidence-based medicine are the two main sections the participated editors want to publish more in their journals in the future. This may represent the direction of future research in this field, as well as a common awareness of ensuring solid methodology and a desire to improve the impact of their journal.

Limitations

This Delphi study investigated and discussed executive editors' perspectives of publishing research papers in the area of TCM/IM. Due to the sensitivity of the subjects, some editors stated that they did not want others to identify them. This would have been possible if full demographic information had been reported in the paper. We have respected their wishes of confidentiality and have not reported characteristics which would directly identify either the journals or their editors. The results from this study cannot be generalized to the whole population of TCM/IM editors in China as only ten Chinese executive editors were included.

CONCLUSION

High inter/intra-editor agreement was identified in the differences between TCM/IM research papers published in English and Chinese. Publishing standards and probity are keys in elevating the reputation of research. Editors' perspectives in maintaining and improving quality journal can be viewed as fundamental for editors and researchers in publishing any articles.

REFERENCES

- 1 **Robinson N**, Liu J, Lee MS. Clinical guidelines: the way forward for best practice. *Eur J Integr Med* 2014; 6(2): 133-134.
- 2 **Hu X**, Lorenc A, Kemper K, Liu J, Adams J, Robinson N. Defining integrative medicine in narrative and systematic reviews: a suggested checklist for reporting. *Eur J Integr Med* 2015; 7(1): 76-84.
- 3 **Chan K**, Hu X, Razmovski-Naumovski V, Robinson N. Challenges and opportunities of integrating traditional Chinese medicine into mainstream medicine: a review of the current situation. *Eur J Integr Med* 2015; 7(1): 67-75.
- 4 **Hu X**, Chen N, Chai Q, et al. Integrative acupuncture treatment for low back pain: an exploratory systematic review and Meta-analysis of randomised controlled trials. *Chin J Integr Med* 2015; in process.
- 5 **Schulz KF**, Altman DG, Moher D, CONSORT Group. CONSORT 2010 statement: updated guidelines for reporting parallel group randomised trials. *Int J Surg* 2011; 9(8): 672-677.
- 6 **Moher D**, Liberati A, Tetzlaff J, Altman DG, PRISMA Group. Preferred reporting items for systematic reviews and meta-analyses: the PRISMA statement. *Int J Surg*

- 2010; 8(5): 336-341.
- 7 **Padgett DK.** Qualitative methods in social work research. 2nd ed. In: Getting start: study design and sampling. United States of America: Sage Publication, Inc., 2008: 45-618.
- 8 **Brislin WR.** Back-Translation for Cross-Cultural Research. *J Cross-Cult Psychol* 1970; 1(3): 185-216.
- 9 **Matell M, Jacoby J.** Is there an optimal number of alternatives for likert scale items - study - reliability and validity. *Educ Psychological Meas* 1971; 31(3): 657.
- 10 **Johnie HC.** Guidelines for using the delphi technique to develop habitat suitability index curves. *Fish and Wildlife Service*; 1987. Available from URL: http://pubs.er.usgs.gov/publication/fwsobs82_10_134
- 11 **Murphy MK, Sanderson CFB, Black NA, et al.** Consensus development methods, and their use in clinical guideline development. *Health Technol Assess* 1998; 2(3): 1-88.
- 12 **Diamond IR, Grant RC, Feldman BM, et al.** Defining consensus: a systematic review recommends methodologic criteria for reporting of Delphi studies. *J Clin Epidemiol* 2014; 67(4): 401-409
- 13 **Shrout PE, Fleiss JL.** Intraclass correlations: uses in assessing rater reliability. *Psychol Bull* 1979; 86(2): 420-428.
- 14 **von der Gracht HA.** Consensus measurement in Delphi studies: Review and implications for future quality assurance. *Technol Forecast Soc Change* 2012; 79(8): 1525-1536.
- 15 **Robinson N, Lorenc A, Ding W, Jia J, Bovey M, Wang XM.** Exploring practice characteristics and research priorities of practitioners of traditional acupuncture in China and the EU-A survey. *J Ethnopharmacol* 2012; 140(3): 604-613.
- 16 **Macleod MR, Michie S, Roberts I, et al.** Biomedical research: increasing value, reducing waste. *Lancet* 2014; 383(9912): 101-104.
- 17 **Ge L, Wang JC, Li JL, et al.** The assessment of the quality of reporting of systematic reviews/Meta-analyses in diagnostic tests published by authors in China. *PLoS One* 2014; 9(1): e85908.
- 18 **Kleinert S, Horton R.** How should medical science change? *Lancet* 2014; 383(9913): 197-198.
- 19 **Chalmers I, Glasziou P.** Avoidable waste in the production and reporting of research evidence. *Lancet* 2009; 374(9683): 86-89.