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A thorough analysis of the scientific outcome for the abstracts presented at National Pediatric Urology Congresses (2018-2023)

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Scientific congresses are essential events that contribute to advancements in healthcare by facilitating the dissemination of new knowledge and fostering collaboration among experts.[1,2] These congresses aim to share up-to-date research findings and medical innovations at the national level, while also influencing clinical practice. The true scientific value of these studies becomes fully evident when abstracts are converted into full-text publications. Analyzing the conversion rates of abstracts into full-text articles is crucial not only for assessing the quality of the presented research but also for evaluating the scientific impact of the congresses themselves.[3,4]

The annual meetings of Türkiye-based Pediatric Urology Association (PEDURO) serve as a platform for disseminating contemporary research and medical innovations at the national level, thereby shaping clinical practice. The PEDURO held its first national congress in 2010 in Izmir and continued to organize annual meetings every year, except during the novel coronavirus disease 2019

Citation:

Abstract

Objectives: This study aims to evaluate the publication rates of abstracts presented at the Pediatric Urology Association (PEDURO) congresses and assess factors influencing their conversion into full-text publications.

Materials and methods: A retrospective analysis was conducted on abstracts presented at PEDURO congresses between January 2018 and December 2023, excluding 2020 due to the novel coronavirus disease 2019 (COVID-19) pandemic. Data were extracted from congress proceedings and categorized by research type, presentation format, and institutional affiliation. Publication status was determined through searches in PubMed, Web of Science, Google Scholar, and ULAKBIM.

Results: Of the 393 abstracts presented, 14.2% (n=56) were published in peer-reviewed journals. Oral presentations had a significantly higher publication rate (17%) than posters (8.6%) (p=0.026). Basic science studies had the highest publication rate (45%), while case reports had the lowest (4%) (p<0.001). Most publications (75%) occurred within two years after the presentation. The median journal impact factor was 1.5 (range, 1.2 to 2). Multivariate analysis showed that basic science studies had a significantly higher likelihood of publication (OR=3.992, p=0.005), whereas case reports were less likely to be published (OR=0.223, p=0.003).

Conclusion: The publication rate of PEDURO congress abstracts aligns with national trends, but remains lower than international congresses. Basic science studies and oral presentations were more likely to be published. Encouraging high-quality research and improving methodological rigor may enhance publication rates, ultimately strengthening the scientific impact of the congress.

Keywords: Abstract, congress, pediatric urology, publication rate.

(COVID-19) pandemic. However, a comprehensive evaluation of the publication status of abstracts presented at these meetings has not yet been conducted.

In the present study, we aimed to determine the publication rates of abstracts presented at PEDURO congresses and to conduct a comprehensive assessment of the characteristics and quality of the resulting full-text publications. We also aimed to evaluate the publication rates of these abstracts in peer-reviewed journals and to identify potential factors influencing their likelihood of publication.

MATERIALS AND METHODS

Study design

This single-center, retrospective study was conducted at Prof. Dr. Süleyman Yalçın City Hospital, Department of Pediatric Surgery between January 2018 and December 2023. All abstracts presented at the PEDURO during the study period was reviewed. The year 2020 was excluded, as the congress did not take place that year. The abstracts were obtained from official congress proceedings and conference booklets. To ensure the relevance and validity of the study topics, the most recent five-year period was selected to search for scientific publications of the abstracts.

Data collection

Each abstract was categorized based on the congress year, research type (clinical studies, basic science/experimental studies or case reports), presentation format (oral or poster), study characteristics (prospective or retrospective design, use of animal models or multi-center collaboration), institutional affiliation (differentiating between university hospitals and other tertiary care centers), and research topics (including hypospadias, urolithiasis, vesicoureteral reflux, oncology, neurogenic bladder, ureteropelvic junction obstruction, enuresis, and urinary tract infections). Abstracts related to these fields were identified, and their publication status was evaluated.

Publication status assessment

Publication status was determined through an extensive search across PubMed, Web of Science, Google Scholar, and ULAKBIM by a single researcher. The search was conducted using the title, the keywords and the author names. The identified publications were validated by matching study design, sample size, and research question. Journals were classified based on their indexing in databases.

For publications indexed in multiple databases, the highest-ranking category was considered. Additionally, the impact factors (IFs) of the journals were evaluated based on their five-year IF ratings. Time to publication was analyzed by calculating the period between the year for the congress presentation and that of the official publication. Studies were categorized as published within or beyond two years.

PICO strategy

Population/problem (P): Abstracts presented at the Annual PEDURO congresses between 2018 and 2023.

Intervention (I): Presentations which were presented at the congress and subsequently published in a peer-reviewed journal.

Comparison (C): Presentations which were presented at the congress but did not get published in any peer-reviewed journal.

Outcomes (O): Likelihood of publication in peer-reviewed journals, time to publication, analysis of factors affecting publication status.

Ethical considerations

This study did not involve direct human or animal experimentation. Therefore, formal ethical approval was not required. However, all data collection and analysis procedures adhered to ethical standards in academic research. Abstracts and publications were analyzed solely for research evaluation purposes, and no personal information or unpublished data were disclosed.

Statistical analysis

Statistical analysis was performed using the Jamovi version 2.4.1 software (Jamovi Research, Vienna, Austria). Descriptive data were presented in median and interquartile range (IQR) or number and frequency, where applicable. Differences in categorical variables, including publication rates by congress year, study type, and presentation mode, were assessed using chi-square or Fisher exact tests. Univariate binary logistic regression analyses were conducted to identify potential predictors of publication, and variables with p values of <0.05 were subsequently included in the multivariate logistic regression model. Odds ratios (ORs) were calculated to measure the strength of associations. The predictive accuracy of the final logistic regression model was evaluated

using receiver operating characteristic (ROC) curve analysis, and the area under the curve (AUC) was reported. A two-sided *p* value of <0.05 was considered statistically significant. The distribution and relationships among variables regarding publication status were visualized using a Sankey diagram, while Pareto charts were utilized to determine cumulative contributions. Both the Pareto chart and the Sankey diagram were generated using ChartExpo in Power BI software (ChartExpo LLC, Texas, USA, 2014). Additionally, BioRender software online version 2025 was employed to create bar plots and infographics for enhanced visual representation.

RESULTS

A total of 393 abstracts were presented during the assessed five-year time interval. The subsequent publication rate in peer-reviewed journals was 14.2% (n=56) (Table 1). This rate ranged between 10.9% in 2023 and 17.4% in 2022 with no statistically significant difference (p=0.776). Oral presentations had a significantly higher publication rate (17%) compared to poster presentations (8.6%) (p=0.026). Basic science/experimental studies had a higher publication rate (45%) than clinical studies (12.2%) (p<0.001). Animal studies showed a high publication rate of 42.9% compared to others (p=0.029). Case

reports had the lowest publication rate at 4%, indicating a statistical significance compared to others (p<0.001) (Table 1).

Of the 120 abstracts presented in 2018, approximately half (n=58, 48%) were poster presentations; however, this number gradually declined over the years, with no poster presentations included in 2023.

The median IF for published articles was determined as 1.5 (range, 1.2 to 2) (Table 2). Most studies (75%) were published within two years, whereas a longer duration was observed in 25%. The highest number of articles (16.1%) was published in the *Journal of Pediatric Urology (JPU)*.

The majority of the studies consisted of single-center retrospective studies (n=195, 50%) and case reports (n=126, 32%). Single-center prospective studies comprised 43 studies (11%), followed by experimental (n=11, 3%) and animal studies (n=7, 2%). Multi-center, retrospective (n=6, 2%) and multi-center, prospective studies (n=5, 1%) were the least common (Figure 1).

The most frequently presented main topic was hypospadias (10.7%), followed by enuresis (8.9%) and urogenital anomalies (7.9%). Urolithiasis accounted for 6.87%, closely followed by ureteropelvic junction

TABLE 1				
Journal publication rates and related factors				
	Congress abstracts (n=395)	Journal publication (n=56)	Publication rate (%)	*p*
Congress year				0.776
2018	120	17	14.3	
2019	86	10	11.6	
2021	50	8	16	
2022	92	16	17.4	
2023	47	5	10.9	
Type of presentation				**0.026**
Poster	128	11	8.6	
Oral	265	45	17	
Type of the study				**<0.001**
Basic science/experimental	25	11	45	
Clinical study	368	45	12.2	
Study features				
Animal study	7	3	42.9	**0.029**
Case report	126	5	4	**<0.001**
Prospective study	48	5	10.4	0.162
Multicenter	11	2	18.2	0.705

Publication details	n	%	Median	Quartiles
TABLE 2				
Publication details				
Time to publication				
<2 years	42	75		
>2 years	14	25		
Published journals				
Web of Science indexed	34	60.7		
Turkish ULAKBIM index	19	33.9		
Other journals	3	5.4		
Journal title				
Journal of Pediatric Urology	9	16.1		
Turkish Journal of Pediatric Surgery	4	7.1		
Journal of Dr. Behçet Uz Children's Hospital	4	7.1		
Urology Journal	3	5.4		
Impact factor			1.5	1.2-2

obstruction (6.6%) and oncology (6.1%). The distribution of topics of abstracts presented at the congress is given in Table 3.

Topics with more than 10 abstracts were evaluated individually for their publication rates. Circumcision had the highest publication rate (35.3%), followed by testicular torsion (33.3%), vesicoureteral reflux (25%), ureteropelvic junction obstruction (19.2%), and hypospadias (19%). Oncology section had 25 abstracts presented with none resulting in publication. There was no statistically significant difference in publication rates among the various topics analyzed ($p>0.05$). The relation between topics, and other items in terms of publication rate was given as a Sankey diagram (Figure 2).

In the univariate analysis, several factors significantly influenced the likelihood of publication. Oral presentations had a higher rate of publication compared to posters (OR=2.175, $p=0.029$), although this effect lost significance in the multivariate analysis
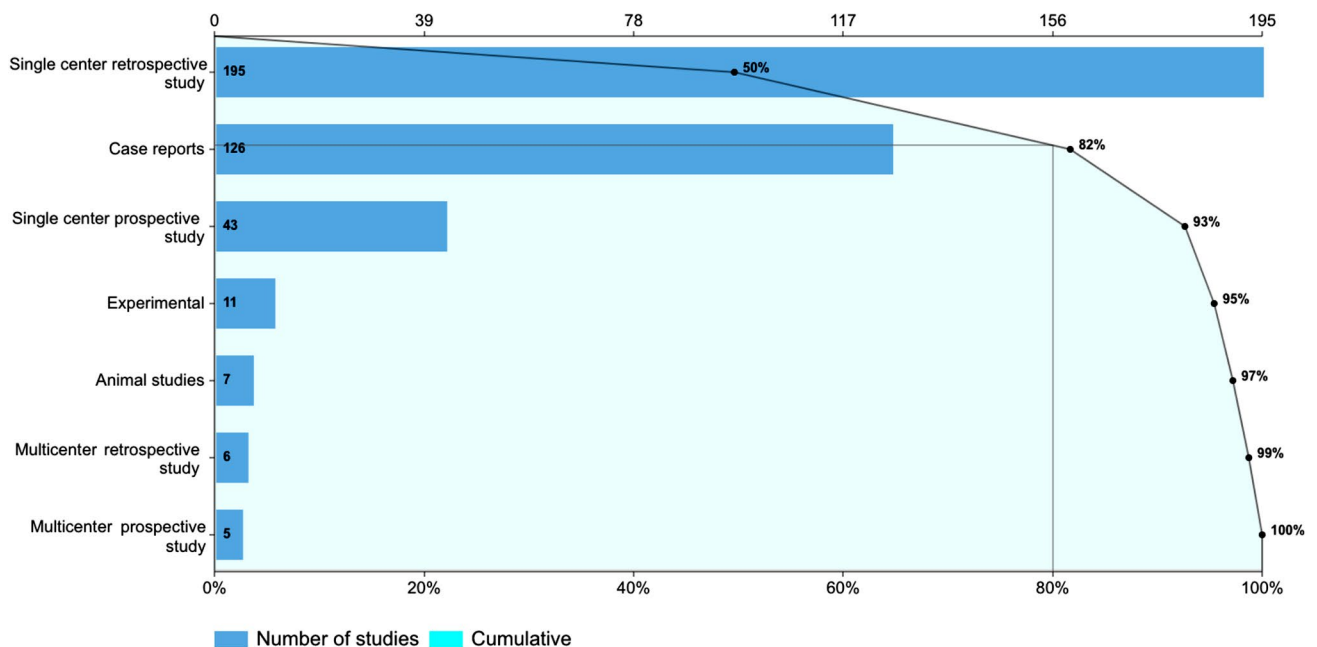

Figure 1. Analysis of study design.

TABLE 3

Distribution of topics of presented abstracts

Topics	n	%
Hypospadias	42	10.7
Enuresis	35	8.91
Urogenital anomaly	31	7.89
Urolithiasis	27	6.87
Ureteropelvic junction obstruction	26	6.62
Oncology	25	6.36
Vesicoureteral reflux	24	6.11
Testicular torsion	18	4.58
Circumcision	17	4.33
Inguinoscrotal pathology	15	3.82
Trauma	16	4.07
Neurogenic bladder	15	3.82
Urinary tract infection	14	3.56
Urinary reconstruction	9	2.29
Ureterocele	8	2.04
Nonpalpable testis	8	2.04
Posterior urethral valve	5	1.27
Ureterovesical junction obstruction	5	1.27
Urodynamics	4	1.02
Varicocele	3	0.76
Ovarian torsion	2	0.51
Renal transplantation	2	0.51
Bladder-bowel dysfunction	2	0.51
Hydronephrosis	1	0.25
Epispadias	1	0.25
Endourology	1	0.25
Other	37	9.41

(OR=1.290, p=0.503). Basic sciences/experimental studies showed a notably higher publication probability than clinical studies (OR=5.640, p<0.001), remaining significant in the multivariate analysis (OR=3.992, p=0.005). Animal studies were initially significant in univariate analysis (OR=4.712, p=0.046), but not in the multivariate analysis (OR=1.063, p=0.945). Case reports demonstrated a significantly lower chance of publication in both univariate (OR=0.175, p<0.001) and multivariate analyses (OR=0.223, p=0.003). Factors including multi-center studies and prospective versus retrospective designs did not significantly influence publication probability (p>0.05 for all) (Table 4).

The binary logistic regression model representing the predictors of publication likelihood demonstrated a moderate predictive capability, with an AUC value calculated as 0.69. The ROC curve illustrating the relationship between sensitivity (true positive rate) and 1-specificity (false positive rate) for the predictive model is presented in Figure 3.

DISCUSSION

Since its establishment in 2010, PEDURO has been organizing annual national congresses dedicated exclusively to pediatric urology. The abstracts presented at these congresses have the potential to influence current medical practices. The primary goal of these meetings is to facilitate the exchange of new ideas and experiences, which is particularly valuable for early-career researchers. However, merely presenting scientific abstracts at a congress is not sufficient. They are also expected to be published in

TABLE 4

Binary logistic regression prediction model of publication probability

|	Univariate analysis		Multivariate analysis	
Predictors	OR	*p*	OR	*p*
Oral presentations (ref: poster)	**2.175**	**0.029**	1.290	0.503
Multicentric study (ref: monocentric)	1.350	0.706		
Basic sciences/experimental (ref: clinical studies)	**5.640**	**<0.001**	**3.992**	**0.005**
Animal studies	**4.712**	**0.046**	1.063	0.945
Case reports	**0.175**	**<0.001**	**0.223**	**0.003**
Prospective study (ref: retrospective study)	0.499	0.169		
OR: Odds ratio.				
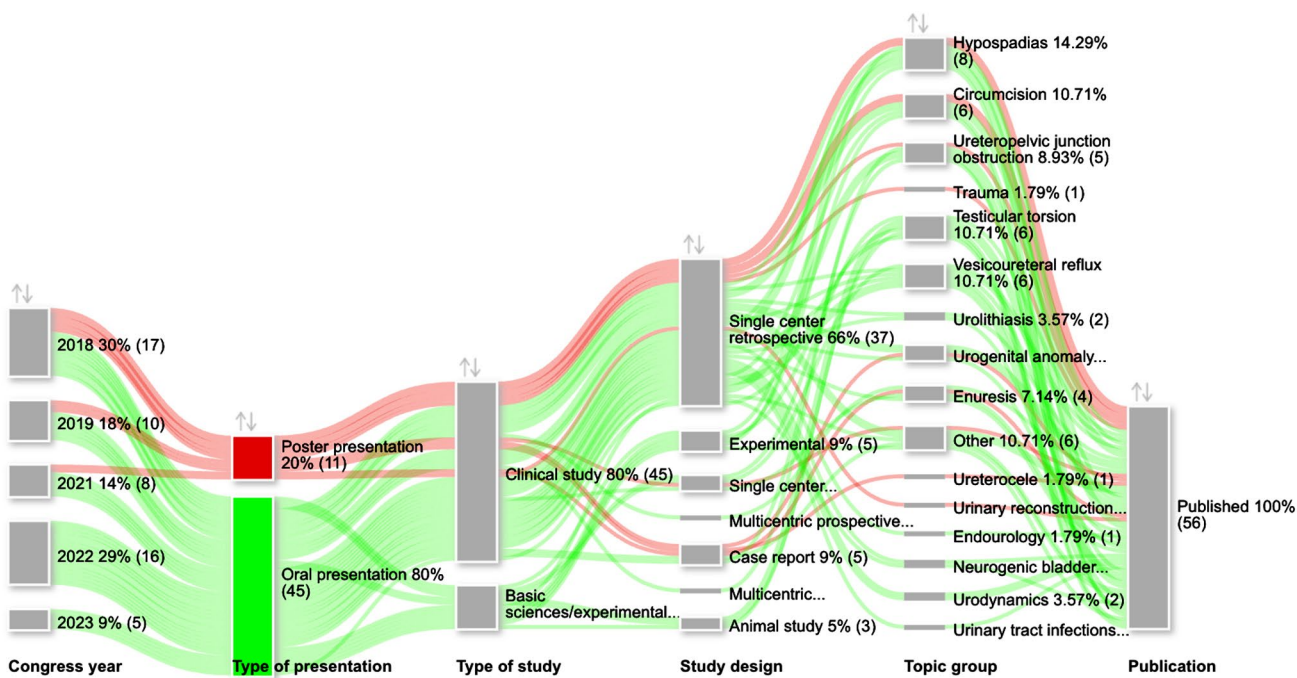
Figure 2. Sankey diagram.

peer-reviewed journals to contribute to the academic community. The publication process serves as a crucial measure of a study's reliability and scientific validity, while also reflecting the academic quality of the congress itself.[5] However, to date, no study
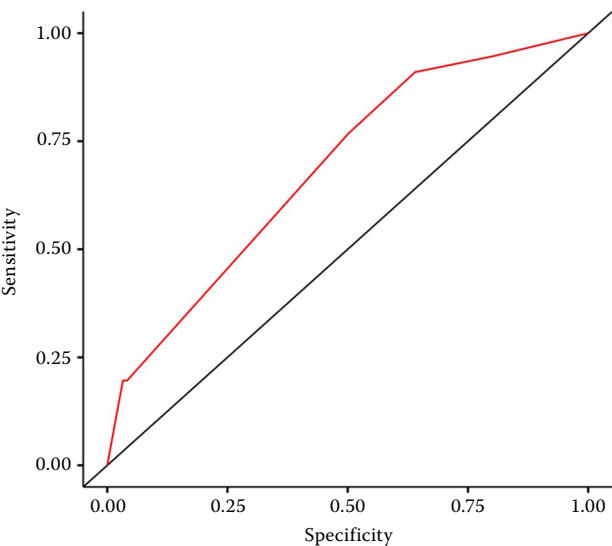

Figure 3. Receiver operating characteristic curve for binary logistic regression model predicting publication probability (AUC=0.69).

has been conducted to determine the proportion of abstracts presented at the PEDURO which underwent peer review and achieved publication.

The publication rates of abstracts presented at various national congresses in Türkiye range from 13.2 to 57%.[6-8] However, a study of abstracts presented at the Turkish National Urology congress found that only 6.25% of pediatric urology abstracts were published.[9] In contrast, the publication rates at international congresses ranged from 20 to 69%.[4,10,11] A study on abstracts presented at the European Society for Pediatric Urology (ESPU) congress between 2003 and 2010 revealed that nearly half of these abstracts were published as full-text articles within a year after the congress.[2] A more recent study also documented that about half of the abstracts presented at the European Paediatric Surgeons' Association (EUPSA) congress were published.[12] In this context, while the publication rates of abstracts from national congresses in the current study is acceptable, it is comparatively lower compared to international congresses. Possible reasons for this discrepancy may include language barriers, methodological limitations, and the strict peer-review processes in international journals.

Several studies have shown that the publication rate of oral presentations is higher than that of poster presentations.[2,13] However, some other studies have found similar publication rates for both oral and poster presentations.[14,15] Interestingly, it has also been shown that the publication rate of rejected abstracts is comparable to that of accepted ones.[16] In our study, oral presentations had a statistically significant higher publication rate (17%) compared to poster presentations (8.6%). However, in the multivariate analysis, this effect disappeared, indicating that multiple factors influence the likelihood of being published. These results suggest that while oral presentations may initially have a higher publication potential, other factors must also be considered in the publication process.

These findings suggest that while oral presentations may initially have a higher publication potential, various additional factors influencing publication likelihood should also be taken into consideration. Among the temporal trends and external factors affecting the number of abstract submissions, the gradual decline observed between 2018 and 2023 appears to be associated with both the long-term effects of the COVID-19 pandemic and structural changes in the format of the congress. Indeed, it has been reported in the literature that the COVID-19 pandemic has led to a sustained decrease in academic productivity and participation in scientific meetings.[17] Furthermore, modifications in congress policies, such as the complete removal of poster presentations in 2023 and the adoption of a more selective review process, may also have contributed to the reduction in the number of submitted abstracts.

One of the notable aspects of this study is the low number of multi-center, prospective (1%, n=5) and retrospective (2%, n=6) studies. Multi-center, prospective studies are critical methodologies which enhance the scientific reliability of research. Prospective studies minimize recall bias by systematically collecting data over time, while multi-center studies increase the generalizability of results by strengthening collaboration among different centers.[18,19] Although factors such as multi-center studies, prospective and retrospective designs appear to be influential in the univariate analysis, they did not have a significant impact on the publication probability in the multivariate analysis. The present study showed that these factors do not affect the likelihood of publication. This may be due to the influence of numerous other variables and research areas.

Basic science or experimental studies had a significantly higher probability of publication compared to clinical studies and this finding remained significant in the multivariate analysis. Clinical studies often face more ethical and regulatory scrutiny, which may limit their publication chances. The literature suggests that basic science studies are more likely to be published in journals with higher IFs compared to clinical studies.[20] This result may be linked to the fact that basic science research is typically conducted in more controlled laboratory settings with stronger methodologies. Clinical studies, on the other hand, may encounter more difficulties in getting published due to patient variability, insufficient follow-up periods, and methodological limitations.

The publication rate of animal studies was found to be significant but this significance was lost in the multivariate analysis. This suggests that while animal studies may receive more attention in some publications, other factors could also influence their chances of being published. Variability in research quality may have diminished this effect. On the other hand, case reports were found to have lower publication probabilities in both univariate and multivariate analyses. This indicates that case reports are usually considered more limited in originality, which contributes to their lower likelihood of publication. Since case reports typically focus on rare cases rather than generating generalizable scientific evidence, they tend to have a reduced chance of being published in journals.

Impact factor is a key metric commonly used in scientific publishing to assess the academic value of research. Universities and scientific institutions evaluate the academic impact of researchers or research teams by examining the IFs of the journals in which their work is published.[21] In this study, the median IF of the published articles was found to be 1.5 indicating that the published works usually appeared in journals with a moderate IF. This suggests that the potential for these studies to generate international impact may be limited.

The fact that 60.7% of the published presentations were in Web of Science indexed journals is an important finding that enhances the academic

value and international accessibility of the congress. However, increasing this proportion could be a significant goal in terms of ensuring that articles are published in higher IF international journals. The publication rate of 33.9% in Turkish journals listed in ULAKBIM indicates that the studies have had a greater impact at the national level and have made scientific contributions to the Turkish academic community. However, it should be noted that articles published in national journals may have lower visibility in the international arena and may reduce the likelihood of being cited.

Journal of Pediatric Urology was the journal with the highest number of published articles, accounting for 16.1%. In another study, JPU ranked second among the most preferred journals.[2] This indicates that research in the field of pediatric urology has the greatest potential to make an impact and that this journal is favored by researchers. The study indicates that the highest publication rate is related to circumcision (35.3%), followed by testicular torsion (33.3%) and vesicoureteral reflux (25%). These findings are consistent with the number of publications in PubMed searches.

In our study, we observed that 75% of the abstracts were published within two years, while 25% took a longer period to be converted into full-text articles. For the Society for Pediatric Urology (SPU), the average duration for this process was reported to be 12.3 months.[22] Similarly, another study reported this duration as 11.7 months.[9] According to the American Urological Association's (AUA) analysis covering the years 2015-2020, approximately 52% of the presented abstracts were published within three years, and the median time from submission to publication was 12.5 months.[23] These findings may reflect the challenges faced by researchers during the publication process and potential delays in the peer review process. Additionally, factors such as long revision periods for some studies or being redirected to other journals after rejection could also contribute to the extended time for publication.

The binary logistic regression model developed to predict the likelihood of publication in this study demonstrated moderate predictive power, as indicated by the AUC value (0.69). This suggests that the model provides usually accurate predictions, but could be improved for more precise forecasting. For a more predictive model, it may be necessary to evaluate additional variables (e.g., author experience, funding support, challenges in the peer review process).

Nonetheless, the study has several limitations. First, the article screenings were conducted by a single researcher. Additionally, only English-language publications were included in the screening of published articles. Some studies may have been overlooked if there were discrepancies in the titles and/or author lists of the published abstracts. Although the study covers a five-year period and provides more than a year of publication time, the publication process for some reports may have taken longer. Furthermore, abstracts excluded from the analysis may have been published or could be published in subsequent years, making it difficult to determine the exact publication rate. However, it is of utmost importance to emphasize two key strengths of our study that were not present in previous publications: the use of a Sankey diagram visualization and the application of logistic regression analysis to identify the determinants of publication likelihood. These innovative approaches enhance the robustness and analytical depth of our study.

Strengthening the peer-review team is crucial to enhancing the scientific quality of presentations at conferences and making the evaluation process more reliable. Additionally, examining conference peer-review reports through interrater agreement analyses will help measure the consistency among reviewers and contribute to making the evaluation process more objective, systematic, and rigorous. These approaches can support the development of a more robust peer-review process in future conferences, thereby contributing to the improvement of scientific publication quality.

In conclusion, this study provides valuable insights into the publication rates of abstracts presented at the PEDURO congresses and the factors influencing their likelihood of publication. The findings indicate that basic science/experimental studies, oral presentations, and studies with higher methodological rigor are more likely to be published. Future efforts should focus on enhancing the quality of clinical research, promoting multi-center and prospective studies,

and addressing the challenges faced by case reports in the publication process. These steps would contribute to ensuring that research presented at congresses continues to make a meaningful impact on the field of pediatric urology.

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