

Guest Editorial

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In this issue we include the revised Standards for Reporting Interventions in Clinical Trials of Acupuncture guidelines (better known as STRICTA), which is now an official extension to the widely used Consolidated Standards of Reporting Trials (CONSORT) statement. As well as appearing in AJACM, it is also being co-published simultaneously in six other research-focused journals: *Acupuncture in Medicine*, *PLoS Medicine*, *Journal of Evidence Based Medicine*, *Journal of Chinese Integrative Medicine*, *Medical Acupuncture* and the *Journal of Alternative and Complementary Medicine*. STRICTA was first published in 2001 and I was present at its inception in 2000 at Exeter, UK, when Dr Hugh MacPherson first showcased his initial concept to a number of acupuncture researchers. The STRICTA guidelines then went through a subsequent second drafting involving several acupuncture journal editors who revised the checklist to six key domains. Shortly thereafter it was published in five leading acupuncture journals, which led to its widespread adoption by many researchers when reporting their clinical research. Since its publication it has been translated into Chinese, Japanese and Korean, and many Asian researchers now use the checklist as well. During the intervening period, STRICTA has undergone several reviews. The first

review involved questioning authors of clinical trials and systematic reviews¹ as to its utility, while the second review evaluated the impact of STRICTA during the period 2001–2007.² In 2008 the STRICTA group began working with the CONSORT group and the Chinese Cochrane Centre to consider adding STRICTA as an extension to the official CONSORT statement. This resulted in a wide-ranging consultation process and a one-day consensus meeting to consolidate the revised guidelines.³ The revised STRICTA checklist has 17 information requirements which have been categorised into six items. These six items are: (i) acupuncture rationale, (ii) details of needling, (iii) treatment regimen, (iv) other components of treatment, (v) practitioner background, and (vi) control or comparator interventions. In addition to the item checklist there are detailed explanations for each of the items and an example to assist interpretation of each requirement.

As readers are no doubt aware, AJACM has endorsed the use of STRICTA since the inception of the journal and will continue to require researchers who submit clinical studies to comply with the revised STRICTA guidelines. STRICTA, while useful for peer review, also ensures that authors include sufficient details to enable replication by other research teams

and to allow readers to critically appraise the adequacy of the acupuncture being delivered. STRICTA has been developed to be used with other reporting checklists, especially the CONSORT statement. The use of STRICTA will drive the development of high-quality clinical trials and the publication of their results. The revised checklist represents another important step towards ensuring clear and transparent research reporting and a better understanding of the research process. The editorial board of AJACM is proud to support the simultaneous publication of STRICTA and will continue to expect submitting authors to use the STRICTA guidelines for reporting purposes.

References

1. Prady SL, MacPherson H. Assessing the utility of the Standards for Reporting Trials of Acupuncture (STRICTA): a survey of authors. *J Altern Complement Med* 2007;13(9):939–44.
2. Prady SL, Richmond SJ, Morton VM, MacPherson H. A systematic evaluation of the impact of STRICTA and CONSORT recommendations on quality of reporting for acupuncture trials. *PLoS One* 2008;3(2):e1577.
3. MacPherson H, Altman DG. Improving the quality of reporting acupuncture interventions: describing the collaboration between STRICTA, CONSORT and the Chinese Cochrane Centre. *J Evid Based Med* 2009;2:1–4.