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Citation Classics in Systematic Reviews and Meta-Analyses: Who Wrote the Top 100 Most Cited Articles?

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Abstract

Background: Systematic reviews of the literature occupy the highest position in currently proposed hierarchies of evidence. The aims of this study were to assess whether citation classics exist in published systematic review and meta-analysis (SRM), examine the characteristics of the most frequently cited SRM articles, and evaluate the contribution of different world regions.

Methods: The 100 most cited SRM were identified in October 2012 using the Science Citation Index database of the Institute for Scientific Information. Data were extracted by one author. Spearman's correlation was used to assess the association between years since publication, numbers of authors, article length, journal impact factor, and average citations per year.

Results: Among the 100 citation classics, published between 1977 and 2008, the most cited article received 7308 citations and the least-cited 675 citations. The average citations per year ranged from 27.8 to 401.6. First authors from the USA produced the highest number of citation classics (n=46), followed by the UK (n=28) and Canada (n=15). The 100 articles were published in 42 journals led by the Journal of the American Medical Association (n=18), followed by the British Medical Journal (n=14) and The Lancet (n=13). There was a statistically significant positive correlation between number of authors (Spearman's rho=0.320, p=0.001), journal impact factor (rho=0.240, p=0.016) and average citations per year. There was a statistically significant negative correlation between average citations per year and year since publication (rho = -0.636, p=0.0001). The most cited papers identified seminal contributions and originators of landmark methodological aspects of SRM and reflect major advances in the management of and predisposing factors for chronic diseases.

Conclusions: Since the late 1970s, the USA, UK, and Canada have taken leadership in the production of citation classic papers. No first author from low or middle-income countries (LMIC) led one of the most cited 100 SRM.

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Background

Systematic reviews of the literature occupy the highest position in currently proposed hierarchies of evidence [1] and occupy this top position for two fundamental premises. Firstly, a systematic review involves the application of scientific strategies which limit bias by systematic assembly, critical appraisal and synthesis of relevant studies on a particular topic [2,3]. Secondly, reviews that include a meta-analysis provide precise estimates of the association studied[4]. Because of the importance of systematic reviews in summarizing the advances of health care knowledge, their number is growing rapidly [4]. If

systematic reviews in fact represent the best level of evidence, they are likely to have great clinical importance[4]. It follows that they may be cited often in the literature. The acknowledgement that one article gives to another is a reference; the acknowledgement that one article receives from another is a citation [5]. The number of citations an article receives after publication reflects its impact on the scientific community. There have been a few recent attempts to identify and analyze "the most cited articles" in various specialties [5–9]. However, an analysis of the most frequently cited systematic review and meta-analysis (SRM) articles has not yet been reported. Montori and colleagues examined whether

systematic reviews receive more citations than narrative reviews [4]. They found that rigorous systematic reviews were cited significantly more often than narrative reviews. In this paper we sought to identify and examine the characteristics of the most cited SRM related articles, such as ranking, year of publication, publishing journal, topic and contribution of different world regions to most cited SRM articles.

In addition, we assessed whether there was an association between year of publication, number of authors, number of pages, journals' impact factor, and average citations per year.

Methods

The Science Citation Index of the Institute for Scientific Information (ISI) was searched in October 2012 for systematic review and meta-analysis related articles. We searched for articles using validated keywords for identifying SRM [10]. To accredit an article to countries, the method of "absolute country counting" was adopted, in which each country contributing to an article received one paper credit based on the lead author's correspondence or reprint address [11]. The 100 most-cited articles were selected for further descriptive analyses. Data collected included the year of publication, the topic covered, lead author's correspondence country of origin, and number of citations.

We used a density-equalizing map to visualize the citation classics by the corresponding address of the author. We used Gastner and Newman's algorithm [12] in order to produce a map of the world in which countries were re-sized according to the number of most cited SRM articles. These calculations employ a diffusion equation in the Fourier domain borrowed from elementary physics, which allows variable resolution by tracking moving boundaries [12].

The impact factors and immediacy factors of journals listed in the 2012 Journal Citation Reports Science Edition were adopted as quantitative tools for evaluating journals in which these articles were published. A journal's impact factor is a measure of the frequency with which the "average article" in the journal has been cited in a given period of time. The impact factor for a journal is calculated based on a three-year period, and can be considered to be the average number of times published papers are cited up to two years after publication. Non-parametric (Spearman's) correlation was used to assess the association between years since publication (with reference to the year 2012), numbers of authors, article's length (number of pages), journal's impact factor and average citations per year.

Results

The 100 articles are listed in Table 1 in descending order, ranked according to the total number of citations since publication. Among the 100 citation classics, the most cited article received 7308 citations, and the least-cited 675 citations. The average citations per year ranged from 27.8 to 401.6. Figure 1 shows the density-equalizing map illustrating the number of contributions for each country in SRM citation classics. Density equalising mapping demonstrates that a

relatively small number of countries were responsible for the majority of the top cited SRM articles (Figure 1). First authors from the USA produced the highest citation classics (n=46), followed by the UK (n=28) and Canada (n=15) (Figure 1). All the 100 most cited articles were published in the English Language.

The year of publication with the relevant number of classics identified is shown in Figure 2. The oldest article was published in 1977 and the most recent article in 2008. Figure 3A shows correlation between average citations per year and year since publication (with reference to 2012). There was a statistically significant negative correlation between average citations per year and year since publication (Spearman's rho = -0.636, 95% CI -0.739 to -0.501, p=0.0001), such that the average citations per year reduces with the number of years since publication.

The number of authors of the most cited articles ranged from one to 22. Four of the articles were authored by a single author and 18 articles by two authors. There was a statistically significant positive correlation between number of authors and average citations per year (rho=0.320, 95% CI 0.132 to 0.486, p=0.001), such that the greater the number of authors, the higher the average citation per year (Figure 3B). The median length of article was 10 pages (range: 2 to 75 pages). There was no statistically significant correlation between length and average citations per year (rho = -0.052, 95% CI -0.246 to 0.146, p=0.608). The most cited articles were published in 42 journals (Table 2), led by Journal of The American Medical Association (n=18) followed by the British Medical Journal (n=14), The Lancet (n=13), and the Annals of Internal Medicine (n=7). Journal impact factors ranged from 1.412 (for Biometrics) to 51.658 (for the New England Journal of Medicine).

There was a statistically significant positive correlation between average citations per year and journal impact factor (rho=0. 240, 95% CI 0.045 to 0.416, p=0. 016) (Figure 3C). General and internal medicine were the main topics covered by these highly cited articles (n=59). Considerable attention was also given to Psychology and Psychiatry (n=13).

The top-100 list contained landmark contributions dealing with methodological aspects of conducting systematic reviews and meta-analysis (n=17). At number 1, DerSimonian and Laird's landmark article which introduced a novel simple random effects model for combining studies. Egger et al. (number-2) examined the prevalence of funnel plot asymmetry among published meta-analyses. Higgins et al. (number-4 and number-7) developed a new measure (I2) for quantifying heterogeneity between studies included in a meta-analysis. Stroup et al. (number-12) reported a proposal for reporting meta-analyses of observational studies. The list of the most cited articles also reflects major advances in the management of non-communicable diseases (n=40) and in the identification of their predisposing factors for such diseases over the last 30 years. Baigent and colleagues (number-8) examined the efficacy and safety of statins on cholesterol lowering. Abe and co-researchers examined effects of chemotherapy and hormonal therapy for early breast cancer recurrence (number-10) and Lewington et al. (number-13) examined age-

 Table 1. The 100 most frequently cited systematic review and meta-analysis articles.

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timates of intervention efficacy reported in meta-analyses? Lancet 1998, 352: 609-613. The population of the American Medical Association 2000, 283: 2008-2012. The proposal for reporting. Jama-Journal of the American Medical Association 2000, 283: 2008-2012. The proposal for reporting. Jama-Journal of the American Medical Association 2000, 283: 2008-2012. The proposal for reporting. Jama-Journal of the American Medical Association 2000, 283: 2008-2012. The proposal for reporting. Jama-Journal of the American Medical Association 2000, 283: 2008-2012. The proposal for reporting. Jama-Journal of the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressure to vascular proposal for reporting to the American Medical Blood pressur		2330	10	330.0	3
oup DF, Berlin JA, Morton SC, Olkin I, Williamson GD, Rennie D et al.: Meta-analysis of observational studies in idemiology - A proposal for reporting. Jama-Journal of the American Medical Association 2000, 283: 2008-2012. Wington S, Clarke R, Qizilbash N, Peto R, Collins R: Age-specific relevance of usual blood pressure to vascular ortality: a meta-analysis of individual data for one million adults in 61 prospective studies. Lancet 2002, 360: 03-1913. Perti W, Anderson G, Bartolucci A, Bell D, Villalba JB, Brodin O et al.: Chemotherapy in Non-Small-Cell Lung-Cancer - Metaanalysis Using Updated Data on Individual Patients from 52 Randomized Clinical-Trials. British Medical	1999	2335	11	179.6	15
idemiology - A proposal for reporting. Jama-Journal of the American Medical Association 2000, 283: 2008-2012. wington S, Clarke R, Qizilbash N, Peto R, Collins R: Age-specific relevance of usual blood pressure to vascular ortality: a meta-analysis of individual data for one million adults in 61 prospective studies. Lancet 2002, 360: 03-1913. perti W, Anderson G, Bartolucci A, Bell D, Villalba JB, Brodin O et al.: Chemotherapy in Non-Small-Cell Lung-Cancer - Metaanalysis Using Updated Data on Individual Patients from 52 Randomized Clinical-Trials. British Medical	1555	2000		175.0	10
wington S, Clarke R, Qizilbash N, Peto R, Collins R: Age-specific relevance of usual blood pressure to vascular ortality: a meta-analysis of individual data for one million adults in 61 prospective studies. Lancet 2002, 360: 03-1913. Derti W, Anderson G, Bartolucci A, Bell D, Villalba JB, Brodin O et al.: Chemotherapy in Non-Small-Cell Lung-Cancer - Wetaanalysis Using Updated Data on Individual Patients from 52 Randomized Clinical-Trials. British Medical	2000	2335	12	194.6	12
ortality: a meta-analysis of individual data for one million adults in 61 prospective studies. Lancet 2002, 360: 03-1913. Derti W, Anderson G, Bartolucci A, Bell D, Villalba JB, Brodin O et al.: Chemotherapy in Non-Small-Cell Lung-Cancer - Metaanalysis Using Updated Data on Individual Patients from 52 Randomized Clinical-Trials. British Medical	2000	2335	12	194.0	12
03-1913. Derti W, Anderson G, Bartolucci A, Bell D, Villalba JB, Brodin O et al.: Chemotherapy in Non-Small-Cell Lung-Cancer - Metaanalysis Using Updated Data on Individual Patients from 52 Randomized Clinical-Trials. British Medical					
perti W, Anderson G, Bartolucci A, Bell D, Villalba JB, Brodin O et al.: Chemotherapy in Non-Small-Cell Lung-Cancer - Metaanalysis Using Updated Data on Individual Patients from 52 Randomized Clinical-Trials. British Medical	2002	2328	13	232.8	10
Metaanalysis Using Updated Data on Individual Patients from 52 Randomized Clinical-Trials. British Medical					
ırnal 1995, 311 : 899-909.	1995	2087	14	122.8	24
igent C, Sudlow C, Collins R, Peto R: Collaborative meta-analysis of randomised trials of antiplatelet therapy for					_
evention of death, myocardial infarction, and stroke in high risk patients. British Medical Journal 2002, 324: 71-86.	2005	2040	15	291.4	5
ock G, Patterson B, Subar A: Fruit, Vegetables, and Cancer Prevention - A Review of the Epidemiologic Evidence.					
trition and Cancer-an International Journal 1992, 18: 1-29.	1992	1826	16	91.3	35
gg CB, Mazumdar M: Operating Characteristics of A Bank Correlation Test for Publication Bias. Biometrics 1994,					
1088-1101.	1994	1756	17	97.6	31
zarou J, Pomeranz BH, Corey PN: Incidence of adverse drug reactions in hospitalized patients - A meta-analysis					
prospective studies. Jama-Journal of the American Medical Association 1998, 279: 1200-1205.	1998	1707	18	121.9	25
chwald H, Avidor Y, Braunwald E, Jensen MD, Pories W, Fahrbach K et al.: Bariatric surgery: A systematic review					
d meta-analysis. Jama-Journal of the American Medical Association 2004, 292: 1724-1737.	2004	1706	19	213.3	11
ady D, Rubin SM, Petitti DB, Fox CS, Black D, Ettinger B <i>et al.</i> : Hormone-Therapy to Prevent Disease and Prolong					
e in Postmenopausal Women. Annals of Internal Medicine 1992, 117: 1016-1037.	1992	1702	20	85.1	41
arshall D, Johnell O, Wedel H: Meta-analysis of how well measures of bone mineral density predict occurrence of					
teoporotic fractures. British Medical Journal 1996, 312: 1254-1259.		4500	21	98.9	30
	1996	1583			
rrick MR, Mount MK: The Big 5 Personality Dimensions and Job-Performance - A Metaanalysis. Personnel ychology 1991, 44: 1-26.	1996	1583			51

		Total no. of		Average citation	
Articles	Year	citation	s	per year	•
		No	Rank	No	Rank
Davis DA, Thomson MA, Oxman AD, Haynes RB: Changing Physician Performance - A Systematic Review of the					
Effect of Continuing Medical-Education Strategies. Jama-Journal of the American Medical Association 1995, 274: 700-705.	1995	1577	23	92.8	34
Appleby P, Baigent C, Collins R, Flather M, Parish S, Peto R et al.: Indications for Fibrinolytic Therapy in Suspected					
Acute Myocardial-Infarction - Collaborative Overview of Early Mortality and Major Morbidity Results from All	1994	1519	24	84.4	43
Randomized Trials of More Than 1000 Patients. Lancet 1994, 343: 311-322.					
Nissen SE, Wolski K: Effect of rosiglitazone on the risk of myocardial infarction and death from cardiovascular					
causes. New England Journal of Medicine 2007, 356: 2457-2471.	2007	1507	25	301.4	4
Grimshaw JM, Russell IT: Effect of Clinical Guidelines on Medical-Practice - A Systematic Review of Rigorous	4000	4077	00	70.5	
Evaluations. Lancet 1993, 342 : 1317-1322.	1993	1377	26	72.5	55
Abe O, Abe R, Enomoto K, Kikuchi K, Koyama H, Masuda H et al.: Effects of radiotherapy and of differences in the					
extent of surgery for early breast cancer on local recurrence and 15-year survival: an overview of the randomised	2005	1324	27	189.1	13
trials. Lancet 2005, 366: 2087-2106.					
Danesh J, Whincup P, Walker M, Lennon L, Thomson A, Appleby P et al.: Low grade inflammation and coronary heart	0004	4077	00	450.0	40
disease: prospective study and updated meta-analyses. British Medical Journal 2000, 321: 199-204.	2004	1277	28	159.6	18
Farrer LA, Cupples LA, Haines JL, Hyman B, Kukull WA, Mayeux R et al.: Effects of age, sex, and ethnicity on the					
association between apolipoprotein E genotype and Alzheimer disease - A meta-analysis. Jama-Journal of the	1997	1265	29	84.3	44
American Medical Association 1997, 278: 1349-1356.					
Moher D, Cook DJ, Eastwood S, Olkin I, Rennie D, Stroup DF: Improving the quality of reports of meta-analyses of	4000	4000	00	00.4	07
randomised controlled trials: the QUOROM statement. Lancet 1999, 354: 1896-1900.	1998	1262	30	90.1	37
Armitage CJ, Conner M: Efficacy of the theory of planned behaviour: A meta-analytic review. British Journal of Social	0004	4004	0.4	440.0	00
Psychology 2001, 40: 471-499.	2001	1234	31	112.2	28
Dellinger RP, Carlet JM, Masur H, Gerlach H, Calandra T, Cohen J et al.: Surviving Sepsis Campaign guidelines for	2004	4470	20	440.5	20
management of severe sepsis and septic shock. Critical Care Medicine 2004, 32: 858-873.	2004	1172	32	146.5	20
Pignon JP, Bourhis J, Domenge C, Designe L: Chemotherapy added to locoregional treatment for head and neck	2000	1155	33	06.3	32
squamous-cell carcinoma: three meta-analyses of updated individual data. Lancet 2000, 355: 949-955.	2000	1155	33	96.3	32
Guyatt G: Evidence-Based Medicine - A New Approach to Teaching the Practice of Medicine. Jama-Journal of the	1002	1145	34	E7 2	66
American Medical Association 1992, 268 : 2420-2425.	1992	1145	34	57.3	00
Phan KL, Wager T, Taylor SF, Liberzon I: Functional neuroanatomy of emotion: A meta-analysis of emotion	2002	1136	35	113.6	27
activation studies in PET and fMRI. Neuroimage 2002, 16: 331-348.	2002	1130	33	113.0	21
Kramer MS: Determinants of Low Birth-Weight - Methodological Assessment and Meta-Analysis. Bulletin of the	2003	1130	36	125.6	23
World Health Organization 1987, 65: 663-737.	2000	1100	50	120.0	20
Lohmueller KE, Pearce CL, Pike M, Lander ES, Hirschhorn JN: Meta-analysis of genetic association studies supports	1027	1130	37	45.2	81
a contribution of common variants to susceptibility to common disease. Nature Genetics 2003, 33: 177-182.	1307	1100	01	40. <u>Z</u>	01
Easterbrook PJ, Berlin JA, Gopalan R, Matthews DR: Publication Bias in Clinical Research. Lancet 1991, 337: 867-872	. 1991	1119	38	53.3	73
Anderson JW, Johnstone BM, Cooknewell ME: Metaanalysis of the Effects of Soy Protein-Intake on Serum-Lipids .	1995	1113	39	65.5	60
New England Journal of Medicine 1995, 333: 276-282.	1000	1110	00	00.0	
Danesh J, Collins R, Appleby P, Peto R: Association of fibrinogen, C-reactive protein, albumin, or leukocyte count					
with coronary heart disease - Meta-analyses of prospective studies. Jama-Journal of the American Medical	1998	1102	40	78.7	48
Association 1998, 279 : 1477-1482.					
Juni P, Witschi A, Bloch R, Egger M: The hazards of scoring the quality of clinical trials for meta-analysis. Jama-	2001	1058	41	96.2	33
Journal of the American Medical Association 1999, 282 : 1054-1060.					
Atkins D, Best D, Briss PA, Eccles M, Falck-Ytter Y, Flottorp S et al.: Grading quality of evidence and strength of	2004	1012	42	126.5	22
recommendations. British Medical Journal 2004, 328 : 1490-1494.					
Smith ML, Glass GV: Meta-Analysis of Psychotherapy Outcome Studies. American Psychologist 1977, 32: 752-760.	1977	979	43	28	99
Brewin CR, Andrews B, Valentine JD: Meta-analysis of risk factors for posttraumatic stress disorder in trauma-	2000	972	44	81	46
exposed adults. Journal of Consulting and Clinical Psychology 2000, 68: 748-766.					
Bero LA, Grilli R, Grimshaw JM, Harvey E, Oxman AD, Thomson MA: Getting research findings into practice - Closing					
the gap between research and practice: an overview of systematic reviews of interventions to promote the	1998	964	45	68.9	57
implementation of research findings. British Medical Journal 1998, 317: 465-468.					
Dickersin K, Scherer R, Lefebvre C: Systematic Reviews - Identifying Relevant Studies for Systematic Reviews.		050	40	50.0	74
British Medical Journal 1994, 309: 1286-1291.	1994	952	46	52.9	74

	Year	Total no. of citations		Average citation per year	
Articles	rear	No	Rank	No	Rank
Anderson RJ, Freedland KE, Clouse RE, Lustman PJ: The prevalence of comorbid depression in adults with diabetes		NO	Kalik	NO	Kalli
- A meta-analysis. Diabetes Care 2001, 24: 1069-1078.	2001	933	47	84.8	42
Oxman AD, Thomson MA, Davis DA, Haynes RB: No Magic Bullets - A Systematic Review of 102 Trials of					
Interventions to Improve Professional Practice. Canadian Medical Association Journal 1995, 153: 1423-1431.	1995	928	48	54.6	72
Ohara MW, Swain AM: Rates and risk of postpartum depression - A meta-analysis. International Review of Psychiatry					
1996, 8 : 37-54.	1996	913	49	57.1	67
Clarke R, Collins R, Lewington S, Donald A, Alfthan G, Tuomilehto J et al.: Homocysteine and risk of ischemic heart					
disease and stroke - A meta-analysis. Jama-Journal of the American Medical Association 2002, 288: 2015-2022.	2002	910	50	91	36
DiMatteo MR, Lepper HS, Croghan TW: Depression is a risk factor for noncompliance with medical treatment - Meta-					
analysis of the effects of anxiety and depression on patient adherence. Archives of Internal Medicine 2000, 160:	2000	900	51	75	52
2101-2107.					
Colditz GA, Brewer TF, Berkey CS, Wilson ME, Burdick E, Fineberg HV et al.: Efficacy of Bcg Vaccine in the Prevention					
of Tuberculosis - Metaanalysis of the Published Literature. Jama-Journal of the American Medical Association 1994,	1994	890	52	49.4	79
271 : 698-702.					
Wald DS, Law M, Morris JK: Homocysteine and cardiovascular disease: evidence on causality from a meta-analysis.	2020	070	F2	07.0	20
British Medical Journal 2002, 325 : 1202-1206K.	2002	8/2	53	87.2	39
Danesh J, Wheeler JG, Hirschfield GM, Eda S, Eiriksdottir G, Rumley A et al.: C-reactive protein and other circulating					
markers of inflammation in the prediction of coronary heart disease. New England Journal of Medicine 2004, 350:	2000	860	54	71.7	56
1387-1397.					
Gabriel SE, Jaakkimainen L, Bombardier C: Risk for Serious Gastrointestinal Complications Related to Use of	4004	054		40.7	00
Nonsteroidal Antiinflammatory Drugs - A Metaanalysis. Annals of Internal Medicine 1991, 115: 787-796.	1991	854	55	40.7	88
Harris EC, Barraclough B: Suicide as an outcome for mental disorders - A meta-analysis. British Journal of Psychiatry					
1997, 170 : 205-228.	1997	850	56	56.7	69
Linn MC, Petersen AC: Emergence and Characterization of Sex-Differences in Spatial Ability - A Meta-Analysis. Child	4005	050		04.5	
Development 1985, 56: 1479-1498.	1985	850	57	31.5	98
Bongartz T, Sutton AJ, Sweeting MJ, Buchan I, Matteson EL, Montori V: Anti-TNF antibody therapy in rheumatoid					
arthritis and the risk of serious infections and malignancies - Systematic review and meta-analysis of rare harmful	2006	846	58	141	21
effects in randomized controlled trials. Jama-Journal of the American Medical Association 2006, 295: 2275-2285.					
Mcgeer PL, Schulzer M, Mcgeer EG: Arthritis and anti-inflammatory agents as possible protective factors for	4000	000	50	F4.0	77
Alzheimer's disease: A review of 17 epidemiologic studies. Neurology 1996, 47: 425-432.	1996	826	59	51.6	77
Mensink RP, Katan MB: Effect of Dietary Fatty-Acids on Serum-Lipids and Lipoproteins - A Metaanalysis of 27 Trials.	4000	000	60	44.4	07
Arteriosclerosis and Thrombosis 1992, 12: 911-919.	1992	822	60	41.1	87
Sheppard BH, Hartwick J, Warshaw PR: The Theory of Reasoned Action - A Meta-Analysis of Past Research with	4000	000	64	24.2	05
Recommendations for Modifications and Future-Research. Journal of Consumer Research 1988, 15: 325-343.	1988	822	61	34.3	95
Strong WB, Malina RM, Blimkie CJR, Daniels SR, Dishman RK, Gutin B et al.: Evidence based physical activity for	2005	015	62	116.4	26
school-age youth. Journal of Pediatrics 2005, 146: 732-737.	2005	815	62	116.4	26
Colquitt JA, Conlon DE, Wesson MJ, Porter COLH, Ng KY: Justice at the millennium: A meta-analytic review of 25	2004	044	00	70.7	5 4
years of organizational justice research. Journal of Applied Psychology 2001, 86: 425-445.	2001	811	63	73.7	54
Sacks HS, Berrier J, Reitman D, Anconaberk VA, Chalmers TC: Meta-Analyses of Randomized Controlled Trials. New	4007	040	64	20.4	07
England Journal of Medicine 1987, 316 : 450-455.	1987	010	64	32.4	97
Llovet JM, Bruix J: Systematic review of randomized trials for unresectable hepatocellular carcinoma:	2002	904	e.e.	90.3	20
Chemoembolization improves survival. Hepatology 2003, 37: 429-442.	2003	804	65	89.3	38
Peyron R, Laurent B, Garcia-Larrea L: Functional imaging of brain responses to pain. A review and meta-analysis	2000	901	66	66.9	50
(2000). Neurophysiologie Clinique-Clinical Neurophysiology 2000, 30: 263-288.	2000	001	66	66.8	58
Lipsey MW, Wilson DB: The Efficacy of Psychological, Educational, and Behavioral Treatment - Confirmation from	1000	707	67	41.0	O.F
Metaanalysis. American Psychologist 1993, 48: 1181-1209.	1993	797	67	41.9	85
Dahlof B, Pennert K, Hansson L: Reversal of Left-Ventricular Hypertrophy in Hypertensive Patients - A Metaanalysis	1000	706	60	20.0	00
of 109 Treatment Studies. American Journal of Hypertension 1992, 5: 95-110.	1992	790	68	39.8	89
Ernst E, Resch KL: Fibrinogen As A Cardiovascular Risk Factor - A Metaanalysis and Review of the Literature.	4000	704	00	44.6	00
Annals of Internal Medicine 1993, 118 : 956-963.	1993	794	69	41.8	86

		Total no. of		Average citation	
Articles	Year	citations	3	per year	•
		No	Rank	No	Rank
Antman EM, Lau J, Kupelnick B, Mosteller F, Chalmers TC: A Comparison of Results of Metaanalyses of Randomized					
Control Trials and Recommendations of Clinical Experts - Treatments for Myocardial-Infarction. Jama-Journal of the	1992	782	70	39.1	91
American Medical Association 1992, 268 : 240-248.					
Patrick DL, Cheadle A, Thompson DC, Diehr P, Koepsell T, Kinne S: The Validity of Self-Reported Smoking - A Review	1994	777	71	43.2	83
and Metaanalysis. American Journal of Public Health 1994, 84: 1086-1093.					
Maron BJ: Hypertrophic cardiomyopathy - A systematic review. Jama-Journal of the American Medical Association	2002	773	72	77.3	49
2002, 287 : 1308-1320.					
Miller ER, Pastor-Barriuso R, Dalal D, Riemersma RA, Appel LJ, Guallar E: Meta-analysis: High-dosage vitamin E	2005	764	73	109.1	29
supplementation may increase all-cause mortality. Annals of Internal Medicine 2005, 142: 37-46.					
Wright IC, Rabe-Hesketh S, Woodruff PWR, David AS, Murray RM, Bullmore ET: Meta-analysis of regional brain	2000	763	74	63.6	62
volumes in schizophrenia. American Journal of Psychiatry 2000, 157: 16-25.					
Horvath AO, Symonds BD: Relation Between Working Alliance and Outcome in Psychotherapy - A Metaanalysis.	1991	761	75	36.2	94
Journal of Counseling Psychology 1991, 38: 139-149.					
Voyer D, Voyer S, Bryden MP: Magnitude of Sex-Differences in Spatial Abilities - A Metaanalysis and Consideration	1995	756	76	44.5	82
of Critical Variables. Psychological Bulletin 1995, 117: 250-270.					
Wong DKH, Cheung AM, Orourke K, Naylor CD, Detsky AS, Heathcote J: Effect of Alpha-Interferon Treatment in	4000	750			
Patients with Hepatitis-B E-Antigen-Positive Chronic Hepatitis-B - A Metaanalysis. Annals of Internal Medicine 1993,	1993	752	77	39.6	90
119 : 312-323.					
Capes SE, Hunt D, Malmberg K, Gerstein HC: Stress hyperglycaemia and increased risk of death after myocardial	2000	746	78	62.2	64
infarction in patients with and without diabetes: a systematic overview. Lancet 2000, 355: 773-778.					
Moore FA, Feliciano DV, Andrassy RJ, Mcardle AH, Booth FVM, Morgensteinwagner TB et al.: Early Enteral Feeding,	4000	740	70	07	00
Compared with Parenteral, Reduces Postoperative Septic Complications - the Results of A Metaanalysis. Annals of	1992	740	79	37	93
Surgery 1992, 216 : 172-183.					
Juni P, Altman DG, Egger M: Systematic reviews in health care - Assessing the quality of controlled clinical trials.	1999	737	80	56.7	68
British Medical Journal 2001, 323: 42-46.					
Lijmer JG, Mol BW, Heisterkamp S, Bonsel GJ, Prins MH, van der Meulen JHP et al.: Empirical evidence of design-	1999	731	81	56.2	70
related bias in studies of diagnostic tests. Jama-Journal of the American Medical Association 1999, 282: 1061-1066.					
Ozer EJ, Best SR, Lipsey TL, Weiss DS: Predictors of posttraumatic stress disorder and symptoms in adults: A	2003	730	82	81.1	45
meta-analysis. Psychological Bulletin 2003, 129: 52-73.					
Wellman HM, Cross D, Watson J: Meta-analysis of theory-of-mind development: The truth about false belief . <i>Child Development</i> 2001, 72: 655-684.	2001	728	83	66.2	59
Cosgrove SE, Sakoulas G, Perencevich EN, Schwaber MJ, Karchmer AW, Carmeli Y: Comparison of mortality					
associated with methicillin-resistant and methicillin-susceptible Staphylococcus aureus bacteremia: A meta-	2003	725	84	80.6	47
analysis. Clinical Infectious Diseases 2003, 36: 53-59.	2003	125	04	00.0	41
Hart RG, Benavente O, McBride R, Pearce LA: Antithrombotic therapy to prevent stroke in patients with atrial					
fibrillation: A meta-analysis. Annals of Internal Medicine 1999, 131: 492-501	1999	717	85	55.2	71
Berlin JA, Colditz GA: A Metaanalysis of Physical-Activity in the Prevention of Coronary Heart-Disease. American					
Journal of Epidemiology 1990, 132 : 612-628.	1990	713	86	32.4	96
Eaden JA, Abrams KR, Mayberry JF: The risk of colorectal cancer in ulcerative colitis: a meta-analysis. <i>Gut</i> 2001, 48:					
526-535.	2001	711	87	64.6	61
Neal B, MacMahon S, Chapman N, Cutler J, Fagard R, Neal B et al.: Effects of ACE inhibitors, calcium antagonists,					
and other blood-pressure-lowering drugs: results of prospectively designed overviews of randomised trials. <i>Lancet</i>	2000	709	88	59.1	65
2000, 356 : 1955-1964.	2000	, 00	00	00.1	55
Stuck AE, Siu AL, Wieland GD, Adams J, Rubenstein LZ: Comprehensive Geriatric Assessment - A Metaanalysis of					
Controlled Trials. Lancet 1993, 342: 1032-1036.	1993	709	89	37.3	92
Zeggini E, Scott LJ, Saxena R, Voight BF, Marchini JL, Hu T et al.: Meta-analysis of genome-wide association data and					
large-scale replication identifies additional susceptibility loci for type 2 diabetes. <i>Nature Genetics</i> 2008, 40: 638-645.	2008	706	90	176.5	16
Brattstrom L, Landgren F, Israelsson B, Lindgren A, Hultberg B, Andersson A et al.: Lowering blood homocysteine with					
folic acid based supplements: meta-analysis of randomised trials. <i>British Medical Journal</i> 1998, 316 : 894-898.	1998	697	91	49.8	78
Labbe KA, Detsky AS, Orourke K: Metaanalysis in Clinical Research. Annals of Internal Medicine 1987, 107: 224-233.	1987	694	92	27.8	100
Laboure 13, Dolony 710, Ordania 11. Inclamaty 313 III Official Nessal Cit. Afficial Victorial Victorial City 1301, 107. 224-233.	1001	UU-T	U_	27.0	100
Hites RA: Polybrominated diphenyl ethers in the environment and in people: A meta-analysis of concentrations.					

		Total r	o. of	Averag	e citations
Articles	Year	citations		per year	
		No	Rank	No	Rank
Claxton AJ, Cramer J, Pierce C: A systematic review of the associations between dose regimens and medication	2001	004	94	62.8	63
compliance. Clinical Therapeutics 2001, 23: 1296-1310.	2001	691	94		03
Lexchin J, Bero LA, Djulbegovic B, Clark O: Pharmaceutical industry sponsorship and research outcome and quality:	2003	689	95	76.6	50
systematic review. British Medical Journal 2003, 326: 1167-1170B.	2003	009	95		50
Hunt DL, Haynes RB, Hanna SE, Smith K: Effects of computer-based clinical decision support systems on physician					
performance and patient outcomes - A systematic review. Jama-Journal of the American Medical Association 1998,	1998	687	96	49.1	80
280 : 1339-1346.					
Deci EL, Koestner R, Ryan RM: A meta-analytic review of experiments examining the effects of extrinsic rewards on	1999	685	97	52.7	75
intrinsic motivation. Psychological Bulletin 1999, 125: 627-668.	1999	000	91	52.1	75
Larosa JC, He J, Vupputuri S: Effect of statins on risk of coronary disease - A meta-analysis of randomized	1999	680	98	52.3	76
controlled trials. Jama-Journal of the American Medical Association 1999, 282: 2340-2346.	1999		90		70
Kluger AN, DeNisi A: The effects of feedback interventions on performance: A historical review, a meta-analysis,	1996	677	99	42.3	84
and a preliminary feedback intervention theory. Psychological Bulletin 1996, 119: 254-284.	1990	011	99	42.3	04
Lewis CM, Levinson DF, Wise LH, Delisi LE, Straub RE, Hovatta I et al.: Genome scan meta-analysis of schizophrenia	2002	675	100	75	53
and bipolar disorder, part II: Schizophrenia. American Journal of Human Genetics 2003, 73: 34-48.	2003	675	100	75	53
doi: 10.1371/journal.pone.0078517.t001					

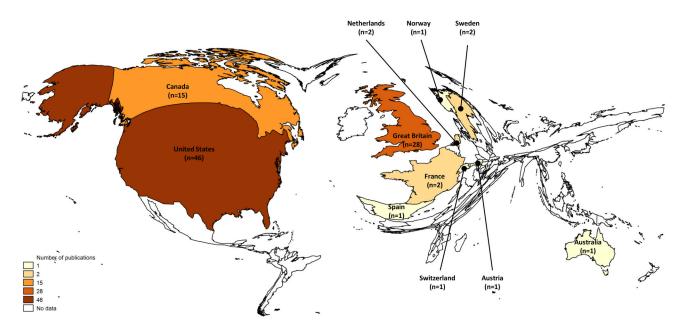


Figure 1. Spatial distribution of the 100 most frequently cited systematic reviews and meta-analyses related articles using density equalizing mapping. The area of each country were re-sized in proportion to its total number of 100 most frequently cited systematic reviews and meta-analyses related articles.

doi: 10.1371/journal.pone.0078517.g001

specific relevance of usual blood pressure and vascular mortality.

Discussion

This study identified and characterised the 100 most cited SRM related articles published in the past three decades,

providing an overview of the citation frequency of these most cited articles. The list of the most cited articles identifies first authors and topics which reflect advances in methodological techniques in meta-analysis, major advances in the management of chronic diseases, and identification of predisposing factors over the last 30 years. Some of the most frequently cited articles were methodological papers. As

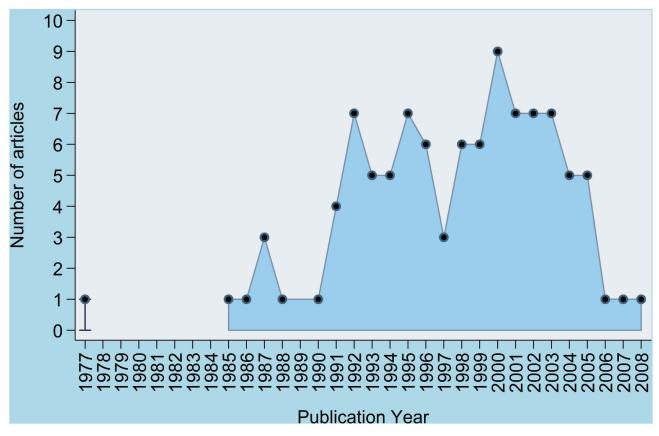


Figure 2. Graph demonstrating the time period of publication of the 100 most cited systematic reviews and metaanalyses related articles.

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expected the most highly cited papers were more likely to be published in journals high on the impact factor list [13,14]. It is important to note that, at present, no Cochrane review is among the 100 most cited SRM related articles. Cochrane reviews are systematic reviews of primary research in human health care and health policy, and are internationally recognised as the highest standard in evidence-based health care [15,16]. They investigate the effects of interventions for prevention, treatment and rehabilitation [15,16]. They also assess the accuracy of a diagnostic test for a given condition in a specific patient group and setting. They are published online in The Cochrane Library [15,16]. The low citations received by Cochrane reviews may be due to improper citations of Cochrane reviews, and the relatively recent tracking of Cochrane reviews by ISI. In addition, ISI Science Citation Index database covers all new and substantially updated Cochrane reviews from January 2005, and the first impact factor for Cochrane Database of Systematic Review was released in June 2008.

We found that almost half of the most cited SRM related articles originated in the US. This Figure is comparable with the origin of citation classics in other fields [5–9]. The overwhelming influence the US has on medical research may be due to its large underlying population, enormous financial

resources available to the scientific community in the country and its high population of active citing researchers compared to other countries [6,7]. Studies have demonstrated that biomedical research productivity worldwide is largely dependent on each country's per capita gross national product and the expenditure allotted for research and development [17,18].

Our results support previous findings [5-9] that first authors from Africa, Asia, and South America had minimal or no contributions in the most cited articles. Scientific publishing activity worldwide over the past decades shows that most countries in these regions have low levels of publication [19]. The above finding is not a surprise because difficulties in research, publication, information access, and language barriers facing the least-developed countries are profound and seem almost intractable. Most information published in journals based in low and middle-income countries (LMICs) never leaves there home borders because these journals are largely excluded from major bibliographic databases. In addition, most of the reviews produced to date address health conditions that are priorities in the developed world[20]. Many major health concerns in LMICs have yet to be made the subject of a citation classic review, although there are signs that this may be changing[21].

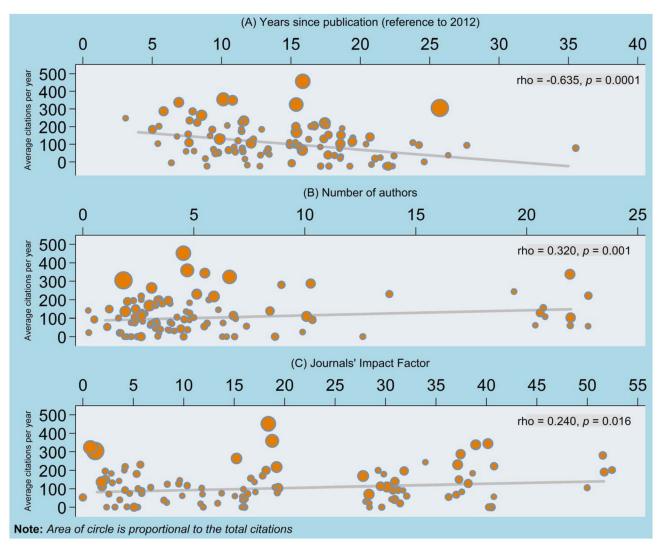


Figure 3. Correlation between since publication, number of authors, journals' impact factor and average citation per year.

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In addition, the difficulties of conducting randomised controlled trials and other high quality studies in resource-poor situations result in the exclusion of many LMIC studies from systematic reviews [22]. However, there is a need to challenge the status quo. Scientists from these regions should forge multiple collaborations beyond historical, political, and cultural lines to share knowledge and expertise on SRM. In addition, there is a need to promote research in SRM in less developed regions of the world. This may involve but is not limited to the political will for research capacity development among LIMC health policymakers, the training of LMIC researchers to be competent in systematic review techniques, the development of infrastructure including research and academic institutes, the improvement of current collaborative partnerships with developed nations, increased sponsorship and support from world agencies such as the World Health Organization and the United Nations Organization.

Although we have tried to eliminate potential flaws in our citation analysis, some limitations were inevitable and are linked to the inherent problems of citation analysis [23,24]. The citation of a scientific article usually follows a time course, it is usually not cited until one to two years after publication, reaches a maximum after three to ten years, then declines [6]. Another problem is oriented or biased citing, including various types of conscious or unconscious biases, such as self-citation (bias towards one's own work), in-house (bias towards friends or colleagues), journal or powerful person (bias towards reviewers, editors, members of grant awarding bodies), negative citation (bias towards potential negative credits), English language (bias towards publishing and referencing English articles), and omission bias (bias towards not referencing competitors or sources contradictory to one's own results) [25]. Other limitations include the incorrect citation of origin for the authors. By using the author addresses listed in

Table 2. Journals in which the most cited articles were published.

Journal title	Number of articles	Impact factor (2012)
Journal of The American Medical Association	18	29.978
British Medical Journal	14	17.215
Lancet	13	39.06
Annals of Internal Medicine	7	13.976
New England Journal of Medicine	4	51.658
Psychological Bulletin	4	15.575
American Psychologist	2	5.1
Child Development	2	4.915
Controlled Clinical Trials	2	1.597
Nature Genetics	2	35.209
American Journal of Epidemiology	1	4.78
American Journal of Human Genetics	1	11.202
American Journal of Hypertension	1	3.665
American Journal of Psychiatry	1	14.721
American Journal of Public Health	1	3.93
Annals of Surgery	1	6.329
Archives of Internal Medicine	1	11.462
Arteriosclerosis And Thrombosis	1	6.338
Biometrics	1	1.412
British Journal of Psychiatry	1	6.606
British Journal of Social Psychology	1	1.816
Bulletin of The World Health Organization	1	5.25
Canadian Medical Association Journal	1	6.465
Clinical Infectious Diseases	1	9.374
Clinical Therapeutics	1	2.23
Critical Care Medicine	1	6.124
Diabetes Care	1	7.735
Environmental Science Technology	1	5.257
Gut	1	10.732
Hepatology	1	12.003
International Review of Psychiatry	1	1.608
Journal of Applied Psychology	1	4.758
Journal of Consulting And Clinical Psychology	1	5.011
Journal of Consumer Research	1	3.542
Journal of Counseling Psychology	1	2.628
Journal of Pediatrics	1	4.035
Neuroimage	1	6.252
Neurology	1	8.249
Neurophysiologie Clinique Clinical Neurophysiology	1	2.553
Nutrition and Cancer An International Journal	1	2.695
Personnel Psychology	1	3.702
Statistics In Medicine	1	2.044

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the bylines of research articles, one can only identify countries and organizations where the authors were employed when the research was done or where the article was written [18].

Conclusion

Since the late 1970s, the USA, UK, and Canada have taken leadership in the production of citation classic papers. No author from LMICs led any of the most cited 100 SRM. There is a need to challenge the status quo. Scientists from LMIC

should forge multiple collaborations to share knowledge and expertise on SRM. In addition, there is a need to strengthen research capacity in these countries and more support should be provided for the advancement of research efforts.

Author Contributions

Conceived and designed the experiments: OAU. Performed the experiments: OAU. Analyzed the data: OAU CO CW TY AC.

Contributed reagents/materials/analysis tools: OAU CO CW TY AC. Wrote the manuscript: OAU CO CW TY AC.

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