

# Tessa Longbons

**From:** SageResearchIntegrity <[REDACTED]>  
**Sent:** Wednesday, June 28, 2023 8:38 AM  
**To:** James Studnicki; Tessa Longbons; [REDACTED]; [REDACTED]; [REDACTED]; [REDACTED]; [REDACTED]; [REDACTED]  
**Subject:** PE-1708 RESPONSE NEEDED: Your article 10.1177/23333928211053965  
**Attachments:** EOC.docx

Dear authors,

I am reaching out on behalf of the Research integrity and Inclusion team at SAGE.

This is regarding your manuscript published in Health Services Research and Managerial Epidemiology-

Studnicki J, Harrison DJ, Longbons T, et al. A Longitudinal Cohort Study of Emergency Room Utilization Following Mifepristone Chemical and Surgical Abortions, 1999–2015. Health Services Research and Managerial Epidemiology. 2021;8. doi:10.1177/23333928211053965

The Editor and SAGE were contacted with concerns regarding issues with the representation of data in the article and author conflicts of interest. The concerns relate to the data presented in figures (2 and 3), conclusions derived in the article and the disclosure of conflict of interest. They have been listed below in detail-

- 1) In figures 2 and 3, the data is presented on dual y-axis with significant scale differences. Referring to Table 1 of the article, the data if plotted using a single y-axis (the right panels in figures given below) reveals a much different magnitude and relationship compared to the original panel published in the manuscript. Could you please share your comments on this and why the method used to present the data may/may not have been a better choice?

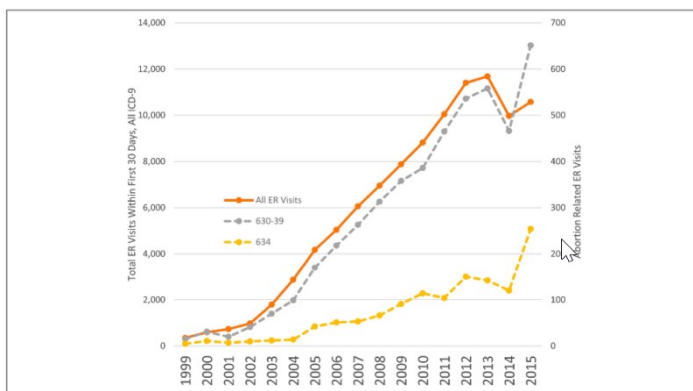
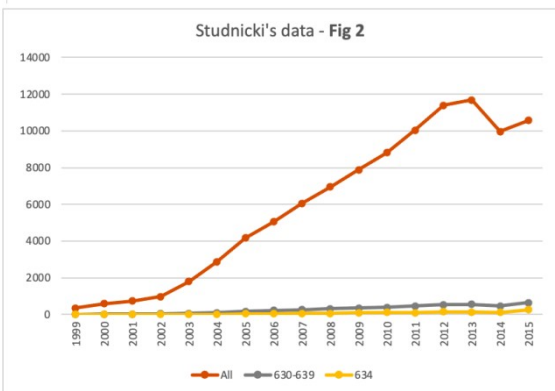


Figure 2. Emergency room (ER) use following surgical abortion, 1999-2015.



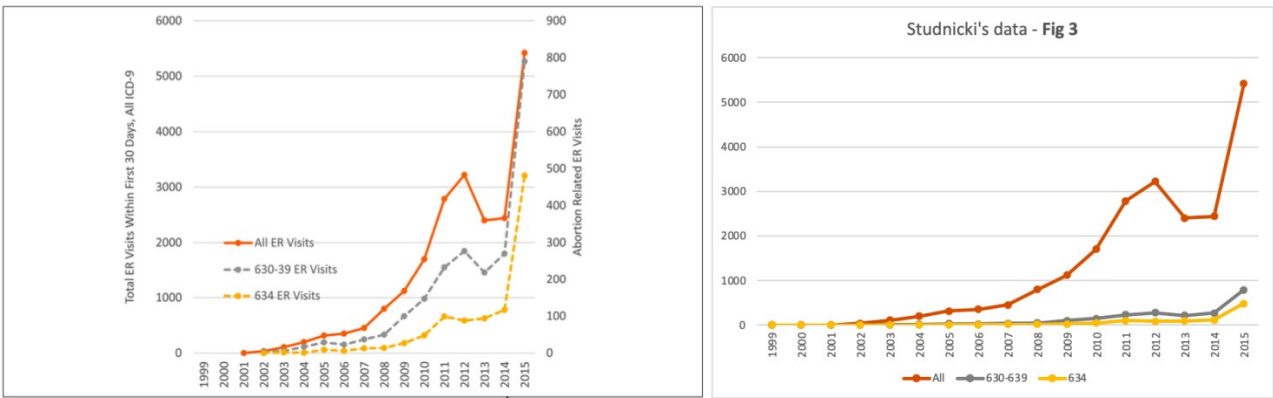


Figure 3. Emergency room (ER) use following chemical abortion, 1999–2015.

- 2) Although the article mentions that for all abortion-related ER visits (post abortion), the data was selected by all-cause, abortion-related codes (ICD-9, 630-639), it does not clearly include the rationale behind including all the codes (or specifically the reason for including codes 630, 631, 632, 633, and possibly 636). Could you please share your inputs on the data collection/ extraction?
  
- 3) The article mentions- “the objective of this research was to complete the first population based longitudinal cohort study of the trajectory of postabortion emergency room utilization following both chemical and surgical abortions in order to test the hypothesis that chemical abortion results in higher emergency room utilization” and “Regression analysis definitively supports the hypothesis that chemical abortion is associated with more frequent emergency room visits of all kinds for the entire study period.”

The nature of all ER visits in this study are not provided in the article. Could you please share your inputs on this comment and also on the following points?

- Medicaid eligible patients are generally of poorer health and more likely to have comorbidities and/or preexisting conditions. [Mortensen K et al; Med Care 2008, Cheung PT; Ann Emerg Med 2012, Sommers AS; Res Brief 2012]. What could be its impact on the findings of this article?
  
- These patients are more likely to visit the ER to seek a smaller co-payment, when eligible [Mortensen K et al; Med Care 2008;46:1099–1107]. Considering the differences in patient behavior based on insurance coverage [Kim, H. et al; Population health management, 2017], can this study be associated with the general population?

- 4) As per [SAGE’s conflict of interest policy](#), the following should have been declared in the article-

- The Corresponding author (and four other co-authors) belong to Charlotte Lozier Institute. The declaration should have been ideal considering the topic of the article.
  
- The Corresponding author is an Editorial board member of the journal.

The Journal Editors and SAGE Publishing have decided to investigate the concerns in accordance with COPE guidelines. Therefore, we are publishing an Expression of Concern on your article to alert the readers of the journal until the investigation is completed and appropriate action has been taken.

The journal and SAGE’s understanding of the situation is reflected in the attached notice which will be published soon.

We are informing you we will proceed with the publication of this notice and will begin an investigation into your article shortly. We would be grateful if you could provide a point-by-point response to the concerns raised above, by 19<sup>th</sup> July 2023.

Yours sincerely,

Arpita



Arpita B. (*she/her/hers/Ms.*)

*Research Integrity and Inclusion Associate Editor*

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