Preprints in motion: tracking changes between posting and journal publication

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Abstract

Amidst the COVID-19 pandemic, preprints in the biomedical sciences are being posted and accessed at unprecedented rates, drawing widespread attention from the general public, press and policymakers for the first time. This phenomenon has sharpened longstanding questions about the reliability of information shared prior to journal peer review. Does the information shared in preprints typically withstand the scrutiny of peer review, or are conclusions likely to change in the version of record? We assessed preprints that had been posted and subsequently published in a journal between 1st January and 30th April 2020, representing the initial phase of the pandemic response. We utilised a combination of automatic and manual annotations to quantify how an article changed between the preprinted and published version. We found that the total number of figure panels and tables changed little between preprint and published articles. Moreover, the conclusions of 6% of non-COVID-19-related and 15% of COVID-19-related abstracts undergo a discrete change by the time of publication, but the majority of these changes do not reverse the main message of the paper.

Introduction

Global health and economic development in 2020 were overshadowed by the COVID-19 pandemic, which grew to over 3.2 million cases and 220,000 deaths within the first four months of the year [1,2]. [3] The global health emergency created by the pandemic has demanded the production and dissemination of scientific findings at an unprecedented speed via mechanisms such as preprints, which are scientific manuscripts posted by their authors to a public server prior to the completion journal-organised peer review [4]. [5][6]Despite a healthy uptake of preprints by the bioscience communities in recent years, some concerns persist [8–10]. In particular, one such argument suggests that preprints are of "lower quality" than peer-reviewed papers. Such concerns have been amplified during the COVID-19 pandemic, since preprints are being increasingly used to shape policy and influence public opinion via coverage in social and traditional media [11,12]. One implication of this hypothesis is that the peer review process will correct many errors and improve reproducibility leading to significant differences between preprints and published versions.

Several studies have assessed such differences. For example, Klein *et al.* used quantitative measures of textual similarity to compare preprints from arXiv and bioRxiv with their published versions [13], concluding that papers change "very little." However, changes in the interpretation of a sentence are not proportional to changes in textual characters (e.g., a major rearrangement of text or figures might simply represent formatting changes, and vice-versa, the position of a single decimal point could significantly alter conclusions). Therefore, sophisticated approaches aided or validated by manual curation are required, as employed by two recent studies. Using preprints and published articles, both paired and randomised, Carneiro *et al.* employed manual scoring of methods sections to find modest, but significant improvements in the quality of reporting among published journal articles [14]. Pagliaro manually examined the full text of 10 preprints in chemistry, finding only small changes in this sample [15]. However, the frequency of more significant changes in the conclusions of preprints remained an open question. We sought to identify an approach that would detect such changes effectively and without compromising on sample size [13]. We divided our analysis between COVID-19 and non-COVID-19 preprints, as extenuating circumstances such as expedited peer review and increased attention [FRASER 2020] may impact research related to the pandemic.

To investigate how preprints have changed upon publication, we compared abstracts, figures, and tables of bioRxiv and medRxiv preprints with their published counterparts to determine the degree to which the top-line results and conclusions differed between versions. In a detailed analysis of abstracts, we found that most scientific articles undergo minor changes without altering the main conclusions. While this finding should provide confidence in the utility of preprints as a way of rapidly communicating scientific findings that will largely stand the test of time, the value of subsequent

manuscript development, including peer review, is underscored by the 6% of non-COVID-19-related and 15% of COVID-19-related preprints with major changes to their conclusions upon publication.

Results

COVID-19 preprints were rapidly published during the early phase of the pandemic

The COVID-19 pandemic has spread quickly across the globe, reaching over 3.2 million cases worldwide within 4 months of the first reported case [1]. The scientific community responded concomitantly, publishing over 16,000 articles relating to COVID-19 within 4 months [11]. A large proportion of these articles (>6000) were manuscripts hosted on preprint servers. Following this steep increase in the posting of COVID-19 research, traditional publishers adapted new policies to support the ongoing public health emergency response efforts, including efforts to fast-track peer-review of COVID-19 manuscripts (for example, *eLife* [16]). At the time of our data collection in May 2020, 4.0% of COVID-19 preprints were published by the end of April, a statistically significant increase compared to the 3.0% of non-COVID-19 preprints that were published (Chi-square test; $\chi2 = 6.77$, df = 1, $p = 0.009$) (Fig. 1A). When broken down by server, 5.3% of COVID-19 preprints hosted on bioRxiv were published compared to 3.6% of those hosted on medRxiv (Supplemental Fig. 1A). However, a greater absolute number of medRxiv vs bioRxiv preprints (71 vs 30) were included in our sample of detailed analysis of text changes (see Methods), most likely a reflection of the different focal topics between the two servers (medRxiv has a greater emphasis on medical and epidemiological preprints, which is more relevant to the pandemic).

A major concern with expedited publishing is that it may lead to issues of quality and reproducibility [17]. Assuming that the version of the manuscript originally posted to the preprint server is likely to be similar to that subjected to peer review, we looked to journal peer review reports to reveal reviewer perceptions of submitted manuscript quality. We assessed the presence of transparent peer review (defined as openly available peer review reports published by the journal alongside the article) and found that an overwhelming majority of preprints that were subsequently published were not associated with transparent journal reviews (although we did not investigate the availability of non-journal peer review of preprints) (Fig. 1B). The lack of transparent peer reviews was particularly apparent for research published from medRxiv (Supplemental Fig. 1B). In the absence of peer review reports, an alternative means of assessing the quality of a scholarly paper is to perform independent analysis on the underlying data. We therefore investigated the availability of underlying data associated with preprint-published article pairs. There was little difference in data availability between the preprint and published version of an article. Additionally, we found no evidence of association

between overall data availability and COVID-19 status (Fisher's exact, 1000 simulations; p = 0.383). However, we note that a greater proportion of COVID-19 articles had a reduction in data availability when published and vice-versa, a greater proportion of non-COVID-19 articles were more likely to have additional data available upon publishing (Fig. 1C). This trend was reflected when broken down by preprint server (Supplemental Fig. 1C).

As the number of authors can give an indication of the amount of work involved, we assessed authorship changes between the preprint and published articles. Although the vast majority (>75%) of preprints did not have any changes in authorship when published (Fig. 1D), we found weak evidence of association between authorship change and COVID-19 status (Fisher's exact, 1000 simulations; p = 0.047). Specifically, COVID-19 preprints were almost three times as likely to have additional authors when published compared to non-COVID-19 preprints (14% vs 5%). When this data was broken down by server, we found that none of the published bioRxiv preprints had any author removals or alterations in the corresponding author (Supplemental Fig. 1D).

Having examined the properties of preprints that were being published within our timeframe, we next investigated which journals were publishing these preprints. Among our sample of published preprints, those describing COVID-19 research were split across many journals, with clinical or multidisciplinary journals tending to publish the most papers that were previously preprints (Fig. 1E). Non-COVID-19 preprints were mostly published in *PLOS ONE*, although they were also found in more selective journals, such as *Cell*. When broken down by server, preprints from bioRxiv were published in a range of journals, including the highly selective *Nature* and *Science* (Supplemental Fig. 1E & F); interestingly, these were all COVID-19 articles.

Together, these data reveal that preprints are published in diverse venues and suggest that during the early phase of the pandemic, COVID-19 preprints were being expedited through peer review compared to non-COVID-19 preprints. However, published articles were rarely associated with transparent peer review and almost 37% of the literature sampled had limited data availability, with COVID-19 status having little impact on these statistics.

Figures do not majorly differ between the preprint and published version of an article

One proxy for the total amount of work, or number of experiments, within an article is to quantify the number of panels in each figure [18]. We therefore quantified the number of panels and tables in each article in our dataset.

We found that, on average, there was no difference in the total number of panels and tables between the preprint and published version of an article. However, COVID-19 articles had fewer total panels and tables compared to non-COVID-19 articles (Fig. 2A). Moreover, for individual preprint-published pairs, we found there was a greater variation in the differences in numbers of panels and tables for COVID-19 articles than non-COVID-19 articles (Fig. 2B). In both cases, preprints posted to bioRxiv contained a higher number of total panels and tables and greater variation in the difference between the preprint and published articles than preprints posted to medRxiv (Supplemental Fig. 2A & B).

To further understand the types of panel changes, we classified the changes in panels and tables as panels being added, removed or rearranged. Independent of COVID-19-status, over 70% of published preprints were classified with "no change" or superficial rearrangements to panels and tables, confirming the previous conclusion. Despite this, approximately 20% of articles had "significant content" added or removed from the figures between preprint and final versions (Fig. 2C). Surprisingly, none of the preprints posted to bioRxiv experienced removal of content upon publishing (Supplemental Fig. 2C).

This data suggests that, for most papers in our sample, the individual panels and tables do not majorly change upon journal publication, suggesting that there are limited new experiments or analyses when publishing previously posted preprints.

The majority of abstracts do not discretely change their main conclusions between the preprint and published article

We compared abstracts between preprints and their published counterparts that had been published in the first four months of the COVID-19 pandemic (Jan – April 2020). Abstracts contain a summary of the key results and conclusions of the work and are freely-accessible, they are the most read section. To computationally identify all individual changes between the preprint and published versions of the abstract and derive a quantitative measure of similarity between the two, we applied a series of well-established string-based similarity scores, already validated to work for such analyses. We initially employed the python SequenceMatcher (difflib module), based on the "Gestalt Pattern Matching" algorithm [19] which determines a change ratio by iteratively aiming to find the longest contiguous matching subsequence given two pieces of text. We found that COVID-19 abstracts had more changes than non-COVID-19 abstracts, with a sizeable number appearing to have been drastically re-written (Fig. 3A). However, one limitation of this method is that it cannot always handle re-arrangements properly (for example, a sentence moved from the beginning of the abstract to the end) and these are often counted as changes between the two texts. As a comparison to this open source

implementation, we employed the output of the Microsoft Word track changes algorithm and used this as a different type of input for determining the change ratio of two abstracts. Using this method, we confirmed that abstracts for COVID-19 articles changed more than for non-COVID-19 articles, although the overall change ratio was significantly reduced (Fig. 3B); this suggests that while at first look a pair of COVID-19 abstracts may seem very different between their preprint and published version, most of these changes are due to re-organisation of the content. Nonetheless, the output obtained by the Microsoft Word track changes algorithm highlights that it is more likely that COVID-19 abstracts undergo larger re-writes (i.e., their score is closer to 1.0).

Since text rearrangements may not result in changes in meaning, four annotators independently annotated the compared abstracts according to a rubric we developed for this purpose (Table 1, Supplemental Method 2). We found that independent of COVID-19-status, a sizeable number of abstracts did not undergo any meaningful changes (24.4% of COVID-19 and 38.7% of non-COVID-19 abstracts). Over 50% of abstracts had changes that minorly altered, strengthened, or softened the main conclusions (Fig. 3C, see representative examples in Supplemental Table 2). 15% of COVID-19 abstracts and 6% of non-COVID-19 abstracts had major changes in their conclusions. The main conclusions of one of these abstracts (representing 0.5% of all abstracts scored) reversed. Excerpts including each of these major changes are listed in Supplemental Table 3. Using the degree of change, we evaluated how the manual scoring of abstract changes compared with our automated methods. We found that the overall change in abstracts was weakly correlated with the difflib change ratio (Spearman's rank; $\rho = 0.22$, $p = 0.030$ and $\rho = 0.39$, $p < 0.001$ for COVID-19 and non-COVID-19 respectively) (Supplemental Fig. 3A) and moderately correlated with the change ratio computed from Microsoft Word (Spearman's rank; $\rho = 0.56$, $p < 0.001$ and $p = 0.52$, $p < 0.001$ for COVID-19 and non-COVID-19 respectively) (Supplemental Fig. 3B).

Among annotations that contributed minorly to the overall change of the abstract, we also annotated a neutral, positive, or negative direction of change (Table 1, Supplemental method 2). Most of these changes were neutral, modifying the overall conclusions somewhat without directly strengthening or softening them (see examples in Supplemental Table 2). Among changes that strengthened or softened conclusions, we found abstracts that contained only positive changes or only negative changes, and many abstracts displayed both positive and negative changes (Fig. 3D), in both COVID-19 and non-COVID-19 articles. When we assessed the sum of positive or negative scores based on the abstract change degree, we found significant moderate correlations between each score sum (i.e. number of positive or negative scores) for COVID-19 and non-COVID-19 abstracts and the overall degree of change (Spearman's rank; $0.54 < \rho < 0.65$ and $p < 0.001$ in all cases) (Supplemental Fig. 3C).

We next assessed whether certain subsections of the abstract were more likely to be associated with changes. The majority of changes within abstracts were associated with results, with a greater proportion of such annotations for COVID-19 abstracts than non-COVID-19 abstracts (55.3% and 46.6%, respectively (Fig. 3E). We then evaluated the type of change in our annotations, for example changes to statistical parameters/estimates or addition or removal of information. This demonstrated that the most frequent changes were additions of new findings to the abstracts following peer review, followed by removals, which were more common among non-COVID-19 manuscripts (Fig. 3F). We also frequently found an increase in sample sizes or the use/reporting of statistical tests (type "stat+") in the published version of COVID-19 articles compared to their preprints (Supplemental Table 2).

We then investigated whether abstracts with minor or major overall changes more frequently contained certain types or locations of changes. We found that abstracts with both major and minor conclusion changes had annotations in all sections, and both degrees of change were also associated with most types of individual changes. For non-COVID-19 abstracts, 80.7% of our annotated changes within conclusion sections and 92.2% of our annotated changes within contexts (n = 46 and 118 annotations respectively) belonged to abstracts categorised as having only minor changes (Supplemental Fig 3D). Moreover, the majority of annotated changes in statistics (between 73% and 96% depending on COVID-status and type of change) were within abstracts with minor changes (Supplemental Fig. 3E).

Finally, we investigated which journals were publishing preprints from our dataset and if there were any associations with the scored degree of change (Supplemental Fig. 3F and Supplemental Table 1). We found that *PLOS ONE* was the only journal to publish more than one preprint that we determined to have major changes in the conclusions of the abstract, although this may be a reflection that this was the journal with the most published non-COVID-19 preprints. *Science* and *Nature* published 3 preprints each that we deemed as having minor changes. Three journals published a total of 6 preprints that we scored as having no meaningful changes in their abstracts. It's important to note that a number of published preprints appeared in medical journals that did not utilise abstracts and so were excluded from the analysis of abstract changes.

These data reveal that abstracts of preprints mostly experience minor changes prior to publication. COVID-19 articles experienced greater alterations than non-COVID-19 preprints and were slightly more likely to have major alterations to the conclusions. Overall, most abstracts are comparable between the preprinted and published article.

Discussion

With a third of the early COVID-19 literature being shared as preprints [11], we assessed the differences between these preprints and their subsequently published versions, and compared these results to a similar sample of non-COVID-19 preprints and their published articles. This enabled us to provide quantitative evidence regarding the degree of change between preprints and published articles in the context of the COVID-19 pandemic. We found that preprints were most often passing into the "permanent" literature with only minor changes to their conclusions, suggesting that the entire publication pipeline is having a minimal but beneficial effect upon preprints.

The duration of peer review has drastically shortened for COVID-19 manuscripts, although analyses suggest that these reports are no less thorough [20]. However, in the absence of peer review reports (Fig. 1B), one method of assessing the “quality” of an article is for interested readers or stakeholders to re-analyse the data independently. Unfortunately, we found that many authors offered to provide data only upon request (Fig. 1). Moreover, a number of published articles had faulty hyperlinks that did not link to the supplemental material. This supports previous findings of limited data sharing in COVID-19 preprints [21] and faulty web links [22] and enables us to compare trends to the wider literature. It is apparent that the ability to thoroughly and independently review the literature and efforts towards reproducibility are hampered by current data sharing and peer reviewing practices. Both researchers and publishers must do more to increase reporting and data sharing practices within the biomedical literature [14,23]. Therefore, we call on journals to embrace open-science practices, particularly with regards to increased transparency of peer review and data availability.

Abstracts represent the first port of call for most readers, usually being freely available, brief, relatively jargon-free, and machine-readable. Importantly, abstracts contain the key findings and conclusions from an article. To analyse differences in abstracts between preprint and paper, we employed multiple approaches. We first objectively compared textual changes between abstract pairs using a computational approach before manually annotating abstracts (Fig. 3). Both approaches demonstrated that COVID-19 articles underwent greater textual changes in their abstracts compared to non-COVID-19 articles. However, in determining the type of changes, we discovered that 6% of non-COVID-related abstracts and 15% of COVID-related abstracts had discrete, “major” changes in their conclusions. Indeed, 42% of non-COVID-19 abstracts underwent no meaningful change between preprint and published versions, though only 34% of COVID-19 abstracts were similarly unchanged. The majority of changes were “minor” textual alterations that lead to a minor change or strengthening or softening of conclusions. Of note, about 1/3 of changes were additions of new data (Fig 3F). While previous works have focused their attention on the automatic processing of many other aspects of

scientific writing, such as citation analysis [24], topic modelling [25], fact checking [26], and argumentative analysis [27], we are not aware of formal systemic comparisons between preprints and published papers that focused on tracking/extracting all changes, with related studies either producing coarse-grained analyses [13], relying only on derivative resources such as Wikipedia edit history [46], or utilizing a small sample size and a single reader [15]. Our dataset is a contribution to the research community that goes beyond the specificities of the topic studied in this work; we hope it will become a useful resource for the broader scientometrics community to assess the performance of natural language processing (NLP) approaches developed for the study of fine-grained differences between preprints and papers. This potential would be amplified if increasing calls for abstracts and article metadata to be made fully open access were heeded ([23,29] and https://i4oa.org/).

Our findings that abstracts generally underwent few changes was further supported by our analysis of the figures. The total number of panels and tables did not significantly change between preprint and paper, independent of COVID-status. However, COVID-19 articles did experience greater variation in the difference in panel and table numbers compared to non-COVID-19 articles.

While our study provides context for readers looking to understand how preprints may change before journal publication, we emphasize several limitations. First, we are working with a small sample of articles that excludes preprints that were unpublished at the time of our analysis. Thus, we have selected a small minority of COVID-19 articles that were rapidly published, which may not be representative of those articles which were published more slowly. Moreover, as we were focussing on the immediate dissemination of scientific findings during a pandemic, our analysis does not encompass a sufficiently long timeframe to add a reliable control of unpublished preprints. This too would be an interesting comparison for future study. Indeed, an analysis comparing preprints that are eventually published with those that never become published would provide stronger and more direct findings of the role of journal peer review.

Furthermore, our study is not a measure of the changes introduced by the peer review process. A caveat associated with any analysis comparing preprints to published papers is that it is difficult to determine when the preprint was posted relative to submission to the journal. The version first posted to the server may already be in response to one or more rounds of peer review (at the journal that ultimately publishes the work, or from a previous submission). The changes between the first version of the preprint (which we analysed) and the final journal publication may result from journal peer review, comments on the preprint, feedback from colleagues outside of the context of the preprint, and additional development by the authors independent of these sources.

Although we did not try to precisely determine the number of experiments (i.e. by noting how many panels or tables were from a single experimental procedure), this is an interesting area of future work that we aim to pursue.

One of the key limitations of our data is the difficulty in objectively comparing two versions of a manuscript. Our approach revealed that computational approaches comparing textual changes at string-level are insufficient for revealing the true extent of change. For example, we discovered abstracts that contained many textual changes (such as rearrangements) that did not impact on the conclusions and were scored by annotators as having no meaningful changes. In contrast, some abstracts that underwent major changes as scored by annotators were found to have very few textual changes. This demonstrates the necessity that future studies will focus on more semantic natural language processing approaches when comparing manuscripts that go beyond shallow differences between strings of texts [30]. Nevertheless, the difficulty when dealing with such complex semantic phenomena is that different assessors may annotate changes differently. We attempted to develop a robust set of annotation guidelines to limit the impact of this. Our strategy was largely successful, but we propose a number of changes for future implementation. We suggest simplifying the categories (which would reduce the number of conflicting annotations) and conducting robust assessments of inter-annotator consistency. To do this, we recommend that a training set of data are utilised before assessors annotate independently. While this strategy is more time-consuming (due to the fact that annotator might need several training trials before reaching a satisfying agreement), in the long-run it is a more scalable strategy as there will be no need of a meta-annotator double-checking all annotations against the guidelines, as we had in our work.

Our data analysing abstracts suggests that the main conclusions of 94% of non-COVID-related life sciences articles do not change from their preprint to final published versions, with only one out of 185 papers in our analysis reversing the conclusion made by its preprint. This data supports the usual caveats that researchers should perform their own peer review any time they read an article, whether it is a preprint or published paper. Moreover, our data provides confidence in the use of preprints for dissemination of research.

Methods

Preprint metadata for bioRxiv and medRxiv

Our preprint dataset is derived from the same dataset presented in version 1 of Fraser *et al* [11]. In brief terms, bioRxiv and medRxiv preprint metadata (DOIs, titles, abstracts, author names, corresponding author name and institution, dates, versions, licenses, categories and published article links) were obtained via the bioRxiv Application Programming Interface (API; https://api.biorxiv.org). The API accepts a 'server' parameter to enable retrieval of records for both bioRxiv and medRxiv. Metadata was collected for preprints posted 1st January 2020 - 30th April 2020 (N = 14,812). All data were collected on 1st May 2020. Note that where multiple preprint versions existed, we included only the earliest version and recorded the total number of following revisions. Preprints were classified as "COVID-19 preprints" or "Non-COVID-19 preprints" on the basis of the following terms contained within their titles or abstracts (case-insensitive): "coronavirus", "covid-19", "sars-cov", "ncov-2019", "2019-ncov", "hcov-19", "sars-2".

Comparisons of figures and tables between preprints and their published articles

We identified COVID-19 bioRxiv and medRxiv preprints that have been subsequently published as peer reviewed journal articles (based on publication links provided directly by bioRxiv and medRxiv in the preprint metadata derived from the API) resulting in a set of 105 preprint-paper pairs. We generated a control set of 105 non-COVID-19 preprint-paper pairs by drawing a random subset of all bioRxiv and medRxiv preprints published in peer reviewed journals, extending the sampling period to 1st September 2019 - 30th April 2020 in order to preserve the same ratio of bioRxiv:medRxiv preprints as in the COVID-19 set. Links to published articles are likely an underestimate of the total proportion of articles that have been subsequently published in journals – both as a result of the delay between articles being published in a journal and being detected by preprint servers, and preprint servers missing some links to published articles when e.g., titles change significantly between the preprint and published version [31]. Detailed published article metadata (titles, abstracts, publication dates, journal and publisher name) were retrieved by querying each DOI against the Crossref API (https://api.crossref.org), using the rcrossref package for R [32].

Each preprint-paper pair was then scored independently by two referees using a variety of quantitative and qualitative metrics reporting on changes in data presentation and organisation, the quantity of data, and the communication of quantitative and qualitative outcomes between paper and preprint (using the reporting questionnaire; Supplemental Methods 1). Of particular note: individual figure panels were counted as such when labelled with a letter, and for pooled analyses a full table was treated as a single-panel figure. The number of figures and figure panels was capped at 10 each (any additional figures/panels were pooled), and the number of supplementary items

(files/figures/documents) were capped at 5. In the case of preprints with multiple versions, the comparison was always restricted to version 1, i.e., the earliest version of the preprint. Any conflicting assessments were resolved by a third independent referee, resulting in a final consensus report for 99 non-COVID-19 and 101 COVID-19 preprint-paper pairs (excluding 10 pairs not meeting the initial selection criteria or those still awaiting post-publication reviews).

Annotating changes in abstracts

In order to prepare our set of 200 abstracts for analysis of their abstracts, where abstract text was not available via the Crossref API, we manually copied it into the datasheet. To identify all individual changes between the preprint and published versions of the abstract and derive a quantitative measure of similarity between the two, we applied a series of well-established string-based similarity scores, already tested for this type of analyses: (1) the python SequenceMatcher, based on the "Gestalt Pattern Matching" algorithm [19], determines a change ratio by iteratively aiming to find longest contiguous matching subsequence given two pieces of text; (2) as a comparison to this open source implementation, we employed the output of the Microsoft Word track changes algorithm (see details in Supplemental Method 3), and used this as a different type of input for determining the change ratio of two abstracts. Employing the output of (2), which consisted in a series of highlighted changes for each abstract-pair, four co-authors annotated each abstract, based on a predefined set of labels and guidelines (Table 1, Supplemental Method 2). Each annotation contained information about the section of the abstract, the type of change that had occurred, and the degree to which this change impacted the overall message of the abstract. Changes (such as formatting, stylistic edits, or text rearrangements) without meaningful impact on the conclusions were not annotated. We then manually categorised each abstract based on its highest degree of annotation: "no change" containing no annotations, "strengthening/softening, minor" containing only 1, 1-, or 1+, or "major conclusions change" containing either a 2 or a 3, since only a single abstract contained a 3. See supplementary tables 2 and 3 for a list of representative annotations for each type and all annotations that resulted in major conclusions change. The final set of annotations was produced by one of the authors, who assigned each final label by taking into account the majority position across annotators, their related comments and consistency with the guidelines.

Table 1. Tags (one each of section, type, and degree) applied to each annotation of text meaningfully changed in abstracts.

Section	Description
context	Background or methods
results	A statement linked directly to data
conclusion	Interpretations and/or implications
Type	**Description**
added	New assertion
removed	Assertion removed
nounchange	One noun is substituted for another ("fever" becomes "high fever")
effectreverse	The opposite assertion is now being made (word "negatively" added)
effect+	The effect is now stronger (changes in verbs/adjectives/adverbs)
effect-	The effect is now weaker (changes in verbs/adjectives/adverbs)
stat+	Statistical significance increased (expressed as number or in words)
stat-	Statistical significance decreased (expressed as number or in words)
statinfo	Addition/removal of statistical information (like a new test or confidence intervals)
Degree	**Description**
1	Significant: minorly alters a main conclusion of the paper
1-	Significant: softens a main conclusion of the paper
1+	Significant: strengthens a main conclusion of the paper
2	Major: a discrete change in a main conclusion of the paper
3	Massive: a main conclusion of the paper reversed

Statistical analyses

Categorical traits of preprints or annotations (e.g. COVID-19 or non-COVID-19; type of change) were compared by calculating contingency tables and using Chi-square tests or Fisher's exact tests using Monte Carlo simulation in cases where any expected values were < 5. Quantitative preprint traits (e.g. change ratios) were correlated with other quantitative traits using Spearman's rank tests.

Parameters and limitations of this study

We acknowledge a number of limitations in our study. Firstly, to assign a preprint as COVID-19 or not, we used keyword matching to titles/abstracts on the preprint version at the time of our data extraction. This means we may have captured some early preprints, posted before the pandemic, that had been subtly revised to include a keyword relating to COVID-19. Our data collection period was a

tightly defined window (January-April 2020) meaning that our data suffers from survivorship and selection bias in that we could only examine preprints that have been published and our findings may not be generalisable to all preprints. A larger, more comprehensive sample would be necessary for more conclusive conclusions to be made.

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Author contributions

Conceptualisation, N.F., L.B., G.D., J.K.P., M.P., J.A.C., F.N.; Methodology, N.F., L.B., G.D., J.K.P., M.P., J.A.C., F.N.; Software, N.F., L.B., J.A.C., F.N.; Validation, N.F., L.B., J.A.C.; Formal analysis, N.F., L.B., J.A.C., F.N.; Investigation, N.F., L.B., G.D., J.K.P., M.P., J.A.C.; Resources, J.K.P. and J.A.C.; Data curation, N.F., L.B., J.A.C., F.N.; Writing – original draft, N.F., L.B., G.D., J.K.P., M.P., J.A.C., F.N.; Writing – Review & editing, N.F., L.B., G.D., J.K.P., M.P., J.A.C., F.N.; Visualisation, J.K.P., J.A.C.; Supervision, J.A.C.; Project administration, J.A.C.

Data availability

All data and code used in this study are available on github (https://github.com/preprinting-a-pandemic/preprint_changes) and Zenodo (10.5281/zenodo.4551541), as part of the first release.

Declaration of interests

JP is the executive director of ASAPbio, a non-profit organization promoting the productive use of preprints in the life sciences. GD is a bioRxiv Affiliate, part of a volunteer group of scientists that screen preprints deposited on the bioRxiv server. MP is the community manager for preLights, a non-profit preprint highlighting service. GD and JAC are contributors to preLights and ASAPbio Fellows. The authors declare no other competing interests.

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Figures

Figure 1. Publishing and peer-review of preprints during the COVID-19 pandemic. (A) percentage of COVID-19 and non-COVID-19 preprints published between Jan-April 2020. (B) Percentage of published preprints associated with transparent peer review (the publication of review reports with the journal version of the article). (C) Data availability after publication. (D) Change in authorship after publication.

(E) Journals that are publishing preprints. Panel (A) describes all available data (n = 14,812 preprints), while panels (B) – (E) describe sample of preprints analysed in detail (n = 200).

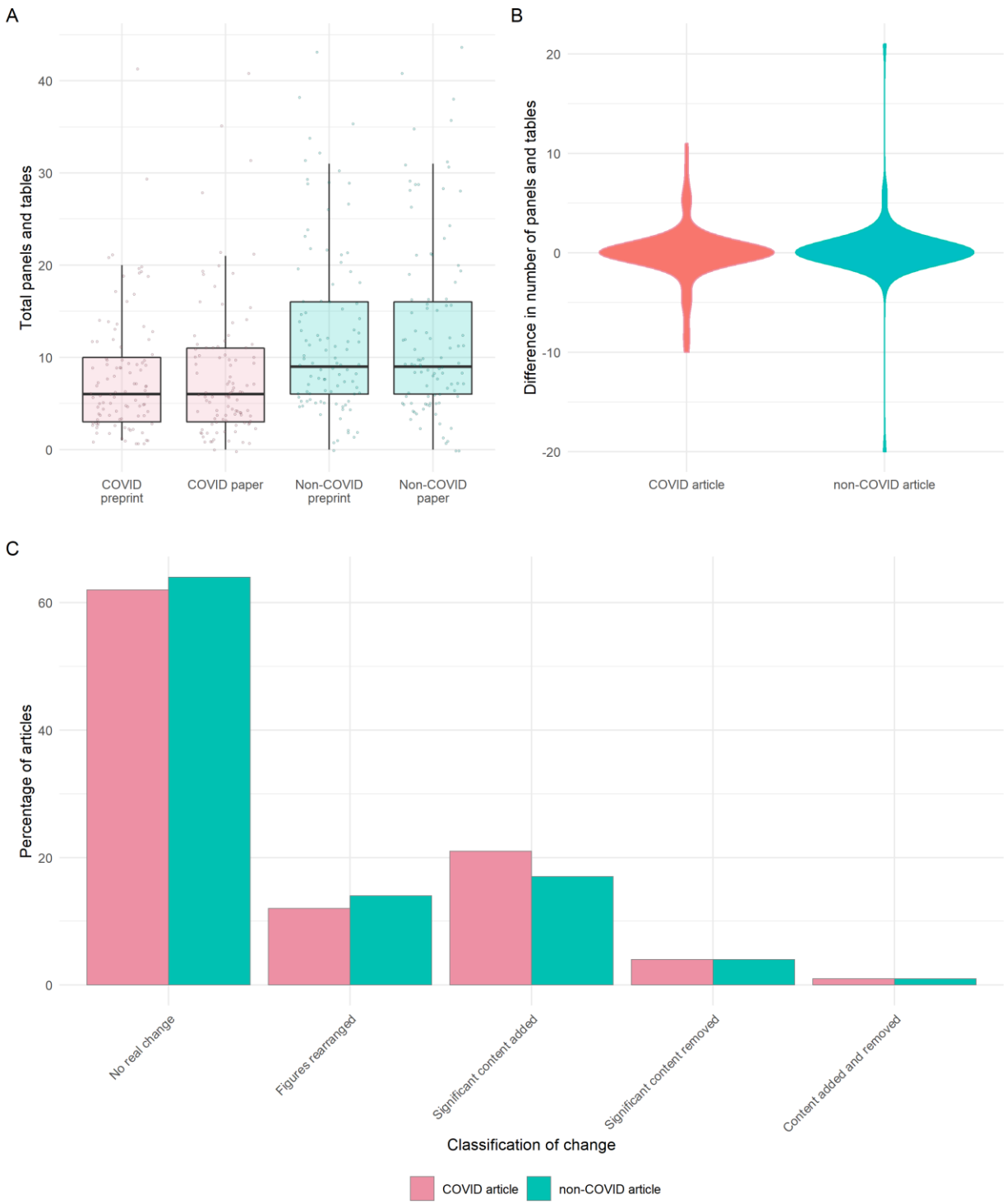


Figure 2. Preprint-publication pairs do not significantly differ in the total numbers of panels and tables. (A) Total numbers of panels and tables in preprints and published articles. (B) Difference in the total number of panels and tables between the preprint and published versions of articles. (C) Subjective classification of figure changes between preprint and published articles. All panels describe sample of preprints analysed in detail (n = 200).

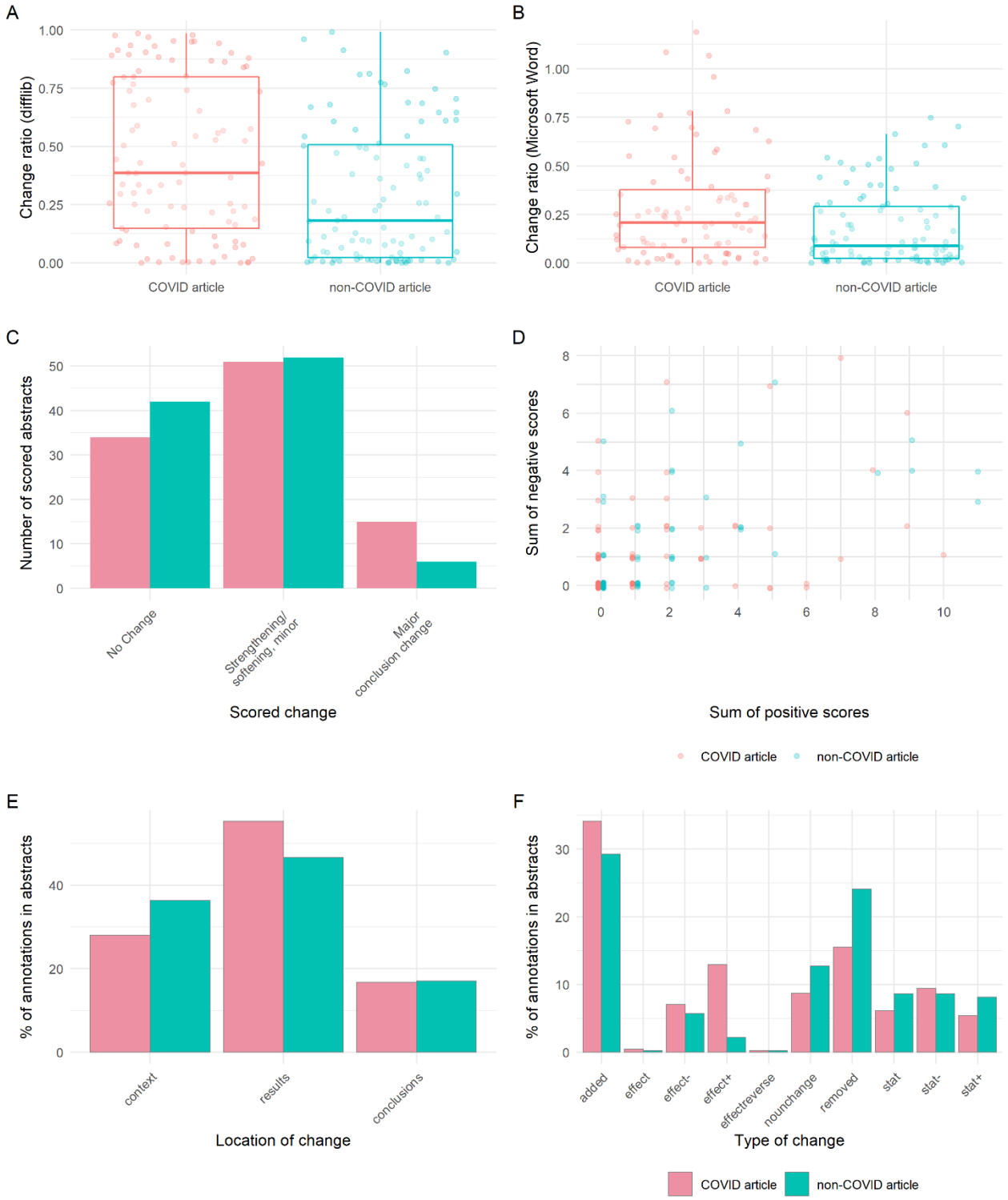
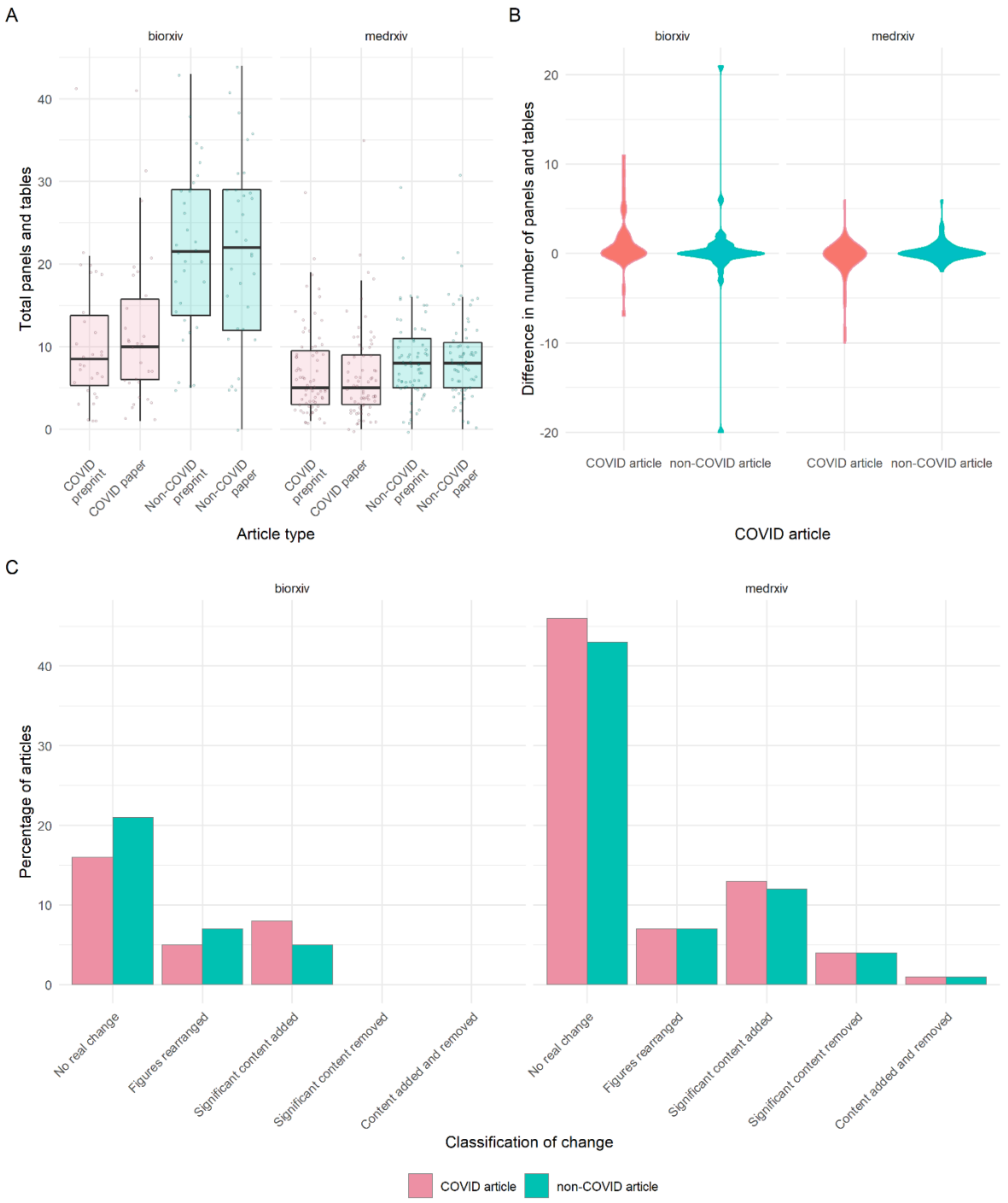
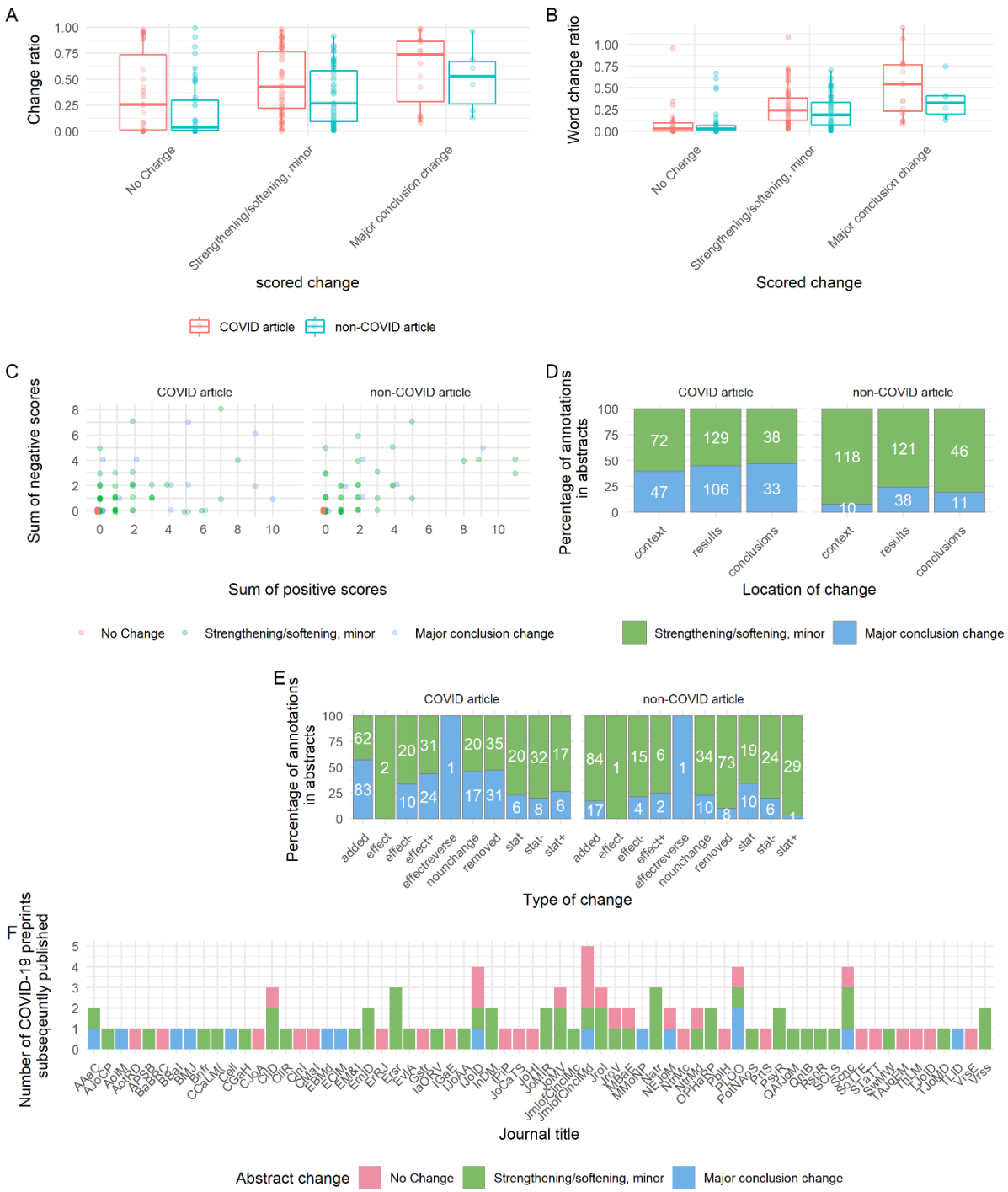


Figure 3. Preprint-publication abstract pairs are not significantly different. (A) Difflib calculated change ratio for COVID-19 or non-COVID-19 abstracts. (B) Change ratio calculated from Microsoft Word for COVID-19 or non-COVID-19 abstracts. (C) Overall changes in abstracts for COVID-19 or non-COVID-19 abstracts. (D) Sum of positive and negative annotations for COVID-19 or non-COVID-19 abstracts. (E) Location of annotations within COVID-19 or non-COVID-19 abstracts. (F) Type of annotated change within COVID-19 or non-COVID-19 abstracts. All panels describe sample of abstracts analysed in detail (n = 185).

Supplemental Figure 1. Publishing and peer-review of preprints during the COVID-19 pandemic broken down by server. (A) Percentage of COVID-19 and non-COVID-19 preprints published between Jan-April 2020. (B) Published preprints associated with transparent peer-review. (C) Data availability for published preprints. (D) Change in authorship for published preprints. (E) Journals that are publishing bioRxiv preprints. (F) Journals that are publishing medRxiv preprints.



Supplemental Figure 2. Preprint-publication pairs do not significantly differ in the total numbers of panels and tables as broken down by server. (A) Total numbers of panels and tables in preprints and published articles. (B) Difference in the total number of panels and tables between the preprint and published versions of articles. (C) Classification of figure changes between preprint and published articles.



Supplemental Figure 3. Granular annotations of changes in abstracts in context of the overall change. (A) Difflib calculated change ratio for COVID-19 or non-COVID-19 abstracts, based on the overall abstract change. (B) Change ratio calculated from Microsoft Word for COVID-19 or non-COVID-19 abstracts, based on the overall abstract change. (C) Sum of positive and negative annotations for COVID-19 or non-COVID-19 abstracts, based on the overall abstract change. (D) Percentage of annotations in each location within COVID-19 or non-COVID-19 abstracts, based on the overall abstract change. Labels denote absolute number of annotations. (E) Percentage of annotations of each type within COVID-19 or non-COVID-19 abstracts, based on the overall abstract change. Labels denote absolute number of annotations. (F) Journals publishing COVID-19 preprints, based on overall abstract changes. Data labels: AAaC: Antimicrobial Agents and Chemotherapy, AJoCP: American Journal of

Clinical Pathology, AoIM: Archives of Iranian Medicine, AotRD: Annals of the Rheumatic Diseases, APSB: Acta Pharmaceutica Sinica B, BaBRC: Biochemical and Biophysical Research Communications, BBaI: Brain, Behavior, and Immunity, BMJ: BMJ, Bnfr: Bioinformatics, CCaLM(: Clinical Chemistry and Laboratory Medicine (CCLM), Cell: Cell, CGaH: Clinical Gastroenterology and Hepatology, CJoA: Canadian Journal of Anesthesia, ClID: Clinical Infectious Diseases, ClIR: Cell Research, ClnI: Clinical Immunology, CMaI: Clinical Microbiology and Infection, EBMd: EBioMedicine, EClM: EClinicalMedicine, EM&I: Emerging Microbes & Infections, EmID: Emerging Infectious Diseases, ErRJ: European Respiratory Journal, Ersr: Eurosurveillance, EvlA: Evolutionary Applications, Gstr: Gastroenterology, IaORV: Influenza and Other Respiratory Viruses, IGaE: Infection, Genetics and Evolution, IJoAA: International Journal of Antimicrobial Agents, IJoID: International Journal of Infectious Diseases, InDM: Infectious Disease Modelling, IPiP: Infection Prevention in Practice, JoCaTS: Journal of Clinical and Translational Science, JoHI: Journal of Hospital Infection, JoMIR: Journal of Medical Internet Research, JoMV: Journal of Medical Virology, JrnlofClnclMc: Journal of Clinical Microbiology, JrnlofClnclMd: Journal of Clinical Medicine, JroI: Journal of Infection, JroV: Journal of Virology, MBaE: Mathematical Biosciences and Engineering, MMoNP: Mathematical Modelling of Natural Phenomena, Natr: Nature, NEJoM: New England Journal of Medicine, NtrMc: Nature Microbiology, NtrMd: Nature Medicine, OPHaRP: Osong Public Health and Research Perspectives, PblH: Public Health, PLOO: PLOS ONE, PotNAoS: Proceedings of the National Academy of Sciences, PrtS: Protein Science, PsyR: Psychiatry Research, QAIJoM: QJM: An International Journal of Medicine, QntB: Quantitative Biology, RspR: Respiratory Research, SCLS: Science China Life Sciences, Scnc: Science, SoTTE: Science of The Total Environment, STaTT: Signal Transduction and Targeted Therapy, SwMW: Swiss Medical Weekly, TAJoEM: The American Journal of Emergency Medicine, ThLM: The Lancet Microbe, TJoID: The Journal of Infectious Diseases, TJoMD: The Journal of Molecular Diagnostics, TLID: The Lancet Infectious Diseases, VrsE: Virus Evolution, Vrss: Viruses.

Supplemental Material

Supplemental Table 1. Journals posting preprints from 1st Jan – 30th April 2020.

Supplemental Table 2. Examples of changes in abstracts between the preprint and published version of an article

Supplemental Table 3. All changes in abstracts that resulted in a major conclusion change

Supplemental Material 1. Abstract annotations utilised for the analysis in this study

Supplemental Material 2. Non-resolved abstract annotations provided for NLP researchers

Supplemental Methods 1. Questionnaire used for assessing manuscript metadata, panels and tables

Supplemental Methods 2. Rubric for annotating abstracts

Supplemental Methods 3. Protocol for comparing and extracting annotations from Word files