

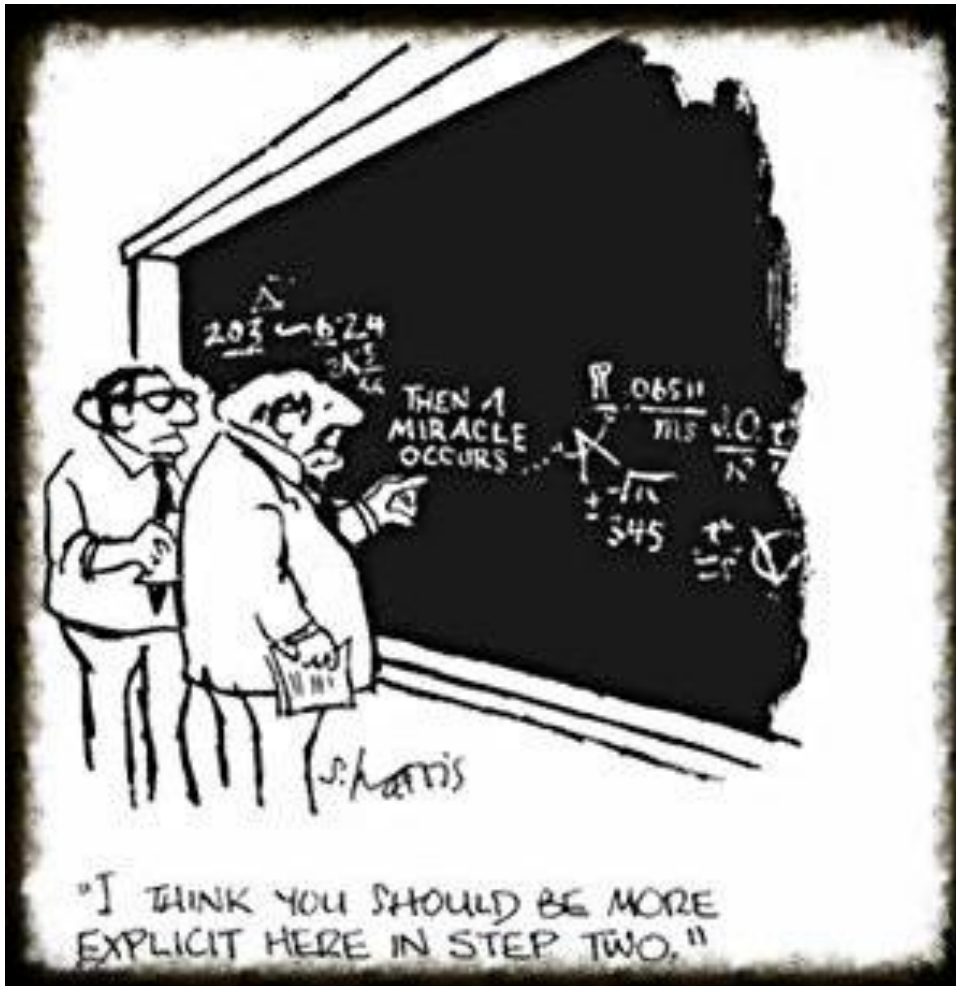


# Rigor & Reproducibility in Research

May 21, 2025

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# Defining Key Concepts



**Reproducibility:** Ability to achieve consistent results using the same data and methods

**Replicability:** Ability to achieve consistent results using new data but similar methods

**Rigor:** Strict application of the scientific method to ensure robust and unbiased results

# R&R Challenges

**Publish or perish**  
**Statistical misuse**  
**No negative data**



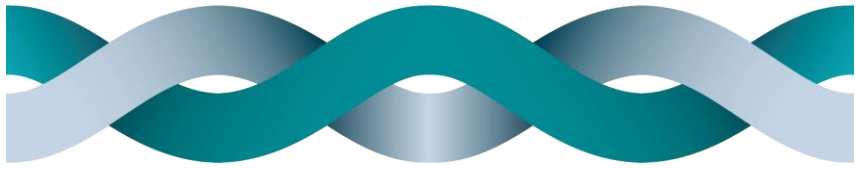
**Insufficient reporting**  
**Deadlines**

**Poor Time  
management**

**Bias**

**Poor data management**





# Historical Context

## Early Milestones (2005-2019)

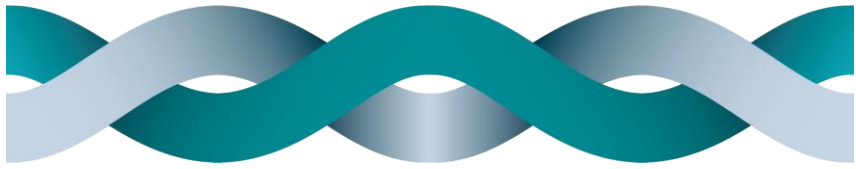
**2005 – “Why Most Published Research Findings Are False.”** John Ioannidis’ PLOS Medicine essay puts the issue on the map and sparks a decade-long debate about statistical power, bias and false positives. <https://doi.org/10.1371/journal.pmed.0020124>

**2011 – Bayer audit.** Company finds just **14/67 (≈21 %)** high-profile target-validation papers reproducible. Nat Rev Drug Discovery calls it a “wake-up call.” <https://www.nature.com/articles/nrd3439-c1>

**2012 – Amgen/Begley & Ellis replication attempt.** Amgen scientists can confirm findings in only **6/53 (11 %)** landmark oncology papers; commentary in *Nature* urges tougher standards. <https://www.nature.com/articles/483531a>

**2015 – Economic scale revealed.** Freedman et al. estimate **US \$28 B/year** wasted on irreproducible U.S. pre-clinical work; *Nature* news story amplifies to policymakers and media. <https://journals.plos.org/plosbiology/article?id=10.1371%2Fjournal.pbio.1002165>

**2019 – National Academies Report.** Landmark consensus study (“Reproducibility and Replicability in Science”) urges agencies to fund confirmatory studies, reward open data and reform incentives.  
<https://nap.nationalacademies.org/catalog/25303/reproducibility-and-replicability-in-science>



# Historical Context

## Growing Federal Emphasis & Policy Action(2013-2023)

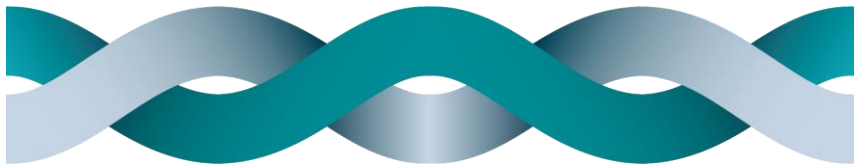
**2013 – First OSTP Public-Access Directive.** Obama-era memo tells  $\geq$ \$100 M R&D agencies to draft free-access plans, laying the groundwork for transparency and data-sharing norms. <https://www.wired.com/2013/03/want-to-know-what-scientists-are-doing-with-your-money-soon-you-will-be-able-to/>

**2014 – “Principles & Guidelines for Reporting Pre-clinical Research.”** NIH, Nature, *Science* and 30+ journals adopt common check-lists for blinding, randomization, power calculations and full-methods sections. <https://grants.nih.gov/policy-and-compliance/policy-topics/reproducibility/principles-guidelines-reporting-preclinical-research>

**2016 – NIH “Rigor & Transparency” Rule (NOT-OD-16-011).** Grant reviewers must score study design rigor, sex-as-a-biological-variable, and authentication plans; new attachment required in every application. <https://grants.nih.gov/grants/guide/notice-files/not-od-16-011.html>

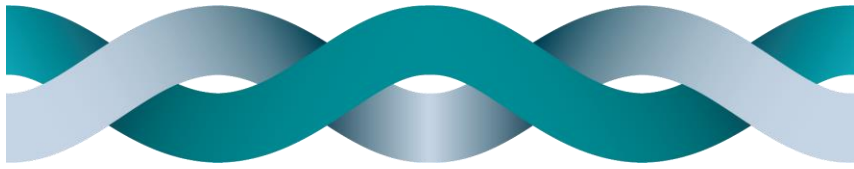
**2023 – NIH Data Management & Sharing Policy.** All NIH-funded projects must budget for, and deposit, FAIR data; compliance is a term-of-award requirement. <https://sharing.nih.gov/data-management-and-sharing-policy/about-data-management-and-sharing-policies/data-management-and-sharing-policy-overview#after>

**2022 – OSTP “Nelson Memo.”** Requires *immediate* open-access to every federally-funded article and its underlying data by 2026, reinforcing transparency as a cornerstone of rigor. <https://www.axios.com/2022/08/25/white-house-federal-funded-research-public>



# Scope of the problem

Scope of Estimate	Figure	What is counted	Source
U.S. pre-clinical life-science research	~ \$28 B/yr	Direct spending on animal & cell-based discovery work whose findings later prove irreproducible (≈50 % failure rate model)	<a href="https://journals.plos.org/plosbiology/article?id=10.1371/journal.pbio.1002165">https://journals.plos.org/plosbiology/article?id=10.1371/journal.pbio.1002165</a>
Global health & medical research (all stages)	~\$170 B/yr	85 % of the ≈ \$200 billion world-wide health-research budget lost through poorly chosen questions, avoidable design flaws, non-publication and unusable reports	<a href="https://blogs.bmj.com/bmj/2016/01/14/paul-glasziou-and-iain-chalmers-is-85-of-health-research-really-wasted/">https://blogs.bmj.com/bmj/2016/01/14/paul-glasziou-and-iain-chalmers-is-85-of-health-research-really-wasted/</a>
Biomedical R&D – industry perspective	~ \$38 B/year (£28B/yr)	Company spending diverted by irreproducible academic findings that seed drug programs later abandoned in pre-clinical or Phase I	<a href="https://www.ddw-online.com/spotlight-tackling-the-issue-of-scientific-data-waste-15522-202202/">https://www.ddw-online.com/spotlight-tackling-the-issue-of-scientific-data-waste-15522-202202/</a>
Bad research antibodies (U.S. subset)	~ \$350 M/yr	Reagents that fail specificity/validation tests, producing misleading data and cascading experimental waste	<a href="https://www.tandfonline.com/doi/full/10.1080/19420862.2024.2323706">https://www.tandfonline.com/doi/full/10.1080/19420862.2024.2323706</a>



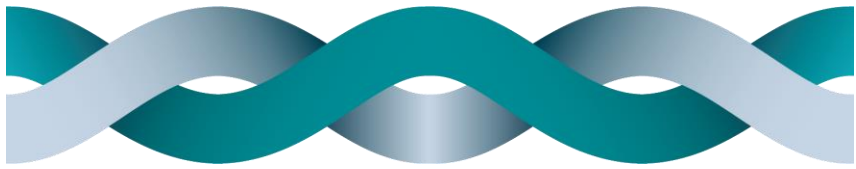
# Consequences

Economic costs

Human impact

Erosion of Public Trust





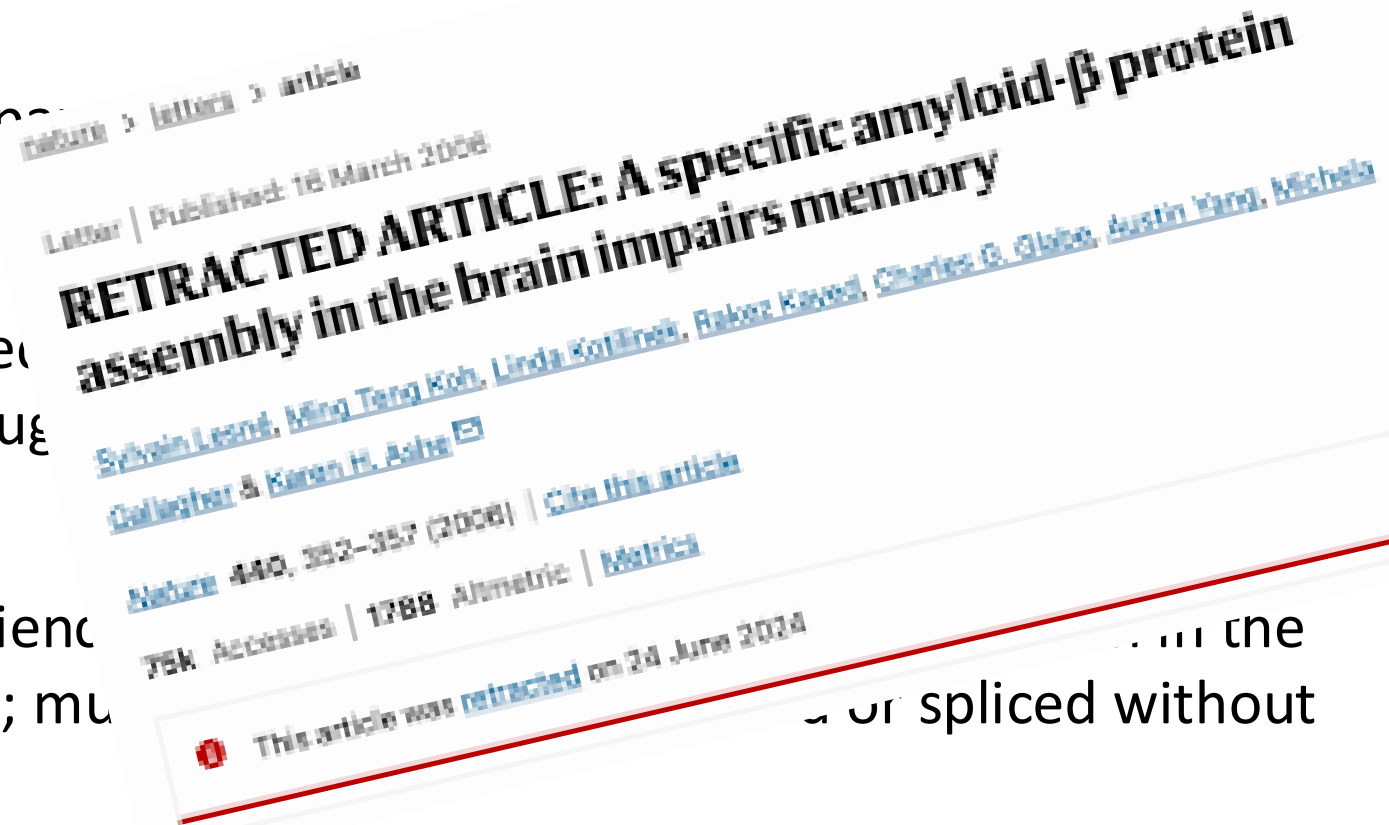
## Questionable data

### Amyloid- $\beta$ Hypothesis: Rigor, Reproducibility

2006 Nature paper  
in mice

study was cited in  
grants and drug

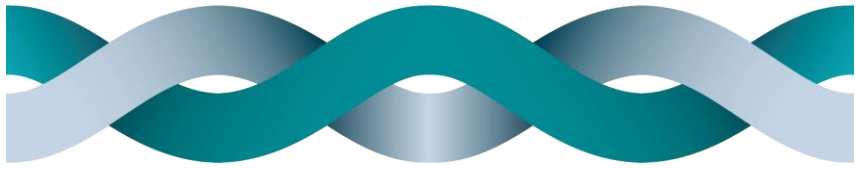
July 2022 - Science  
western blots; mu-  
disclosure



for Getting It Wrong

... in the  
... or spliced without





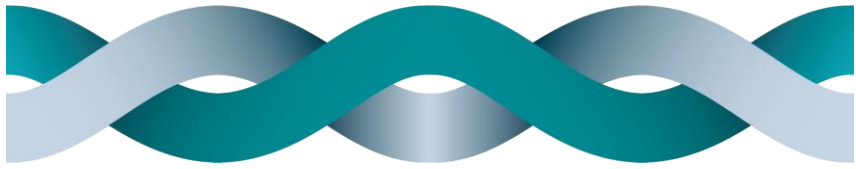
# Cascade of failed clinical trials

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## **Amyloid- $\beta$ Hypothesis: Rigor, Reproducibility — and the Bill for Getting It Wrong**

1995-2022  $\geq$  250 amyloid-targeting agents entered the clinic;  $\sim$ 95 % failed in Phase II/III.  
Private out-of-pocket expense is estimated at \$42.5 billion (1995-2021), exclusive of public funding

Each late-stage failure consumes 5-10 years, thousands of human participants, and hundreds of millions of dollars, and diverts attention from alternative hypotheses (tau, neuroinflammation, vascular)



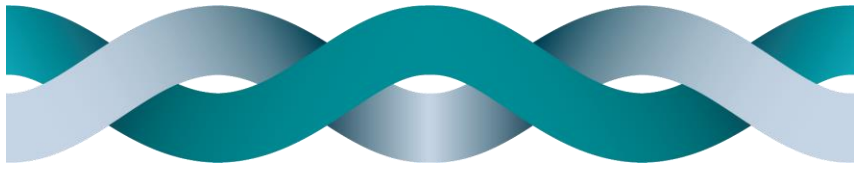
## Ongoing public funding skew

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### Amyloid- $\beta$ Hypothesis: Rigor, Reproducibility — and the Bill for Getting It Wrong

FY 2022 NIH investment that mentioned “amyloid”  $\approx$  **\$1.6 billion**—~40 % of the institute’s Alzheimer’s portfolio.

Heavy reliance on one mechanistic model distorts federal priorities; other avenues receive comparatively little rigor testing or seed support



# Gatekeeping and publication bias

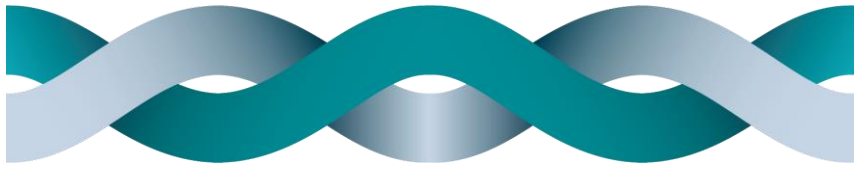
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## **Amyloid- $\beta$ Hypothesis: Rigor, Reproducibility — and the Bill for Getting It Wrong**

Investigative reports describe a tight network of reviewers steering journals and study sections toward amyloid work and rejecting dissenting results

<https://www.statnews.com/2019/06/25/alzheimers-cabal-thwarted-progress-toward-cure/>

Lack of viewpoint diversity reduces the self-correcting power of science, letting weak data propagate unchecked



# Opportunity cost to patients

## Amyloid- $\beta$ Hypothesis: Rigor, Reproducibility — and the Bill for Getting It Wrong

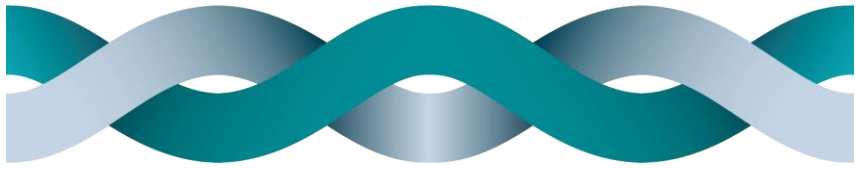
Two monoclonal antibodies (aducanumab, lecanemab) have gained restricted FDA approval

Clinical benefit is modest and safety controversial



Treatments aimed at symptom relief, prevention, or non-amyloid targets lag years behind



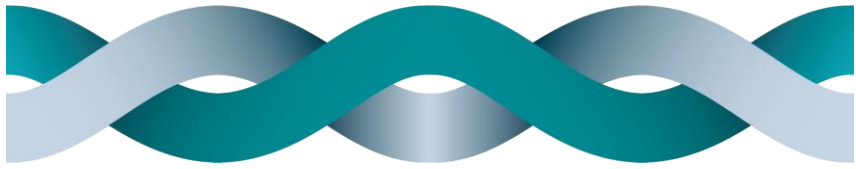


### **Amyloid- $\beta$ Hypothesis: Rigor, Reproducibility — and the Bill for Getting It Wrong**

**Single high-impact paper can set an entire field's agenda** — robust image-forensics and routine replication of “too-good-to-be-true” animal data are essential before large-scale translation

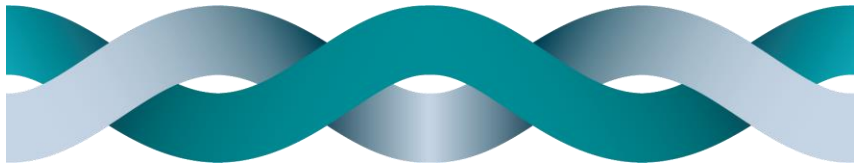
**Portfolio diversity mitigates systematic error** - funding agencies need explicit balance tests so no hypothesis dominates solely through legacy momentum

**Transparent raw data & blots.** Had original images been openly archived, the fabrication might have been caught before billions were spent



**WE MUST DO BETTER.**

**How?**



# Gulf Coast Consortia



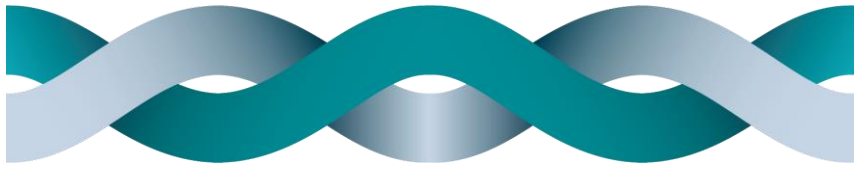
## Characterization of Research Grant Terminations at the National Institutes of Health

[Michael Liu, MPhil<sup>1</sup>](#); [Kushal T. Kadakia, MSc<sup>1</sup>](#); [Vishal R. Patel, MD, MPH<sup>1,2</sup>](#); et al [Harlan M. Krumholz, MD, SM<sup>3,4</sup>](#)

[Author Affiliations](#) [Article Information](#)

JAMA. Published online May 8, 2025. doi:10.1001/jama.2025.7707

~ \$1,8B



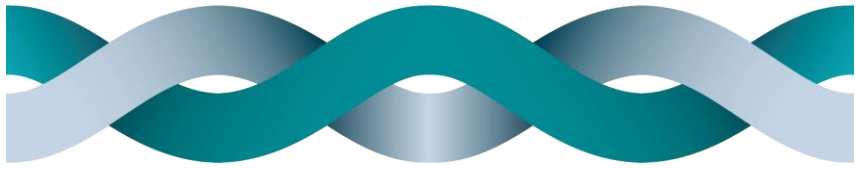
# The DOGE Rigor & Reproducibility Innovation Challenge

You've been appointed to lead DOGE's Biomedical Research Efficiency Task Force. In this high-stakes mission, you must:

1. Slash Waste: Identify at least one existing NIH process (e.g. grant requirement, reporting step, review panel, etc.) that can be eliminated or streamlined—freeing up federal dollars without compromising scientific quality.
2. Turbocharge Rigor: Design a low-cost pilot program that directly tackles a reproducibility or transparency gap (e.g. centralized raw-data repositories, peer-to-peer protocol audits).
3. Submit your two-pronged strategy by email to [gccresearch@rice.edu](mailto:gccresearch@rice.edu)







# The University Rigor & Reproducibility Innovation Challenge

You've been tapped by your academic institution's leadership to spearhead a new Research Excellence Task Force. In this campus-wide competition, your mission is to:

1. Eliminate Institutional Waste: Identify one university-level research process or administrative requirement that can be removed or streamlined—freeing up staff time and operating funds without sacrificing compliance or oversight.
2. Elevate Research Rigor: Propose a low-cost pilot initiative ( $\leq$  \$50 K/year) that tackles a specific reproducibility or transparency gap on campus.
3. Submit your two-pronged strategy by email to [gccresearch@rice.edu](mailto:gccresearch@rice.edu)

