

# Polycystic Ovary Syndrome Research: A Scientometric Assessment of Global Publications Output During 2007-16

Ritu Gupta<sup>1</sup>, B M Gupta<sup>2</sup>, K K Mueen Ahmed<sup>3</sup>

## ABSTRACT

The paper examines 1829 global publications on polycystic ovary syndrome research, as covered in Scopus database during 2007-16, recording an annual average growth rate of -0.58% and citation impact averaged to 13.78 citations per paper. The top 10 most productive countries individually contributed global share from 4.05% and 18.21%, with largest global publication share coming from USA followed by U.K and China (9.57% and 9.40% share each), Italy (6.40%), Turkey (5.19% share), India, Iran, Greece, Egypt and France (from 4.05% to 4.54%) during 2006-17. Together, the 10 most productive countries accounted for 70.31% and 96.97% share of global publications and citation output during 2007-16. The national share of international collaborative papers across top 10 countries in polycystic ovary syndrome research varied from 4.21% to 32.00%, during 2007-16. Medicine accounting for the highest publications share (93.66%), followed by biochemistry, genetics & molecular biology (30.62%) and pharmacology, toxicology & pharmaceuticals (3.72%) during 2007-16. The top 15 most productive organizations and authors together contributed 19.57% and 15.25% respectively as their share of global publication output and 51.06% and 49.79% respectively as their share of global citation output during 2007-16. Among the total journal output of 1793 papers, the top 15 journals contributed 37.20% share to the global journal output during 2007-16. Of the total global polycystic ovary syndrome research output, the top 27 highly cited publications registered citations from 100 to 727 and they together received 5556 citations, with 205.78 citations per paper. These 27 highly cited papers resulted from research pursuits of 124 authors and 92 organizations. These 27 highly cited papers appeared in 15 journals: Human Reproduction Update published 8 papers, 3 papers each in Fertility & Sterility and Human Reproduction, 2 papers each in Endocrine Reviews and Clinical Endocrinology, and 1 paper each in other journals.

**Key words:** Polycystic Ovary Syndrome, Global publications output, Bibliometrics, Scientometrics.

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## INTRODUCTION

Polycystic Ovarian Syndrome (PCOS) is one of the most common women endocrine disorders, affecting approximately 5-10% of women worldwide, with less than 50% of them diagnosed. The syndrome is present throughout a woman's life from puberty through post-menopause and affects women of all races and ethnic groups.<sup>[1]</sup> Seventy seven years ago, two American gynecologists Irving F. Stein, Sr. and Michael Leo Leventhal first described this syndrome. The syndrome was considered as a problem of anovulation and infertility. They described their treatment of anovulation using wedge resection.<sup>[2]</sup> Polycystic ovarian syndrome is a condition in which a woman's levels of the sex hormones estrogen and progesterone are out of balance. This leads to the growth of ovarian cysts (benign masses on the ovaries).<sup>[3]</sup> Polycystic ovary syndrome is a complex condition characterized by elevated androgen levels,

menstrual irregularities, and/or small cysts on one or both ovaries. The disorder can be morphological (polycystic ovaries) or predominantly biochemical (hyperandrogenemia). Hyperandrogenism, a clinical hallmark of PCOS, can cause inhibition of follicular development, microcysts in the ovaries, anovulation, and menstrual changes.<sup>[4]</sup>

Polycystic ovaries are slightly larger than normal ovaries and have twice the number of follicles (small cysts). Having polycystic ovaries does not mean you have polycystic ovary syndrome. Around 6 or 7 in 100 (6–7%) of women with polycystic ovaries have PCOS.<sup>[5]</sup>

The three main features of PCOS are: (i) irregular periods – which means your ovaries don't regularly release eggs (ovulation), (ii) excess androgen – high levels of "male hormones"

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in your body, which may cause physical signs such as excess facial or body hair (see signs and symptoms below) and (iii) polycystic ovaries – your ovaries become enlarged and contain many fluid-filled sacs (follicles) which surround the eggs (it's important to note that, despite the name, if you have PCOS you don't actually have cysts). If you have at least two of these features you may be diagnosed with PCOS. Polycystic ovaries contain a large number of harmless follicles that are up to 8 mm (approximately 0.3in) in size. The follicles are under-developed sacs in which eggs develop. In PCOS, these sacs are often unable to release an egg, which means that ovulation doesn't take place.<sup>[6]</sup> PCOS is associated with reproductive and metabolic consequences. It was believed that research findings that the long-term reproductive outcomes of women with PCOS are surprisingly similar compared to women with normal ovaries, and that they have an ovarian reserve possibly superior to women with normal ovaries. The typical features of PCOS, specifically the anovulatory cycles tend to normalize over time, but in spite of a decrease over time, free androgen levels remain elevated compared to age-matched control subjects. Overall, the accumulated data from several European cohort studies of older women with a previous diagnosis of PCOS suggest an increased incidence of type 2 diabetes, increased prevalence of several features of the metabolic syndrome, but no increased incidence of mortality from CVD.<sup>[7]</sup>

## Literature Review

Only few bibliometric studies have been carried in this area in the past. Amongst such studies, Brüggmann, Berges, Klingelhöfer, Bauer, Bendels, Louwen, Jaque and Groneberg<sup>[8]</sup> assessed all PCOS-related publications indexed between 1900- 2014 in the Web of Science and applied density equalizing mapping projections, scientometric techniques and economic benchmarking procedures. A total of 6261 PCOS-specific publications and 703 international research collaborations were found. The USA was identified as the most active country in total and collaborative research activity. In the socioeconomic analysis, the USA was also ranked first (25.49 PCOS-related publications per gross domestic product [GDP]/capita), followed by the UK, Italy and Greece. When research activity was related to population size, Scandinavian countries and Greece were leading the field. For many highly productive countries, gender analysis revealed a high ratio of female scientists working on PCOS with the exception of Japan. Ram<sup>[9]</sup> analyzed the research publications in the area of PCOS for a period of 40 years using SCOPUS database. The author analyzed the literature for types of publications, languages, productive journals, authors, countries & institutions, subjects covered, and citation impact. It was found that PCOS literature is spread over 99 countries of the world where United States had contributed the highest number of articles. Among research contribution of BRICS countries, China has produced the maximum number of articles. 'Fertility and Sterility' is the most productive journal and published 9.96% of PCOS articles. 'S Franks', the most productive author, has contributed 178 articles on PCOS. Yayci, Guler, Ömer, Ataç and Cetin<sup>[10]</sup> made a quantitative analysis of the scientific publications (8891) related to "Polycystic Ovary Syndrome" and investigated publications originating from Turkish institutions and authors, which are published in *Science Citation Index Expanded* covered medical journals between 1980 and 2012. Among these contributions, 2836 (31.9%) were from United States of America, followed by England (9.75%), Italy (8.45%), Turkey (5.34%). The international scientific repository on polycystic ovary syndrome was relatively poor in the beginning of 1980s, however; we observed an international acceleration with respect to the publication number after 1990s. Publications from Turkey on the other hand showed up only after 1990s. Turkey's contribution to international repository of polycystic ovary syndrome research speeded up after 2000s. When the ranking of the authors with respect to the number of publications was evaluated, R. Azziz was found to be the first, followed

by R.S. Legro RS and Franks S. B.O. Yildiz, F. Kelestimur, H. Yarali were the first three among Turkish authors. "Fertility and Sterility" was found to be the most preferred journal publishing papers about polycystic ovary syndrome.

## OBJECTIVES

The main objective of this study is to study the performance status of global polycystic ovary syndrome research publications during 2007-16, as covered in Scopus database. In particular, the study focuses on the following analyses of the growth of world research output on polycystic ovary syndrome and its citation impact, contribution and citation impact of top 10 most productive countries, the international collaboration share of top 10 most productive countries, distribution of global research output by broad subject areas and the dynamics of its growth and decline, identification of significant keywords, the publication productivity and citation impact of top 15 most productive global organizations and authors, modes of research communication and identification of key sources and the characteristics of top 27 highly cited papers.

## METHODOLOGY

The publication data on polycystic ovary syndrome research was retrieved and downloaded from the Scopus database (<http://www.scopus.com>) covering the 10 years period 2007-16. Scopus is an online bibliographical multidisciplinary publication and citation database prepared by Elsevier and covers nearly 22,000 titles in the science, technology, medical, social sciences and humanities. Our search strategy was based on the search for polycystic ovary syndrome research publications in which keywords such as "polycystic ovary syndrome" or "polycystic ovarian syndrome" or "ovary polycystic" or "ovarian hyperstimulation" or "hyperandrogen anovulation" were appearing in either "Keyword tag" or "Article Title tag". The time was set from 2007 to 2016. Using analytical commands or tags, such as "year", "document type", "source type", "language", "subject area", "keyword", "author name", "affiliation", "country/territory" and "source type" available in Scopus database, we were able to analyze publication distribution by year-wise, document type, source type, language-wise, subject-wise, keywords, source title and identify important authors and organizations and distribution of international collaborative publications and also leading collaborative countries. The analyses is further enhanced with the help of citations received, h-index, international collaborative papers and high cited papers particularly in case of authors and organizations. The publications receiving 100 or more citations from the date of publications till 21 June 2017 was designated here as high cited papers. The quality of research output was indirectly assessed using indicator as citation per paper. A number of raw and relative bibliographical indicators were used to assess and understand the growth and dynamics of global polycystic ovary syndrome research. The raw bibliographical indicators used were: growth rate number of publications and international collaborative publications, citation per paper, h-index, etc. Among relative bibliographical indicators, we have used activity index and relative citation index.

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((KEY(polycystic ovary syndrome or polycystic ovarian syndrome) OR TITLE(polycystic ovary syndrome or polycystic ovarian syndrome)) AND PUBYEAR > 2006 AND PUBYEAR < 2017) or ((KEY(ovary polycystic or ovarian hyperstimulation or hyperandrogen* anovulation) OR TITLE(ovary polycystic or ovarian hyperstimulation or hyperandrogen* anovulation)) AND PUBYEAR > 2006 AND PUBYEAR < 2017))
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## ANALYSIS

### Publications analysis

The global research output on polycystic ovary syndrome cumulated to a total of 1829 publications in 10 years during 2007-16, growing at -0.58%

**Table 1: World Output in Polycystic Ovary Syndrome Research, 2007-16**

| Publication Period | TP   | World |       |
|--------------------|------|-------|-------|
|                    |      | TC    | CPP   |
| 2007               | 163  | 3615  | 22.18 |
| 2008               | 141  | 3465  | 24.57 |
| 2009               | 187  | 4183  | 22.37 |
| 2010               | 191  | 2759  | 14.45 |
| 2011               | 199  | 3243  | 16.30 |
| 2012               | 179  | 2759  | 15.41 |
| 2013               | 203  | 2129  | 10.49 |
| 2014               | 220  | 1997  | 9.08  |
| 2015               | 219  | 878   | 4.01  |
| 2016               | 127  | 168   | 1.32  |
| 2007-11            | 881  | 17265 | 19.60 |
| 2012-16            | 948  | 7931  | 8.37  |
| 2007-16            | 1829 | 25196 | 13.78 |

TP=Total Papers; TC=Total Citations; CPP=Citations Per Paper

growth rate increasing from 163 in 2007 to 127 publications in 2016. The polycystic ovary syndrome research registered 7.60% quinquennial growth from 881 to 948 publications during the period 2007-11 to 2012-16. The citation impact of global publications on polycystic ovary syndrome averaged to 13.78 citations per publication (CPP) during 2007-16, but their five-yearly impact declined from 19.60 CPP to 8.37 CPP during 2007-11 to 2012-16 (Table 1). Of the total global publications output, 70.75% (1294) was published as articles, 20.94% (383) as reviews, 1.69% (31) as letters, 1.48% (27) as conference papers, 1.42% (26 each) as editorials and short surveys and the rest as book chapters (15 papers), articles in press (6 papers) and erratum (4 papers).

### Top 10 Most Productive Countries in Polycystic Ovary

**Table 2: Global Publication Share of Top 10 Most Productive Countries in Polycystic Ovary Syndrome during 2007-16**

| S.No | Name of the Country                  | Number of Papers |         |         | Share of Papers |         |         | TC    | CPP   | ICP | %ICP  | RCI  |
|------|--------------------------------------|------------------|---------|---------|-----------------|---------|---------|-------|-------|-----|-------|------|
|      |                                      | 2007-11          | 2012-16 | 2007-16 | 2007-11         | 2012-16 | 2007-16 |       |       |     |       |      |
| 1    | USA                                  | 168              | 165     | 333     | 19.07           | 17.41   | 18.21   | 8003  | 24.03 | 88  | 26.43 | 1.74 |
| 2    | U.K.                                 | 97               | 78      | 175     | 11.01           | 8.23    | 9.57    | 3366  | 19.23 | 56  | 32.00 | 1.40 |
| 3    | China                                | 29               | 143     | 172     | 3.29            | 15.08   | 9.40    | 1409  | 8.19  | 36  | 20.93 | 0.59 |
| 4    | Italy                                | 64               | 53      | 117     | 7.26            | 5.59    | 6.40    | 3776  | 32.27 | 33  | 28.21 | 2.34 |
| 5    | Turkey                               | 38               | 57      | 95      | 4.31            | 6.01    | 5.19    | 852   | 8.97  | 4   | 4.21  | 0.65 |
| 6    | India                                | 31               | 52      | 83      | 3.52            | 5.49    | 4.54    | 708   | 8.53  | 9   | 10.84 | 0.62 |
| 7    | Iran                                 | 32               | 50      | 82      | 3.63            | 5.27    | 4.48    | 419   | 5.11  | 7   | 8.54  | 0.37 |
| 8    | Greece                               | 41               | 39      | 80      | 4.65            | 4.11    | 4.37    | 2712  | 33.90 | 23  | 28.75 | 2.46 |
| 9    | Egypt                                | 37               | 38      | 75      | 4.20            | 4.01    | 4.10    | 780   | 10.40 | 16  | 21.33 | 0.75 |
| 10   | France                               | 38               | 36      | 74      | 4.31            | 3.80    | 4.05    | 2408  | 32.54 | 21  | 28.38 | 2.36 |
|      | Total                                | 575              | 711     | 1286    | 65.27           | 75.00   | 70.31   | 24433 | 19.00 | 293 | 22.78 | 1.38 |
|      | World                                | 881              | 948     | 1829    | 100.00          | 100.00  | 100.00  | 25196 | 13.78 |     |       |      |
|      | Share of 10 Countries in World Total | 65.27            | 75.00   | 70.31   |                 |         |         | 96.97 |       |     |       |      |

TP=Total Papers; TC=Total Citations; CPP=Citations Per Paper; ICP=International Collaborative Papers; RCI=Relative Citation Index

### Syndrome

The global research output on polycystic ovary syndrome originated from as many as 74 countries during 2007-16. The distribution of research output by country of publication is highly skewed. The top 10 most productive countries in polycystic ovary syndrome research accounted for 70.31% and 96.97% share of global publications and citation output during 2007-16 (Table 2). Their five-yearly global publication share increased from 65.27% to 75.00% during 2007-11 to 2012-16. Of the 74 countries, 45 contributed 1-10 papers each, 15 countries 11-50 papers each, 10 countries 51-100 papers each and 4 countries 101-400 papers each. Their global share of top 10 countries ranged between 4.05% and 18.21% during 2007-16, with USA accounting for the highest global share (18.21%), followed by U.K. and China (9.57% and 9.40% share each), Italy (6.40%), Turkey (5.19% share), India, Iran, Greece, Egypt and France (from 4.05% to 4.54%) during 2006-17. The five-yearly cumulative output of China increased by 11.79%, followed by 1.97% in India, 1.70% in Turkey and 1.64% in Iran, whereas it decreased by 2.78% in U.K., 1.67% in Italy, 1.66% in USA, 0.54% in Greece, 0.52% in France and 0.19% in Egypt during 2007-11 to 2012-16. Five of top 10 countries scored relative citation index above the world average *i.e.* more than 1.38: Greece (2.46), France (2.36), Italy (2.34), USA (1.74) and U.K. (1.40) during 2007-16 (Table 2).

### International Collaboration

The national share of international collaborative papers across top 10 countries in polycystic ovary syndrome research varied from 4.21% to 32.00%, with U.K. (32.00%) accounting for the highest national share, followed by Greece (28.75%), France (28.38%), Italy (28.21%), USA (26.43%), Egypt (21.33%), China (20.93%), India (10.84%), Iran (8.54%) and Turkey (4.21%) during 2007-16 (Table 2).

### Subject-Wise Distribution of Research Output

The global research output on polycystic ovary syndrome reported during 2007-16 spreads across three sub-fields (as identified in Scopus database classification), with medicine accounting for the highest publications share (93.66%), followed by biochemistry, genetics & molecular biology (30.62%) and pharmacology, toxicology & pharma-

**Table 3: Subject-Wise Breakup of Global Publications in Polycystic Ovary Syndrome Research during 2007-16**

| S.No | Subject*                                   | Number of Papers (TP) |         |         | Activity Index |         | TC      | CPP     | %TP     |
|------|--|-----------------------|---------|---------|----------------|---------|---------|---------|---------|
|      |  | 2007-11               | 2012-16 | 2007-16 | 2007-11        | 2012-16 | 2007-16 | 2007-16 | 2007-16 |
| 1    | Medicine                                   | 842                   | 871     | 1713    | 102.05         | 98.10   | 23582   | 13.77   | 93.66   |
| 2    | Biochemistry, Genetics & Molecular Biology | 244                   | 316     | 560     | 90.46          | 108.87  | 9449    | 16.87   | 30.62   |
| 3    | Pharmacology, Toxicology & Pharmaceutics   | 24                    | 44      | 68      | 73.27          | 124.84  | 659     | 9.69    | 3.72    |
|      | World Output                               | 881                   | 948     | 1829    | 100.00         | 100.00  |         |         |         |

\*There is overlapping of literature covered under various subjects  
TP=Total Papers; TC=Total Citations; CPP=Citations Per Paper

**Table 4: Significant Keywords in Literature on Polycystic Ovary Syndrome Research during 2007-16**

| S.NO | Keywords                      | Frequency | S.No | Keywords                                | Frequency | S.No | Keywords                   | Frequency |
|------|-------------------------------|-----------|------|---|-----------|------|----------------------------|-----------|
| 1    | Ovary Polycystic Disease      | 1648      | 21   | Androgen                                | 264       | 41   | Ovary Follicle Development | 121       |
| 2    | Polycystic Ovary Syndrome     | 1330      | 22   | Chorionic Gonadotropins                 | 257       | 42   | Menstrual Irregularities   | 118       |
| 3    | Hyperandrogenism              | 602       | 23   | Progesterone                            | 249       | 43   | Female Fertility Agents    | 116       |
| 4    | Anovulation                   | 589       | 24   | Menstrual Cycle                         | 244       | 44   | Estrogen Complications     | 114       |
| 5    | Female Infertility            | 548       | 25   | Ovulation                               | 234       | 45   | Reproduction               | 102       |
| 6    | Follitropin                   | 505       | 26   | Infertility                             | 223       | 46   | Gonadorelin                | 100       |
| 7    | Luteinizing Hormone           | 476       | 27   | Gonadotropins                           | 221       | 47   | Cardiovascular Disease     | 96        |
| 8    | Pregnancy                     | 473       | 28   | Ovarian hyper stimulation Syndrome      | 218       | 48   | Ovary Insufficiency        | 94        |
| 9    | Insulin Resistance            | 463       | 29   | Pathophysiology                         | 212       | 49   | Live Births                | 92        |
| 10   | Ovulation Induction           | 414       | 30   | PCOS                                    | 211       |      |                            |           |
| 11   | Ovary                         | 389       | 31   | Muellerian Inhibiting Factor            | 210       |      |                            |           |
| 12   | Obesity                       | 388       | 32   | Oral Contraceptive Agents               | 155       |      |                            |           |
| 13   | <i>In-vitro</i> Fertilization | 350       | 33   | Anti-Muellerian Hormone                 | 153       |      |                            |           |
| 14   | Ovary Hype- stimulation       | 350       | 34   | Oligomenorrhea                          | 148       |      |                            |           |
| 15   | Polycystic Ovarian Syndrome   | 324       | 35   | Metabolic Syndrome                      | 146       |      |                            |           |
| 16   | Pregnancy Rate                | 303       | 36   | Follicle Stimulating Hormone            | 141       |      |                            |           |
| 17   | Insulin                       | 301       | 37   | Amenorrhea                              | 138       |      |                            |           |
| 18   | Ovary Follicle                | 297       | 38   | Embryo Transfer                         | 138       |      |                            |           |
| 19   | Hirsutism                     | 270       | 39   | Non-Insulin Dependent Diabetes Mellitus | 125       |      |                            |           |
| 20   | Ovarian Follicle              | 265       | 40   | Oocyte                                  | 123       |      |                            |           |

ceutics (3.72%) during 2007-16. The activity index, which computes changes in research activity in the sub-fields over time 2007-11 to 2012-16 (world average activity index of a given subject being taken as 100), witnessed increase in biochemistry, genetics & molecular biology (from 90.46 to 108.87) and pharmacology, toxicology & pharmaceutics (from 73.27 to 124.84), as against decline of research activity in medicine (from 102.05 to 98.10) from 2007-11 to 2012-16. Among 3 subjects, biochemistry, genetics & molecular biology scored the highest citation impact per paper of 16.87 citations per paper, followed by medicine (13.77) and pharmacology, toxicology & pharmaceutics (9.69) during 2007-16 (Table 3).

### Significant Keywords

Around 49 significant keywords have been identified from the literature, which point towards possible directions of research trends in polycystic ovary syndrome. These keywords are listed in Table 4 in the decreasing order of the frequency of occurrence during 2007-16.

### Top 15 Most Productive Global Organizations

The productivity of top 15 most productive global organizations pursuing polycystic ovary syndrome research varied from 18 to 40 publications in 10 years and together they account for 19.57% (358) publication share and 51.06% (12865) citation share during the period 2007-16. The scientometric profile of these 15 organizations is presented in Table 5. **Six organizations** registered publications output above the group average of 23.67: Aristotle University of Thessaloniki, Greece (40 papers), Centre



**Table 5: Scientometric Profile of Top 15 Most Productive Global Organizations in Polycystic Ovary Syndrome during 2007-16**

| S.No | Name of the Organization                                   | TP    | TC    | CPP   | HI   | ICP | %ICP  | RCI  |
|------|--|-------|-------|-------|------|-----|-------|------|
| 1    | Aristotle University of Thessaloniki, Greece               | 40    | 1009  | 25.23 | 15   | 13  | 32.50 | 1.83 |
| 2    | Centre Hospitalier Regional Universitaire de Lille, France | 33    | 2122  | 64.30 | 13   | 8   | 24.24 | 4.67 |
| 3    | Mansoura University, Egypt                                 | 30    | 384   | 12.80 | 12   | 3   | 10.00 | 0.93 |
| 4    | University Medical Center, Utrecht, Netherlands            | 29    | 1375  | 47.41 | 18   | 18  | 62.07 | 3.44 |
| 5    | Trehan University of Medical Sciences, Iran                | 25    | 188   | 7.52  | 8    | 2   | 8.00  | 0.55 |
| 6    | University of Athens, Greece                               | 25    | 813   | 32.52 | 12   | 2   | 8.00  | 2.36 |
| 7    | McGill University, Canada                                  | 21    | 340   | 16.19 | 9    | 4   | 19.05 | 1.17 |
| 8    | Universidade de Sao Paulo USP, Brazil                      | 21    | 122   | 5.81  | 6    | 5   | 23.81 | 0.42 |
| 9    | Sun Yat-Sen University, China                              | 20    | 244   | 12.20 | 9    | 8   | 40.00 | 0.89 |
| 10   | Pen State College of Medicine, USA                         | 20    | 1700  | 85.00 | 12   | 9   | 45.00 | 6.17 |
| 11   | University of Athens, Greece                               | 20    | 1528  | 76.40 | 13   | 3   | 15.00 | 5.54 |
| 12   | Peking University, China                                   | 19    | 294   | 15.47 | 7    | 5   | 26.32 | 1.12 |
| 13   | Imperial College, London, U.K                              | 19    | 618   | 32.53 | 11   | 6   | 31.58 | 2.36 |
| 14   | University Of Adelaide, Australia                          | 18    | 1705  | 94.72 | 10   | 12  | 66.67 | 6.87 |
| 15   | Universidad de Chile, Chile                                | 18    | 423   | 23.50 | 13   | 7   | 38.89 | 1.71 |
|      | Total of 15 organizations                                  | 358   | 12865 | 35.94 | 11.2 | 105 | 29.33 | 2.61 |
|      | Total of World   | 1829  | 25196 | 13.78 |      |     |       |      |
|      | Share of top 15 organizations in World total output        | 19.57 | 51.06 |       |      |     |       |      |

TP=Total Papers; TC=Total Citations; CPP=Citations Per Paper; HI=h-index; ICP=International Collaborative Papers; RCI=Relative Citation Index

Hospitalier Regional Universitaire de Lille, France (33 papers), Mansoura University, Egypt (30 papers), University Medical Center, Utrecht, Netherlands (29 papers), Trehan University of Medical Sciences, Iran and University of Athens, Greece (25 papers each) during 2007-16.

**Five organizations** registered impact above the group average of 35.54 citations per publication during 2007-16: University Of Adelaide, Australia (94.72), Pen State College of Medicine, USA (85.0), University of Athens, Greece (76.4), Centre Hospitalier Regional Universitaire de Lille, France (64.3) and University Medical Center, Utrecht, Netherlands (47.41). **Eight organizations** registered h-index above the group average of 11.2: University Medical Center, Utrecht, Netherlands (18), Aristotle University of Thessaloniki, Greece (15), University of Athens, Greece, Centre Hospitalier Regional Universitaire de Lille, France and Universidad de Chile, Chile (13 each), Pen State College of Medicine, USA, University of Athens, Greece and Mansoura University, Egypt (12 each) during 2007-16.

**Seven organizations** contributed international collaborative publications share above the group average of 29.33%: University Of Adelaide, Australia (66.67%), University Medical Center, Utrecht, Netherlands (62.07%), Pen State College of Medicine, USA (45.0%), Sun Yat-Sen University, China (40.0%), Universidad de Chile, Chile (38.89%), Aristotle University of Thessaloniki, Greece (32.5%), Imperial College, London, U.K during 2007-16.

**Five organizations** registered the relative citation index above the group average (2.61) of all organizations: University Of Adelaide, Australia (6.87), Pen State College of Medicine, USA (6.17), University of Athens, Greece (5.54), Centre Hospitalier Regional Universitaire de Lille, France (4.67) and University Medical Center, Utrecht, Netherlands (3.44) during 2007-16.

### Top 15 Most Productive Authors

The research productivity of top 15 most productive authors pursuing in polycystic ovary syndrome varied from 13 to 33 publications in 10 years. Together they account for 15.25% (279) global share and 49.79% (12544) citation share during 2007-16. The scientometric profile of these 15 authors is presented in Table 6.

**Eight authors** registered publications output above the group average of 18.6: D. Dewailly (33 papers), E. Diamantri-Kandarakis (23 papers), S. Franks and R.S. Legro (22 papers each), B.C.J.M. Fauser and R. Homburg (21 papers each), I. Katskis and S. Palomba (19 papers each) during 2007-16.

**Five authors** registered impact above the group average of 44.46 citations per publication: R.S. Legro (92.05), E. Carmina (92.0), E. Diamantri-Kandarakis (71.52), D. Dewailly (64.3) and B.C.J.M. Fauser (52.71) during 2007-16.

**Seven authors** registered h-index above the group average of 11.27 of all authors: B.C.J.M. Fauser (23), R.S. Legro, E. Diamantri-Kandarakis, D. Dewailly and S. Palomba (13 each), S. Franks and R. Homburg (12 each) during 2007-16.

**Seven authors** contributed international collaborative publications share above the group average of 30.82% of all authors: B.C.J.M. Fauser and R. Homburg (66.67% each), Z.J. Chen and E. Carmina (53.85% each), R.S. Legro (40.91%), A.H. Balen (40.0%) and I. Katskis (31.58%) during 2007-16.

**Five authors** registered the relative citation index above the group average (3.11) of all authors: E. Carmina and R.S. Legro (6.73 each), E. Diamantri-Kandarakis (5.23), D. Dewailly (4.70) and B.C.J.M. Fauser (3.85) during 2007-16.

### Medium of Research Communication

Of the total global research output on polycystic ovary syndrome, 98.03% (1793) appeared in journals. The top 15 most productive journals each reported 16 to 159 papers, together accounted for 37.20%

**Table 6: Scientometric Profile of Top 15 Most Productive Authors in Polycystic Ovary Syndrome during 2007-16.**

| S.No | Name of the Author     | Affiliation of the Author   | TP    | TC    | CPP   | HI    | ICP | %ICP  | RCI  |
|------|------------------------|---|-------|-------|-------|-------|-----|-------|------|
| 1    | D.Dewailly             | Hospital Jeanne de Flandre, Universite Lille, France                            | 33    | 2122  | 64.30 | 13    | 8   | 24.24 | 4.70 |
| 2    | E.Diamantri-Kandarakis | University of Athens, Greece  | 23    | 1645  | 71.52 | 13    | 3   | 13.04 | 5.23 |
|      | S.Franks               | Institute of Reproductive & Development Biology, Imperial College, London, U.K. | 22    | 676   | 30.73 | 12    | 6   | 27.27 | 2.25 |
| 4    | R.S.Legro              | Penn State College of Medicine, USA   | 22    | 2025  | 92.05 | 13    | 9   | 40.91 | 6.73 |
| 5    | B.C.J.M.Fauser         | University Medical Center Heidelbergglannser. Utrecht, Netherlands              | 21    | 1107  | 52.71 | 23    | 14  | 66.67 | 3.85 |
| 6    | R.Homburg              | Barzilai Medical Center, Ashkelon, Israel                                       | 21    | 397   | 18.90 | 12    | 14  | 66.67 | 1.38 |
| 7    | I.Katskis              | Aristotle University of Thessaloniki, Greece                                    | 19    | 426   | 22.42 | 8     | 6   | 31.58 | 1.64 |
| 8    | S.Palomba              | University Magna Graecia of Catanzaro, Italy                                    | 19    | 648   | 34.11 | 13    | 1   | 5.26  | 2.49 |
| 9    | S. Catteau-Jonard      | Hopital Jeanne de Flandre, CHRU, France   | 17    | 450   | 26.47 | 8     | 0   | 0.00  | 1.93 |
| 10   | A.H. Balen             | Leeds General Infirmary, Leeds, U.K.  | 15    | 431   | 28.73 | 8     | 6   | 40.00 | 2.10 |
| 11   | F.Orio                 | University Parthenope of Naples, Italy  | 14    | 548   | 39.14 | 11    | 2   | 14.29 | 2.86 |
| 12   | D.Panidis              | Aristotle University of Thessaloniki, Greece                                    | 14    | 180   | 12.86 | 7     | 2   | 14.29 | 0.94 |
| 13   | E.Carmina              | University of Palermo, Italy  | 13    | 1196  | 92.00 | 8     | 7   | 53.85 | 6.73 |
| 14   | Z.J. Chen              | Provincial Hospital Affiliated to Shandong University, Jinan, China             | 13    | 175   | 13.46 | 9     | 7   | 53.85 | 0.98 |
| 15   | A.Falbo                | Graecia of Catanzaro, Italy   | 13    | 518   | 39.85 | 11    | 1   | 7.69  | 2.91 |
|      |                        | Total of 15 authors   | 279   | 12544 | 44.96 | 11.27 | 86  | 30.82 | 3.11 |
|      |                        | Total of World  | 1829  | 25196 | 13.78 |       |     |       |      |
|      |                        | Share of top 15 authors in World total output                                   | 15.25 | 49.79 |       |       |     |       |      |

TP=Total Papers; TC=Total Citations; CPP=Citations Per Paper; HI=h-index; ICP=International Collaborative Papers; RCI=Relative Citation Index

**Table 7: Top15 Most Productive Journals in in Polycystic Ovary Syndrome during 2007-16**

| Name of the Journal   | Number of Papers |         |         |
|---|------------------|---------|---------|
|   | 2007-11          | 2012-16 | 2007-16 |
| Fertility & Sterility   | 115              | 44      | 159     |
| Human Reproduction  | 47               | 37      | 84      |
| Gynecological Endocrinology   | 34               | 48      | 82      |
| Reproductive Biomedicine Online                                     | 35               | 21      | 56      |
| Archives of Gynecology & Obstetrics                                 | 21               | 31      | 52      |
| Journal of Clinical Endocrinology & Metabolism                      | 25               | 16      | 41      |
| European Journal of Obstetrics, Gynecology and Reproductive Biology | 11               | 21      | 32      |
| Seminars in Reproductive Medicine                                   | 16               | 9       | 25      |
| Journal of Assisted Reproduction & Genetics                         | 3                | 21      | 24      |
| Human Reproduction Update   | 11               | 11      | 22      |
| Reproductive Biology & Endocrinology                                | 6                | 16      | 22      |
| Obstetrics, Gynecology and Reproductive Medicine                    | 9                | 9       | 18      |
| Journal of Pediatric Adolescent Gynecology                          | 9                | 8       | 17      |
| Middle East Fertility Society Journal                               | 7                | 10      | 17      |
| Clinical Endocrinology  | 10               | 6       | 16      |
| Total of 15 journals  | 359              | 308     | 667     |
| Total global journal output   | 869              | 924     | 1793    |
| Share of top 15 journals in global journal output                   | 41.31            | 33.33   | 37.20   |

publications share (667 papers) of total journal papers during 2007-16. The publication share of top 15 most productive journals dropped from 41.31% to 33.33% between 2007-11 and 2012-16. *Fertility & Sterility Letters* emerged as the top most productive journal in polycystic ovary syndrome (with 159 papers), followed by *Human Reproduction* (84 papers), *Gynecological Endocrinology* (82 papers), *Reproductive Biomedicine Online* (56 papers), etc. during 2007-16 (Table 7).

### Highly Cited Papers

Of the total global output of 1829 papers on polycystic ovary syndrome, only 27 were identified as highly cited papers, each with high-end citations ranging from 100 to 727 citations per paper during 2007-16. These 27 highly cited papers together cumulated 5556 citations in 10 years, and averaged 205.78 citations per paper. Of the 27 highly cited papers, 4 resulted from single stand-alone organizations (as non-collaborative papers) and 23 from collaborative participation across two or more organizations (as collaborative papers, 10 from across national collaboration and 13 from across international collaboration). Among international collaborative papers, the country participation was the largest from USA (11 papers), followed by Italy (11 papers), Netherlands (6 papers), France, Greece and Australia (4 papers each), Germany (3 papers), U.K. and Netherlands (2 papers each), Spain, Sweden, Bosnia & Herzegovina, Serbia, Turkey, Israel, Belgium, China, Austria and Switzerland's (1 paper each). The leading organizations contributing to high cited papers include University Medical Center, Utrecht, Netherlands (6 papers), Centre Hospitalier Regional Universitaire de Lille, France (4 papers), Aristotle University of Thessaloniki, Greece and University of Athens Medical Center, Greece (3 papers each), University of Athens, Greece and Penn State College of Medicine, USA (2 papers each), etc. The leading authors contributing to high cited papers include B.C.J.M.Fauser (5 papers), D.Dewailly and E.Diamantri-Kandarakis (4 papers each), R.S.Legro (3 papers), E.Carmina (2 papers), etc. These 27 highly cited papers resulted from research pursuits by a total of 124 authors and 92 organizations. Of the 27 highly cited papers, 16 were published as articles, 10 a review papers and 1 as short survey. These 27 highly cited papers appeared in 15 journals: *Human Reproduction Update* published 8 papers, 3 papers each in *Fertility & Sterility* and *Human Reproduction*, 2 papers each in *Endocrine Reviews* and *Clinical Endocrinology*, and 1 paper each in *American Journal of Physiology, Endocrinology & Metabolism*, *American Journal of Obstetrics & Gynecology*, *Biology of Reproduction*, *Endocrinology*, *Endocrinology & Metabolism*, *Expert Reviews in Molecular Medicine*, *Journal of Endocrinology & Metabolism*, *The Lancet*, *Nature Reviews Endocrinology* and *Trends in Endocrinology & Metabolism*.

### SUMMARY & CONCLUSION

This paper provides a quantitative and qualitative description of polycystic ovary syndrome research by analyzing global publications data on the subject sourced from Scopus database covering 10 years period during 2007-16. This study finds that polycystic ovary syndrome is still a young and growing research field. Its global literature in 10 years did not grow as high as expected but it could cumulate its global output to 1829 publications only with negative -.58% annual growth rate during 2007-16. The average citation per paper registered by global publications on polycystic ovary syndrome was 13.78 during 2007-16, which decreased from 19.60 to 8.37 from 2007-11 to 2012-16. The decrease in citations per paper during 2012-16 was because publications in the later period could get less number of years to receive citations.

Currently, the distribution of polycystic ovary syndrome publications output is highly skewed. The 10 most productive countries in the world account for the largest 70.31% and 96.97% share of global publications

and citation output during 2007-16. USA, China and U.K. are seen the world leaders in polycystic ovary syndrome research output together accounting for 37.18% global publication share and 50.71% citation share, whereas other contributing countries contributed comparatively less global share, with Italy and Turkey (with share from 5.19% to 6.40%) and India, Iran, Greece, Egypt and France (with share from 4.05% to 4.54%) during 2006-17. Greece, France and Italy have made the higher citation impact among top 10 countries with citation per paper of 33.90, 32.54 and 32.27.

Of the top 15 most productive global organizations, which account for nearly 19.57% and 51.06% of global publication and citation share, 10 are from developed countries and 5 from developing countries. Organizations from Australia, USA, Greece and France have registered comparatively higher citation impact per paper compared to other countries. As a result, the organizations from these countries among top 10 registered the relative citation index above the group average of all organizations: University Of Adelaide, Australia (6.87), Pen State College of Medicine, USA (6.17), University of Athens, Greece (5.54), Centre Hospitalier Regional Universitaire de Lille, France (4.67) and University Medical Center, Utrecht, Netherlands (3.44) during 2007-16. This data demonstrates that research collaboration at international level did play a big role in achieving citation quality of these organizations from Australia, Netherlands, USA, etc. University Of Adelaide, Australia (66.67%) contributed the largest international collaborative publications share, followed by University Medical Center, Utrecht, Netherlands (62.07%), Pen State College of Medicine, USA (45.0%), Sun Yat-Sen University, China (40.0%), Universidad de Chile, Chile (38.89%), Aristotle University of Thessaloniki, Greece (32.5%), Imperial College, London, U.K during 2007-16.

Of the top 15 most productive authors, which account for nearly 15.25% and 49.796% of global publication and citation share, 13 are from developed countries and 2 from developing countries. Authors from USA, Italy, Greece, France and Netherlands registered comparatively higher citation impact per paper compared to other countries. As a result, the authors from these countries among top 10 registered the relative citation index above the group average of all organizations: E. Carmina (Italy) and R.S. Legro (USA) (6.73 each), E. Diamantri-Kandarakis(Greece) (5.23), D. Dewailly (France) (4.70) and B.C.J.M. Fauser (Netherlands) (3.85) during 2007-16.

Both USA and Italy have emerged as world leaders in quality of research in polycystic ovary syndrome accounting for 22 of the top 27 highly cited papers in the field. These 27 highly cited papers together cumulated 5556 citations in 10 years, and averaged 205.78 citations per paper. Of the 27 highly cited papers, 4 resulted from single stand-alone organizations (as non-collaborative papers) and 23 from collaborative participation across two or more organizations (as collaborative papers, 10 from across national collaboration and 13 from across international collaboration). These 27 highly cited papers resulted from research pursuits by a total of 124 authors and 92 organizations. The leading organizations contributing to high cited papers include University Medical Center, Utrecht, Netherlands (6 papers), Centre Hospitalier Regional Universitaire de Lille, France (4 papers), Aristotle University of Thessaloniki, Greece and University of Athens Medical Center, Greece (3 papers each), etc. The leading authors contributing to high cited papers include B.C.J.M.Fauser (5 papers), D.Dewailly and E.Diamantri-Kandarakis (4 papers each), R.S.Legro (3 papers), E.Carmina (2 papers), etc. These 27 highly cited papers appeared in 15 journals: *Human Reproduction Update* published 8 papers, 3 papers each in *Fertility & Sterility* and *Human Reproduction*, 2 papers each in *Endocrine Reviews* and *Clinical Endocrinology*, and 1 paper each in the remaining journals.

Conclude that Polycystic ovary syndrome can cause distressing symptoms of hyperandrogenism (such as hirsutism), may impair fertility and is associated with the metabolic syndrome. Management has traditionally been guided by symptoms or by the wish to conceive, but prevention of the possible long-term consequences of the metabolic disturbance characteristic of anovulatory women with PCOS is now an important element of management. Important elements in the management of PCOS include focusing on the treatment of infertility, menstrual regulation, the treatment of symptoms of hyperandrogenism and the prevention of possible consequences of the metabolic disturbance. Proper diagnosis and management of PCOS is also essential to address patient concerns but also to prevent future metabolic, endocrine, psychiatric, and cardiovascular complications. There is need to develop guidelines at the national level for the assessment and management of reproductive-age adolescents and women with PCOS, including women with PCOS who are experiencing infertility. The guideline will apply in all health care settings and to a broad audience, including: community care practitioners; nurses; endocrinologists; obstetricians and gynaecologists; allied health professionals, psychologists, dietitians, exercise physiologists, etc. There is need also to build a National Center for Excellence in Polycystic Ovary Syndrome on the pattern of Australian model, which should generate new knowledge for improved health outcomes; ensure effective transfer of research into health policy and practice; develop the health and medical research workforce; and encourage participation and collaboration.

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## Appendix 1. List of Top 10 High Cited Papers

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