

Improving the Trustworthiness of Published Information

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3 **Letter to the Editor: Improving the Trustworthiness of Published Information**
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36 **Disclosures: All authors declare that we: 1) have provided or do provide ethical medical**
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3 Dear Editor,
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5 We thank Dr. Schofferman and colleagues for warning readers about the many perils of ghost
6 and guest authorship [1]. The exact prevalence of these unethical practices is difficult to
7 determine partly because of the use of different definitions and lack of well-designed studies.
8 Schofferman et al are to be commended for selecting standard definitions and for citing serial
9 surveys suggesting that the prevalence has declined over time. Unfortunately, ghosting and other
10 unethical authorship practices have not disappeared. As members of the Global Alliance of
11 Publication Professionals (GAPP; www.gappteam.org), we appreciate their recognition of
12 professional medical writers as “legitimate participants in scientific papers provided their role is
13 transparent.” We wish to expand on their commentary by adding recent references that may
14 provide insight about how to exorcise the ghosts from published medical information.
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32 Schofferman et al referred to authorship guidelines from the International Committee of Medical
33 Journal Editors (ICJME) [2], which are used by more than 500 medical journals including *Pain
34 Medicine*. As noted [1], “all who contribute substantially should be listed as authors, and all who
35 are listed as authors should have contributed substantially.” We wish to elaborate on these
36 criteria because the new fourth criterion aims to better promote integrity. Accordingly,
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44 “authorship be based on the following 4 criteria:

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- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
 - Drafting the work or revising it critically for important intellectual content; AND
 - Final approval of the version to be published; AND

- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved [2].”

This new fourth criterion should help to prevent guest authorship. At the same time, this criterion can prevent some professional medical writers, statisticians, and others who make substantial contributions from fulfilling all four authorship criteria. In this situation, such individuals should be acknowledged along with their funding. This practice is evidence of adherence to ICMJE guidelines [2] rather than an indication of ghosting or other inherently unethical activity by individuals who may be employed or contracted by the company that sponsored the research.

Pain Medicine's author guidelines begin with a link to an author toolkit [3] produced by the Medical Publishing Insights and Practices (MPIP) Initiative, which is co-sponsored by the pharmaceutical industry and the International Society for Medical Publication Professionals (ISMPP). Since that practical resource was published, new guidelines have been established, such as the third in a series of good publication practices for communicating company-sponsored medical research [4]. These and other reporting guidelines are likely to continue to evolve and are the remit of a group known as EQUATOR (Enhancing the QUALity and Transparency Of health Research; <http://www.equator-network.org>).

Staying abreast of guidelines is challenging, especially for authors whose primary responsibilities do not include manuscript preparation. Busy clinicians and research scientists may wish to enlist the assistance of professional medical writers to improve awareness of and

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3 compliance with guidelines. This approach is supported by recent survey findings [5-7]. MPIP
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5 [5] studied four stakeholder groups: clinical investigators (n = 145), journal editors (n = 108),
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7 publication professionals (n = 132), and medical writers (n = 113). Higher percentages of
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9 publication professionals (97%), journal editors (89%), and medical writers (88%) were familiar
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11 with authorship criteria than were clinical investigators (49%). Similarly, more publication
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13 professionals (70%), journal editors (59%), and medical writers (51%) complied with these
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15 guidelines than did clinical investigators (28%) [5]. Findings were similar in a survey of nearly
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17 500 participants representing different stakeholder groups conducted by another international
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19 group [6]. Conformity with reporting guidelines was one of the services most valued by authors
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21 who had collaborated with professional medical writers [7].
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29 The recommendation by Schofferman et al to take a proactive stance against unethical authorship
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31 practices merits repeating. We encourage authors to partner with other stakeholders to promote
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33 the quality and reliability of published medical information, and to review our proposals for this
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35 partnership [8]. For example, authors should expect professional medical writers to be aware of
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37 current guidelines, and to follow a process that ensures substantial intellectual contributions by
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39 authors throughout manuscript preparation. To prevent ghost and guest authorship, the exact role
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41 of each author can be described in the manuscript, as suggested by Schofferman et al [1].
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45 Furthermore, authors should demand full transparency, including disclosure of both substantial
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47 contributions and potential conflicts of interest from all individuals, including those who do not
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49 fulfill authorship criteria. By being aware of and committing to evolving guidelines, we can
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51 collaborate to improve the trustworthiness of published medical information.
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