Patients with CS may first present to dermatologists with a wide and heterogeneous spectrum of dermatological features, which should be recognized and lead to a prompt referral to an endocrinologist. A timely diagnosis and treatment of CS is essential, not only to prevent the metabolic and cardiovascular complications, but also to improve the patient's quality of life. As illustrated here, CS-related dermatologic manifestations may significantly and rapidly improve after prompt therapy targeting the cortisol overproduction.

AUTHORS CONTRIBUTION

MIA: Conception of the manuscript.
PMG, PM: Critical review of the manuscript.

PROTECTION OF HUMANS AND ANIMALS

The authors have followed the protocols of their work center on the publication of data. The data was anonymized and none of the authors had access to patient identification. The study was conducted in accordance with the Helsinki Declaration updated in 2013.

DATA CONFIDENTIALITY

The authors declare having followed the protocols in use at their working center regarding patients' data publication.

INFORMED CONSENT OF THE PATIENT

Obtained.

COMPETING INTERESTS

All authors declared no competing interests.

FUNDING SOURCES

The authors received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

REFERENCES

1. Nieman LK, Biller BM, Findling JW, Newell-Price J, Savage MO, Stewart PM, et al. The diagnosis of Cushing's syndrome: an Endocrine Society clinical practice guideline. J Clin Endocrinol Metab. 2008;93:1526-40.
2. Lefkowitz EG, Cossman JP, Fournier JB. A case report of Cushing's disease presenting as hair loss. Case Rep Dermatol. 2017;9:45-50.
3. Valassi E, Santos A, Yaneva M, Tóth M, Strasburger CJ, Chanson P, et al. The European Registry on Cushing's syndrome: 2-year experience. Baseline demographic and clinical characteristics. Eur J Endocrinol. 2011;165:383-92.
4. Thom E. Stress and the hair growth cycle: cortisol-induced hair growth disruption. J Drugs Dermatol. 2016;15:1001-4.

Maria Inês ALEXANDRE✉[1], Pedro Miguel GARRIDO[2], Pedro MARQUES[1]
1. Serviço de Endocrinologia, Diabetes e Metabolismo. Hospital de Santa Maria. Centro Hospitalar Universitário Lisboa Norte. Lisboa. Portugal.
2. Serviço de Dermatologia. Hospital de Santa Maria. Centro Hospitalar Universitário Lisboa Norte. Lisboa. Portugal.
✉ **Autor correspondente:** Maria Inês Alexandre. mariaines.f.alexandre@gmail.com
Recebido/*Received*: 08/06/2022 - **Aceite/*Accepted*:** 14/07/2022 - **Publicado/*Published*:** 01/09/2022

https://doi.org/10.20344/amp.18689

Ethics in Authorship: Considerations and Concerns

Reflexão sobre Ética em Autoria Científica

Keywords: Authorship; Ethics; Retraction of Publication as Topic; Scientific Misconduct
Palavras-chave: Autoria; Ética; Má Conduta Científica; Retratação de Publicação como Assunto

Dear Editor,

The exponential proliferation of scientific publications in recent decades was accompanied by emerging issues related to ethics in research and publication. In the last five years, Retraction Watch identified 485 retracted papers involving concerns related to authorship,[1] with the more frequent issues being disputes concerning right of authorship, fake authorship, forged authorship, bought authorship, ghost authorship and honorary authorship.[2]

Local ideological concepts of authorship criteria in many clinical and research departments are outdated and do not comply with current international recommendations. Many authors fail to adhere to ethical principles or may not be aware of the definitions of authorship and its criteria. The same issues apply to conference presentations[3] which in Portugal may be decisive for medical career progression.

Ethical transgressions related to authorship discredit scientific publications and jeopardize the reputation of authors. We are aware of several widespread misconceptions and unethical historical practices in clinical departments: 1) bestowing authorship to an individual who performed diagnostic tests (e.g. radiology, histology) in the setting of everyday clinical care of patients; 2) the widespread practice of including the head of the department as the senior author in conference papers but also in research publications; 3) bestowing authorship to physicians responsible for the clinical care of patients included in research, despite not participating in the study conception, interpretation of data and draft of the manuscript; 4) extensive reciprocal authorship sharing among residents when submitting conference papers.

There are several guidelines in different fields of research which define the criteria for authorship. The most widely used in the scientific medical literature originate from the International Committee of Medical Journal Editors and comprise all of the following: 1) substantial contribution to the study conception and design, or data acquisition, or analysis and interpretation; 2) drafting or revising the article; 3) approval of the final version; 4) agreement to be accountable for all aspects of the work.[4] Strategies which may help to avoid authorship misconduct include definition of authorship prior to study initiation, use of the Acknowledgments section for collaborators who do not fulfil authorship criteria, review of journal authorship guidelines before submitting the manuscript, and increasing awareness of the types of authorship misconduct in the biomedical community.[5]

The topic of ethics and good practices in publication represents a touchstone for science production and communication. It should be included not only in undergraduate but especially in postgraduate medical curricula, in order to honour science and the academia.

AUTHORS CONTRIBUTION

IP: Conception and design of the work; literature research; first draft of the manuscript.

JP: Literature research; approval of the final version.

FN: Conception and design of the work; approval of the final version.

COMPETING INTERESTS

IP: Received payment or honoraria for manuscript writing from Roche (InfoCancro) and received support for congress fees and/or travel grants from Roche and from Gilead.

JP: Declares no competing interests.

FN: Received payment or honoraria from Intercept and Bayer for scientific lectures, received support for congress fees and/or travel grants from Gilead, and participated on the Intercept, Bayer and Iqvia advisory boards.

FUNDING SOURCES

The authors received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

REFERENCES

1. Retraction Watch Database. [cited 2022 Jul 17]. Available from: http://retractiondatabase.org/.
2. Schroter S, Montagni I, Loder E, Eikermann M, Schäffner E, Kurth T. Awareness, usage and perceptions of authorship guidelines: an international survey of biomedical authors. BMJ Open. 2020;10:e036899.
3. Foster C, Wager E, Marchington J, Patel M, Banner S, Kennard NC, et al. Good practice for conference abstracts and presentations: GPCAP. Res Integr Peer Rev. 2019;4:11.
4. International Committee of Medical Journal Editors. Defining the role of authors and contributors. [cited 2021 Sep 22]. Available from: http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html.
5. Albert T, Wager E. How to handle authorship disputes: a guide for new researchers. The Cope Report 2003. [cited 2022 Jul 17]. Available from: https://publicationethics.org/node/19906.

Inês PINHO✉[1], João PINHO[2], Filipe NERY[3,4,5]

1. Unidade de Hepatologia. Departamento de Medicina Interna. Centro Hospitalar de Trás-os-Montes e Alto Douro. Vila Real. Portugal.
2. Department of Neurology. University Hospital RWTH Aachen University. Aachen. Germany.
3. Unidade Intermédia Médica. Serviço de Cuidados Intensivos. Centro Hospitalar Universitário do Porto. Porto. Portugal.
4. Instituto de Ciências Biomédicas Abel Salazar. Universidade do Porto. Porto. Portugal.
5. EpiUnit. Instituto de Saúde Publica. Universidade do Porto. Porto. Portugal.

✉ **Autor correspondente:** Inês Pinho. inesferreirapinho@gmail.com

Recebido/*Received*: 30/05/2022 - **Aceite/*Accepted*:** 21/07/2022 - **Publicado/*Published*:** 01/09/2022

https://doi.org/10.20344/amp.18646