

Promoting Ethical Integrity in Authorship Attribution: Who Can Help More?

Promover a Integridade Ética na Atribuição de Autoria: Quem Pode Ajudar Mais?

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Acta Med Port 2023 Jun;36(6):381-382 • <https://doi.org/10.20344/amp.20032>

Keywords: Authorship; Editorial Policies; Ethics; Publications
Palavras-chave: Autoria; Ética; Políticas Editoriais; Publicações

Although more than 40 years have passed since the International Committee of Medical Journal Editors (ICMJE) included authorship criteria in the guidelines that are most used by authors, editors and others involved in peer review and biomedical publishing (the *Uniform Requirements for Manuscripts Submitted to Biomedical Journals*, currently *Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals*), unethical authorship practices are exceedingly prevalent in scientific publishing, even in the most prestigious research institutions and journals.^{1,2}

Used correctly, authorship establishes credit, responsibility and accountability for scientific content and conclusions reported in biomedical publications. Conversely, one of the most common forms of ethical misconduct related to authorship is misappropriation of authorship, in which people who have not made substantial contributions to the work are listed as authors. Some terms of the literature are often used interchangeably or express different characteristics of this ethical abuse: guest authorship, honorary authorship, gift authorship, courtesy authorship and coercive authorship.^{1,3}

A recent study investigated what 1336 young researchers from five European countries (Denmark, Hungary, Ireland, Portugal, and Switzerland) experience when granting guest authorships to more powerful researchers. The study reported that approximately three in 10 had granted at least one guest authorship to 'a person in power', with half of these indicating that they had done it because they had been told to do so by that person.¹ Another paper published recently in *Acta Médica Portuguesa* expressed concerns about unethical historical practices in clinical departments, including the widespread practice of listing the head of the department as the senior author in conference papers and research publications.⁴ One must recall, however, that senior researchers or heads may have legitimate arguments for inclusion within the authorship if they show a sufficient

level of involvement and/or responsibility.

The literature shows that these unethical practices have several causes, including but not limited to the coercive influence of the senior researchers or heads: the belief that the misappropriating person deserves authorship; the belief that it was common practice within the field; a wish to maintain a good relationship with the senior person; economic reasons to justify obtained grants or new funding by including senior researchers in the manuscripts; retribution for resources (e.g., tissues or equipment) provided for the study; the competitive environment known as the 'publish or perish' dilemma; reciprocation of favors for previous authorships; and also nepotism.^{1,5}

Authorship misuse may also occur because of ignorance or insufficient awareness of the authorship rules. In a very large international survey of 3859 corresponding authors of research papers from 93 countries, submitted in 2014 to 18 BMJ journals, the authors were asked to describe their current authorship practices. Overall, only 34% reported that their institution had an authorship policy providing criteria for authorship, and only 74% were 'very familiar' with the ICMJE authorship criteria.⁵

We, as editors, believe that an informed scientific community can better face the challenges surrounding authorship issues. There is still much to be done to reduce the persisting inadequate practices of scientific authorship that resist the efforts of the guidance and resources made available by organizations such as the ICMJE and the Committee on Publication Ethics (COPE).

In our journal we believe we comply with the best practices in publication ethics. For instance, our editorial activity is aligned with the rules of the ICMJE and COPE, including the guidelines on authorship recommended by the ICMJE and the requirement of a statement of individual contributions signed by each author; we are also alert to the signs that might indicate authorship problems and we take actions when authorship problems are detected; and we require

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Recebido/Received: 12/04/2023 - **Aceite/Accepted:** 12/04/2023 - **Publicado Online/Published Online:** 05/05/2023 - **Publicado/Publicated:** 01/06/2023

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authors to disclose all relevant financial and non-financial relationships and activities, as well as any conflicts of interest, using the ICMJE Disclosure Form.

The main objective of this editorial is to add one step to the ethical authorship in biomedical publication, and appeal for a greater involvement of senior researchers and heads of the clinical departments in facilitating and promoting ethical integrity in authorship attribution.

First, we suggest that ICMJE authorship criteria should be regularly presented and discussed in clinical departments and research unit meetings, including discussions of practical examples and problematic cases, for example those of their own units or those available in the COPE website. Second, clinical departments and research units should strive to develop an explicit authorship policy which

provides clear criteria for authorship aligned with the ICMJE Recommendations. At last, those in leadership positions should display an exemplary conduct on authorship practices by increasing their planning and contributions in institutional manuscripts. With an informed scientific community, transparent rules, and appropriate role models, we are convinced that the standard of authorship practices can surely only improve.

OBSERVATIONS

Commissioned; not peer reviewed.

COMPETING INTERESTS

The authors have declared that no competing interests exist.

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