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Authorship - Perspective of an ENT Resident

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Authorship - Perspective of an ENT Resident

Abstract

N/A due to perspective piece

Keywords

authorship, publication, research

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Cover Page Footnote

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Authorship – Perspective of an ENT Resident

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Academic research is a major contributor to the advancement of medical practice. A published manuscript is the medium through which research is conveyed to the medical community. Currently, single-author publications are becoming increasingly rare, whereas large, multicenter trials and their associated publications are increasingly prevalent.¹ The concept of authorship is frequently considered but less frequently discussed. The details of authorship have become increasingly complex with the movement towards team-based research.

A large percentage of prospective and active residents are involved in research during their training, and many of their prospective employers prioritize research experience. Specifically for students, publications have been associated with increased odds of matching to surgical specialties.^{2,3} For residents seeking fellowship, priority is often given to applicants with a strong history of publications in peer-reviewed journals. The importance of research publications in applying to surgical fellowship is highlighted by Patel and colleagues,⁴ who demonstrated that more than 10% of orthopedic surgery fellowship applicants misrepresented their citations to bolster their candidacy. For trainees attempting to match into such residency and fellowship positions, the ethical standards of authorship have clear importance.

Inappropriate declaration of authorship has led to terms such as “ghost-authorship” and “gift-authorship.” The former refers to a person who contributed significantly, but was not formally recognized, whereas the latter refers to a person formally recognized despite lack of significant contribution to a scholarly project.⁵ The International Committee of Medical Journal Editors (ICMJE) proposed a set of criteria to combat such practices. Currently, four criteria are recommended for a person to be included as an author:

- 1) Significant contributions to concept or design; acquisition, analysis, or interpretation of data; AND 2) Drafting or critically editing the work for important intellectual content; AND 3) Approving the final version to be published; AND 4) Agreeing 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.⁶

Despite these criteria, problems with authorship continue to exist but are rarely discussed. In a Letter to the Editor, Lyson and Phelbert⁷ call on the academic community to recognize such issues and advocate for the maintenance of a high ethical standard for authorship. The letter highlights an example of research in which two medical students were initially omitted from the author list but were later formally included through an erratum.⁸ Additionally, Karani and colleagues⁵ reviewed medical students' experience with authorship during an NIH-funded research experience, noting only two-thirds of students indicated they clearly discussed authorship criteria and expectations during the process, and less than one-third of students indicated having prior formal training on authorship. These statistics highlight a need for academic leaders to more openly discuss authorship and teach the ICMJE guidelines to trainees.

Teaching ethical authorship to medical trainees may be a logical next-step in addressing authorship issues, however multiple dilemmas remain. No guidelines have been advanced regarding the discussion of authorship expectations. The ICMJE loosely advises that authorship discussion should occur during the planning of the work, and that appropriate modifications be made as the work progresses.⁶ Students and residents may represent a vulnerable population in these discussions, given the nature of the relationship between trainees and their research supervisors. Karani and colleagues⁵ noted that, of those medical students who indicated having concerns about authorship, over half did not raise their concerns due to fear of challenging their mentor. Research supervisors often have a position of authority over trainees, and thus the ability to influence trainees' career prospects. This power dynamic may make trainees reluctant to raise concerns about authorship.

Additionally, it is unclear who should retain the responsibility to ensure authors meet ICMJE criteria. Some journals now require each self-reported author to specify their contributions and/or formally attest they have met authorship criteria. However, many argue that journals and editors are not equipped to determine who should be included as authors, rather that it is the responsibility of the authors themselves to determine who meets criteria.^{9,10} Unfortunately, self-determination of authorship has the potential to introduce

dishonesty or bias in the deciding which contributions may be considered substantial. Similarly, concepts such as “guest-authorship” arise, in which an individual with name recognition is included as an author to enhance the likelihood of publication.¹¹ Such challenges to ethical authorship threaten the value of academic research. Unfortunately, there is not a simple solution to prevent similar improprieties.

Transparency and accountability are key tenets of ethical authorship. The ICMJE guidelines provide clear recommendations which we hope trainees can use to remove barriers to discussing authorship up-front with their collaborators and empower them to claim rightful authorship when deserving. It is the duty of academic leaders to teach these guidelines, but all members of the medical community have the responsibility to enforce authorship integrity. This helps to confer the proper respect to academic research and engender public trust in medical advancement through research. ■

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