AUTHORSHIP AND ACKNOWLEDGEMENTS

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LECTURE OUTLINE

- Introduction
- Authorship
  - criteria
  - corresponding author
  - group authors & collaborators
- Acknowledgements
- Summary

INTRODUCTION

- Requirements for authorship
- Important document by International Committee of Medical Journal Editors (ICMJE) [previously AKA "Vancouver group"]

INTRODUCTION

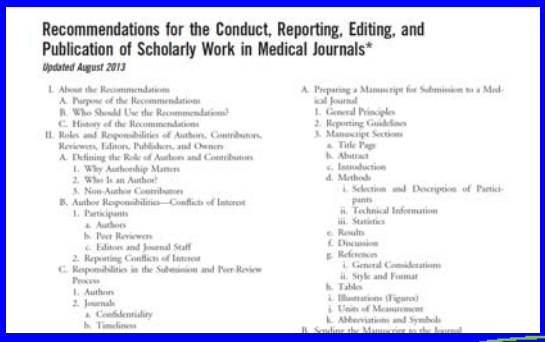
ICMJE

- Current membership
  - 11 journals (Annals Intern Med, BMJ, Chinese Med J, JAMA, Dutch Med J, NEJM, New Zealand Med J, Lancet, Revista Medica de Chile, J Norwegian Med Assoc, J Danish Med J)

INTRODUCTION

ICMJE

- Revisions panel (August 2013)
  - 11 member journals
  - US National Library of Medicine
  - World Association of Medical Journal Editors (WAME)



Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals*

Updated August 2013

I. About the Recommendations
A. Purpose of the Recommendations
B. Who Should Use the Recommendations?
C. History of the Recommendations
II. Roles and Responsibilities of Authors, Contributors, Reviewers, Editors, Publishers, and Owners
A. Defining the Role of Authors and Contributors
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b. Peer Reviewers
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"ICMJE Recommendations": August 2013
- 16 page document
- www.icmje.org

AUTHORSHIP

General principles

- All persons designated as authors should qualify for authorship
- All those who qualify as authors should be listed

AUTHORSHIP

General principles

- Each author should have
  - participated sufficiently in the work
  - to take public responsibility for the contents

AUTHORSHIP

Authorship contributions

- Authors may be asked to provide description of each one's role
- Author contribution declaration
  - recommended for journals to publish this information

Radiology

Acute Peripheral Joint Injury: Cost and Effectiveness of Low-Field-Strength MR Imaging—Results of Randomized Controlled Trial[1]

AUTHORSHIP

ICMJE criteria (2010 version)

The ICJME has recommended the following criteria for authorship; these criteria are still appropriate for journals that distinguish authors from other contributors.

- Authorship credit should be based on 1) substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; 2) drafting the article or revising it critically for important intellectual content; and 3) final approval of the version to be published. Authors should meet conditions 1, 2, and 3.

AUTHORSHIP

ICMJE criteria (2010 version)

- All 3 criteria must be met

1. Substantial contributions to
   - study conception and design or
   - acquisition of data or
   - analysis and interpretation of data

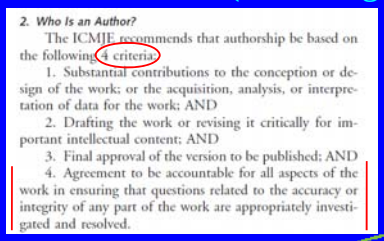
AUTHORSHIP

ICMJE criteria (2010 version)

2. Drafting the article and revising it critically for important intellectual content
3. Final approval of the version to be published

AUTHORSHIP

ICMJE criteria (new: Aug 2013)



2. Who Is an Author?

The ICMJE recommends that authorship be based on the following 4 criteria:

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
2. Drafting the work or revising it critically for important intellectual content; AND
3. Final approval of the version to be published; AND
4. 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.

AUTHORSHIP

ICMJE criteria (new: Aug 2013)

4. Each author agrees to
   - be accountable for all aspects of the work in ensuring that questions related to the accuracy and integrity of any part of the work are appropriately investigated and resolved

AUTHORSHIP

ICMJE criteria (new: Aug 2013)

New item 4

- Addresses situations in which individual authors have responded to inquiries regarding scientific misconduct involving some aspect of the study by denying responsibility

AUTHORSHIP

ICMJE criteria (new: Aug 2013)

New item 4

- Each author needs to
  - understand the full scope of work
  - know which coauthors are responsible for specific contributions
  - have confidence in coauthors' ability and integrity

AUTHORSHIP

ICMJE criteria (new: Aug 2013)

New item 4

- If any questions arise regarding the study, onus on all authors to investigate and ensure resolution of issue
- Author has to accept that any problem related to paper is his problem

AUTHORSHIP

ICMJE criteria (new: Aug 2013)

New item 4

- Balances credit with responsibility
- Establishes expectation that editors may engage all authors in helping to determine integrity of the work
- In short: emphasizes accountability

AUTHORSHIP

Authorship not justified for

- Contributors who do not meet the 4 criteria for authorship
- Consider placing them under the "Acknowledgements" section

AUTHORSHIP

Corresponding author

- Recommendations (2013)
  - new section detailing the role and responsibilities has been added
  - term "guarantor" has been dropped

AUTHORSHIP

Uniform requirements (2010)

Some journals now also request that one or more authors, referred to as "guarantors," be identified as the persons who take responsibility for the integrity of the work as a whole, from inception to published article, and publish that information.

Increasingly, authorship of multicenter trials is attributed to a group. All members of the group who are named as authors should fully meet the above criteria for authorship/contributorship.

The group should jointly make decisions about contributors/authors before submitting the manuscript for publication. The corresponding author/guarantor should be prepared to explain the presence and order of these individuals. It is not the role of editors to make authorship/contributorship decisions or to arbitrate conflicts related to authorship.

AUTHORSHIP

ICMJE Recommendations (2013)

The corresponding author takes primary responsibility for communication with the journal during the manuscript submission, peer review, and publication process, and typically ensures that all the journal's administrative requirements, such as providing details of authorship, ethics committee approval, clinical trial registration documentation, and gathering conflict of interest forms and statements, are properly completed, although these duties may be delegated to one or more coauthors. The corresponding author should be available throughout the submission and peer review process to respond to editorial queries in a timely way, and should be available after publication to respond to critiques of the work and cooperate with any requests from the journal for data or additional information should questions about the paper arise after publication. Although the corresponding author has primary responsibility for correspondence with the journal, the ICMJE recommends that editors send copies of all correspondence to all listed authors.

AUTHORSHIP

Corresponding author

- Takes primary responsibility for communication with journal including administrative matters
- Available to respond to queries and critiques post-publication, including provision of data

AUTHORSHIP

Group authorship

- Becoming increasingly common
- Many variations in how individual authors and research group names are listed in the paper's bylines

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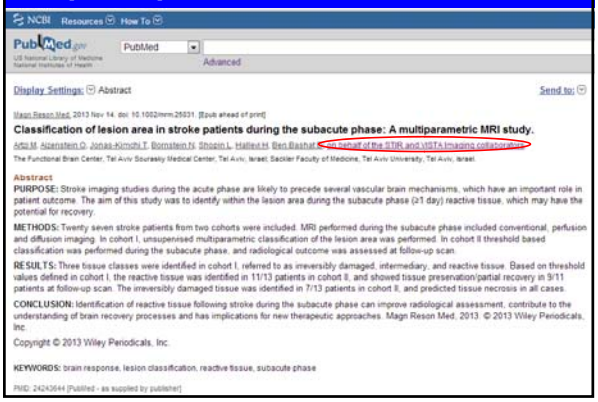
Group authorship



NCBI Resources How To

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Display Settings: Abstract — Send to:

Magn Reson Med. 2013 Nov 14. doi: 10.1002/mrm.25031. [Epub ahead of print]

Classification of lesion area in stroke patients during the subacute phase: A multiparametric MRI study.

Adi M, Alzenstein O, Jonas-Kimchi T, Bornstein N, Shopin L, Halliell H, Ben Bashat D, on behalf of the STIR and VISTA Imaging collaborators

The Functional Brain Center, Tel Aviv Sourasky Medical Center, Tel Aviv, Israel; Sackler Faculty of Medicine, Tel Aviv University, Tel Aviv, Israel.

Abstract

PURPOSE: Stroke imaging studies during the acute phase are likely to precede several vascular brain mechanisms, which have an important role in patient outcome. The aim of this study was to identify within the lesion area during the subacute phase (≥1 day) reactive tissue, which may have the potential for recovery.

METHODS: Twenty seven stroke patients from two cohorts were included. MRI performed during the subacute phase included conventional, perfusion and diffusion imaging. In cohort I, unsupervised multiparametric classification of the lesion area was performed. In cohort II threshold based classification was performed during the subacute phase, and radiological outcome was assessed at follow-up scan.

RESULTS: Three tissue classes were identified in cohort I, referred to as irreversibly damaged, intermediary, and reactive tissue. Based on threshold values defined in cohort I, the reactive tissue was identified in 11/13 patients in cohort II, and showed tissue preservation/partial recovery in 9/11 patients at follow-up scan. The irreversibly damaged tissue was identified in 7/13 patients in cohort II, and predicted tissue necrosis in all cases.

CONCLUSION: Identification of reactive tissue following stroke during the subacute phase can improve radiological assessment, contribute to the understanding of brain recovery processes and has implications for new therapeutic approaches. Magn Reson Med, 2013. © 2013 Wiley Periodicals, Inc.

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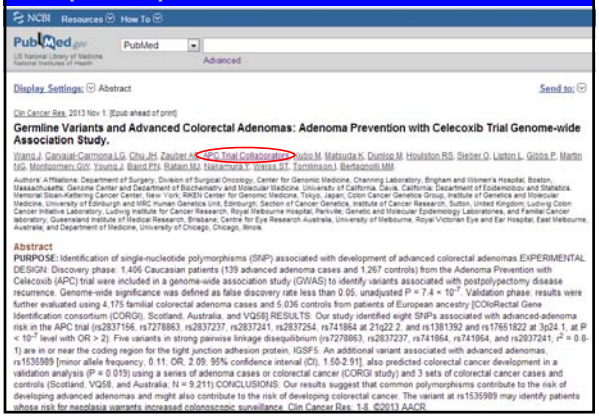
KEYWORDS: brain response, lesion classification, reactive tissue, subacute phase

PMID: 24243644 [PubMed - as supplied by publisher]

Group authorship



NCBI Resources How To

PubMed US National Library of Medicine National Institutes of Health — PubMed — Advanced

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Clin Cancer Res. 2013 Nov 1. [Epub ahead of print]

Germline Variants and Advanced Colorectal Adenomas: Adenoma Prevention with Celecoxib Trial Genome-wide Association Study.

Wang J, Carvajal-Carmona LG, Chu JH, Zauber AG, APC Trial Collaborators, Kubo M, Matsuda K, Dunlop M, Houlston RS, Sieber O, Lipton L, Gibbs P, Martin NG, Montgomery GW, Young J, Baird PN, Ratan MJ, Nakamura Y, Weiss ST, Tomlinson I, Bertagnolli MM.

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Abstract

PURPOSE: Identification of single-nucleotide polymorphisms (SNP) associated with development of advanced colorectal adenomas EXPERIMENTAL DESIGN: Discovery phase: 1,406 Caucasian patients (139 advanced adenoma cases and 1,267 controls) from the Adenoma Prevention with Celecoxib (APC) trial were included in a genome-wide association study (GWAS) to identify variants associated with postpolypectomy disease recurrence. Genome-wide significance was defined as false discovery rate less than 0.05, unadjusted $P = 7.4 \times 10^{-7}$. Validation phase: results were further evaluated using 4,175 familial colorectal adenoma cases and 5,036 controls from patients of European ancestry [COloRectal Gene Identification consortium (CORGI), Scotland, Australia, and VQ58].RESULTS: Our study identified eight SNPs associated with advanced-adenoma risk in the APC trial (rs2837156, rs7278863, rs2837237, rs2837241, rs2837254, rs741864 at 21q22.2, and rs1381392 and rs17651822 at 3p24.1, at $P < 10^{-7}$ level with OR > 2). Five variants in strong pairwise linkage disequilibrium (rs7278863, rs2837237, rs7418641, rs7418864, and rs2837241, $r^2 = 0.8$–1) are in or near the coding region for the tight junction adhesion protein, IGSF5. An additional variant associated with advanced adenomas, rs1535989 [minor allele frequency, 0.11; OR, 2.09; 95% confidence interval (CI), 1.50-2.91], also predicted colorectal cancer development in a validation analysis ($P = 0.019$) using a series of adenoma cases or colorectal cancer (CORGI study) and 3 sets of colorectal cancer cases and controls (Scotland, VQ58, and Australia; $N = 9,211$).CONCLUSIONS: Our results suggest that common polymorphisms contribute to the risk of developing advanced adenomas and might also contribute to the risk of developing colorectal cancer. The variant at rs1535989 may identify patients whose risk for neoplasia warrants increased colonoscopic surveillance. Clin Cancer Res; 1-8. ©2013 AACR.

AUTHORSHIP

Group authorship

- All authors still need to meet criteria for authorship, regardless of byline format
- Additional role of corresponding author: identify authors and non-authors

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AUTHORSHIP

Group authorship

When a large multi-author group has conducted the work, the group ideally should decide who will be an author before the work is started and confirm who is an author before submitting the manuscript for publication. All members of the group named as authors should meet all four criteria for authorship, including approval of the final manuscript, and they should be able to take public responsibility for the work and should have full confidence in the accuracy and integrity of the work of other group authors. They will also be expected as individuals to complete conflict-of-interest disclosure forms.

ICMJE Recommendations: August 2013

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AUTHORSHIP

Group authorship

ICMJE Recommendations (2013)

- National Library of Medicine
  - will index individual authors or collaborators
  - provided that there is a note indicating that the individual roles are listed elsewhere

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AUTHORSHIP

Group authorship

Some large multi-author groups designate authorship by a group name, with or without the names of individuals. When submitting a manuscript authored by a group, the corresponding author should specify the group name if one exists, and clearly identify the group members who can take credit and responsibility for the work as authors. The byline of the article identifies who is directly responsible for the manuscript, and MEDLINE lists as authors whichever names appear on the byline. If the byline includes a group name, MEDLINE will list the names of individual group members who are authors or who are collaborators, sometimes called non-author contributors, if there is a note associated with the byline clearly stating that the individual names are elsewhere in the paper and whether those names are authors or collaborators.

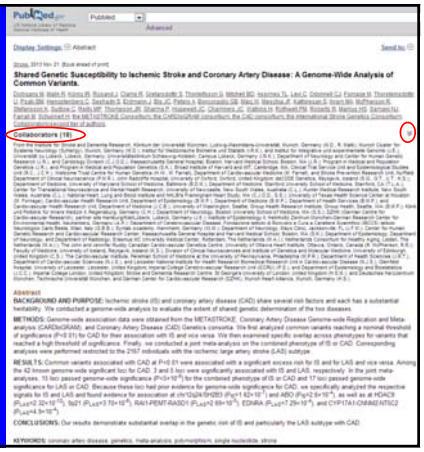
ICMJE Recommendations: August 2013

CONTRIBUTORSHIP

ICMJE Recommendations (2013)

- Introduces term "collaborators"
  - "sometimes called non-author contributors" (confusing)
  - members of a research group who have not met criteria for authorship but will be listed in MEDLINE

Group authorship with "Collaborators" link on the PubMed Abstract and Citation displays



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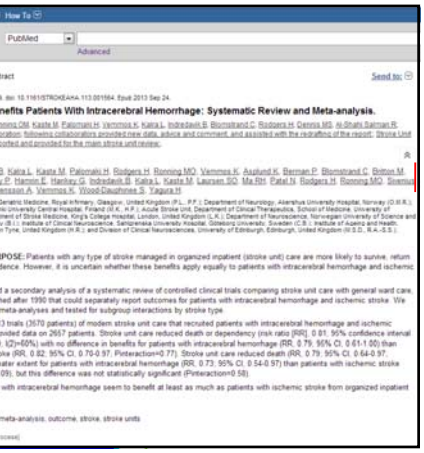

CONTRIBUTORSHIP

Non-author contributors

- Do not meet all 4 criteria for authorship and are not part of a research group
- Should be acknowledged

CONTRIBUTORSHIP

Non-author contributors

Examples

- Acquisition of funding
- General administrative support
- Writing assistance, technical editing, language editing & proofreading

ACKNOWLEDGEMENTS

General principles

- Contributors who do not meet the criteria for authorship

ACKNOWLEDGEMENTS

State specific contribution

- Clinical investigator
- Scientific advisor
- Collected data
- Provided and cared for patients

ACKNOWLEDGEMENTS

General principles

- Also acknowledge
  - financial support
  - material support
  - grant-awarding bodies

Acknowledgments: We thank Wibeke van Leeuwen and Caroline van Bavel for their support in collecting the data.

Acknowledgments: The authors are grateful to Mithat Gonen, PhD, Department of Epidemiology and Biostatistics, Memorial Sloan-Kettering Cancer Center, New York, NY, for statistical assistance with performing clustered data analyses.

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ACKNOWLEDGMENTS

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ACKNOWLEDGEMENTS

State specific contribution

- Persons who are acknowledged
  - should give written permission
  - otherwise their endorsement may be inferred

ACKNOWLEDGEMENTS

editing, and proofreading. Those whose contributions do not justify authorship may be acknowledged individually or together as a group under a single heading (e.g. "Clinical Investigators" or "Participating Investigators"), and their contributions should be specified (e.g., "served as scientific advisors," "critically reviewed the study proposal," "collected data," "provided and cared for study patients", "participated in writing or technical editing of the manuscript").

Because acknowledgment may imply endorsement by acknowledged individuals of a study's data and conclusions, editors are advised to require that the corresponding author obtain written permission to be acknowledged from all acknowledged individuals.

ICMJE Recommendations: August 2013

ACKNOWLEDGEMENT

A very special thanks to Dr [redacted] and Associate Professor Dr [redacted] for providing the supervision of this project and the editing of this article. Dr [redacted] had helped much in the statistical analysis and thus deserved a worthy mention. Last but not least I would like to thank my wife and my baby girl for their patience and tolerance during the entire period of the project.

Not appropriate!

SUMMARY

Authorship and acknowledgements

- Criteria for authorship should be met
- Others - consider listing under the acknowledgements section

SUMMARY

Authorship and acknowledgements

- Significant changes in the new ICMJE Recommendations (2013)
  - 4th criteria, corresponding authors, group authors and collaborators
  - authors and editors need to be familiar with this document