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[Commentary] Honorary Authorship in Biomedical Journals: The Endless Story

Mohamed Kandil¹

¹ Suez University

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Abstract

Honorary authorship is when a scientist has been listed as a co-author without significant contribution to the manuscript. Although unethical, honorary authorship is on the rise. The motive behind it is different for scientists at different stages of their career. It helps juniors to get more publications and thereby have faster promotions and probably better employment opportunities. For scientists more advanced in their careers, it helps getting more scientific recognition and possible financial gains. Honorary authorship is not without disadvantages. It is probably held responsible for the over inflation in the number of authors per article in different publications. On the individual level, it dilutes the contribution of each author and may ruin the reputation of an honorary author if the data integrity were found questionable after publication.

Mohamed Kandil, M.D.^{a,b,c}

^a *Professor & Acting Chairman, Department of Obstetrics and Gynecology, Faculty of Medicine, Suez University*

^b *Professor of Obstetrics and Gynecology, Faculty of Medicine, Menoufia University and*

^c *Professor of Obstetrics and Gynecology. Armed Forces College of Medicine Egypt*

Contact information

Email: mohamed.kandeel@med.menoufia.edu.eg, kandeelcando@yahoo.com

Mobile: 01005784043

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Several studies showed that the average production of publications grows exponentially with age, reaches a peak probably at midcareer then declines till retirement [1][2]. The average production of publication per author per year in biomedical field is less than one and the production rate differs according to gender. Men have higher publication rate than their female counterparts. A male researcher within medicine publishes 0.63 articles per year [3].

In order to increase the individual's number of publications, honorary or gift authorship is being a common practice in

medical literature. Honorary authorship is when a scientist has been listed as a co-author without significant contribution to the manuscript. In 1994, Shapiro et al [4] surveyed authors of 184 research articles and found a rate of approximately 26% of honorary authorships. Wislar et al in 2011 found evidence of honorary authorship in 25% of original research reports, 15% of review articles, and 11.2% of editorials published in six major medical journals published in 2008 [5]. In 2014, Kennedy et al [6] reported that in the nursing literature the prevalence of honorary authorship was 42%. This rising trend may indicate an aggressive progression of the phenomenon over few years.

Honorary authorship can be held responsible, at least partially, for the over inflation in the number of authors per article in biomedical journals [7][8]. Articles with more than five listed authors are more likely to have “honorary authors” than those with three or less authors [9]. The average number of authors per paper has increased more than 5-fold in the last century, going from 1 author per paper in 1913 to 5.4 authors per paper in 2013. By fitting the data between 1913-2013 to a polynomial function analysis, it was predicted that papers written in 2034 will feature 8 authors on average [10] if the same policy for guiding authorship continued.

Many authors whether in their early career, mid-career or seniors seek honorary authorship. The motives for this type of practice differ between junior and senior researchers. Juniors may add each other names on their publications aiming at improving their chances to get a promotion and career opportunities. They may add the name of a prominent scientist to boost the chances of getting their paper published [11]. The situation differs for more senior authors. Seniors such as chairs of departments may seek honorary authorship for more peer recognition and possible financial gains. Occasionally, honorary authors are added without their knowledge, a case in which the corresponding author should be subjected to legal and disciplinary

actions. To clarify how unethical this practice is, I would like to remind the scientific community of Professor Chamberlien, the president of the RCOG in the early 90s who resigned from his academic, editorial and presidential posts following his acceptance of honorary authorship [12] on a research paper written by one of his colleagues.

The disadvantages of honorary authorship are multiple and include:

1. It dilutes the contribution of each author.
2. Jeopardized the reputation of an honorary author if the data accuracy and integrity were found questionable after publication.
3. An Honorary eminent coauthor might increase the significance of poor research, thus altering clinical decision makings [13].
4. It falsely increases the H index and gives a false impression about the contributions of a particular author.

The International Committee of Medical Journal Editors (ICMJE) established the following criteria for authorship in biomedical research:

1. Significant involvement in study conception/design, data collection, or data analysis/interpretation;
2. Involvement in drafting or revising manuscript;
3. Approval of final version of manuscript for publication; and

4. Authors should be held responsible for accuracy and integrity of all aspects of research.

Anyone listed as an author should fulfill all the above criteria. The contribution to one criterion does not qualify for an authorship [14].

Gift authorship can be considered as a subtype of honorary authorship or as a separate entity. One example is when one scholar provides a gift for another scholar, in the form of adding his name on a manuscript, in return for a previous favor. Another example is when two scientists agree to put their names on the authors' list of each other's work for mutual benefit [15].

To the contrary, ghost authorship is omitting naming someone who significantly contributed to a manuscript [16]. The victim is usually a junior researcher and the most common cause for ghost authorship is to enhance the relative weight of each senior scholar in a particular manuscript on the expense of juniors. Every effort should be made to combat this unethical conduct [17].

To conclude, it is obvious that honorary authorship is on the rise and probably this trend will continue in the coming years if the publishing policy continues. In order to put an end to this unethical story, I invite medical editors to adopt a simple standardized author contribution index to exactly identify the role of each listed author in collaboration with the ostdifferent institutes and responsible authorities to better assess authorship credentials in medical publications. Editors should critically review all submissions with too many authors, from authors with unusual high number of publications, or skyrocketing H index to keep the ethics of scientific research.

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