

Excerpts from APAME 2015

The Asia-Pacific Association of Medical Journal Editors (APAME) is a nongovernmental, nonpartisan, and non-profit organization that supports and promotes medical journalism in the Asia-Pacific region by fostering networking, education, discussion and exchange of information and knowledge.¹ It is closely affiliated with the World Health Organization (WHO) Regional Office for the Western Pacific that hosts the Western Pacific Index Medicus (WPRIM) and the WHO Regional Office for the South East Asia that hosts the Index Medicus of the South East Asia Region (IMSEAR). The Philippine Journal of Ophthalmology (PJO) is a member of APAME and PAMJE (Philippine Association of Medical Journal Editors wherein Dr Khu is the secretary). It is also indexed by WPRIM.

The vision of APAME is to promote health care through the dissemination of high-quality knowledge and information on medicine in the Asia-Pacific region. Its mission is to contribute to the improvement of health in the Asia-Pacific region by ensuring the quality and dissemination of health-related information published in medical journals, which are utilized for better decision-making and effective delivery of health services.¹

Since 2009, APAME has been holding an annual international meeting in the region aimed at promoting collaboration and communication among medical journal editors in the region and globally; facilitating training workshops and seminars on research writing and publication, peer-review processes and editorial standards; and fostering continuing education of editors, reviewers, editorial staff, publishers, and librarians. This year, Manila played host to the recently concluded APAME International Convention held last August 24-26 at the Sofitel Philippine Plaza Hotel in Pasay City. It was well attended by members and guests of APAME, promoting collaboration and exchange of information and knowledge among the stakeholders in different countries, with the theme “*Advancing Access to Health Information and Publication: Shifting Paradigms, Trends, and Innovations.*” It was hosted by PAMJE, together with the Philippine Council for Health Research and Development (PCHRD) and the Department of Science and Technology (DOST), and the University of the Philippines Manila (UP Manila), in collaboration with the libraries of the World Health Organization (WHO) South East Asia and Western Pacific Region regional offices, and the Medical and Health Librarians Association of the Philippines (MAHLAP).

Three relevant topics discussed during the meeting are presented below.

¹<http://www.wpro.who.int/entity/apame/about/en> (accessed November 27, 2015)

Authorship

Discussion by Marissa N. Valbuena, MD, MHPed

Authorship of a scientific paper is important because of its academic and even financial implications. Authorship also implies responsibility and accountability for the published paper.

Bennet and Taylor¹ summarized the benefits of scientific authorship in the table below.

Table 1. Benefits of scientific authorship.¹

<ol style="list-style-type: none"> 1. Contribution to the progress of science 2. Personal sense of achievement 3. Evidence of an individual’s intellectual efforts 4. Contribution to an individual’s professional reputation 5. Creation of currency for: <ul style="list-style-type: none"> Academic appointment Academic promotion Research funding Entry to professional bodies

There are many problems with authorship that can be categorized to either misattribution of credit or failure to take responsibility.² Numerous organizations, universities, and research institutions abroad have established formal authorship guidelines.

The Asia-Pacific Association of Medical Journal Editors (APAME) in their convention this year in Manila adopted the International Committee of Medical Journal Editors (ICMJE) criteria for authorship.⁴

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.

The above criteria were intended to reserve authorship to those who deserve credit and can take responsibility for their work. It is also the responsibility of the authors collectively that all conform to the four criteria. An author should not only be accountable to the parts of the work he or she has personally done, but should be knowledgeable as to the contributions of the other authors and should be confident of the integrity of the work done by the other authors.⁴ Many journals now require a description of author contribution, as well as identification of the author responsible for the integrity of the work as a whole.^{4,5}

Because of the many benefits of authorship, it is open to abuse. Strange³ listed several types of authorship abuse as follows:

1. *Coercive authorship* is authorship given to individuals because of their authority over their subordinates. A common example is the inclusion of the department chair where the research was done even if he or she has little or no intellectual input to the paper.
2. *“Honorary,” “guest,” or “gift authorship”* is authorship given to individuals out of respect or friendship or to curry favour or to enhance the legitimacy of the paper.
3. *“Duplication authorship”* is the publication of the same work in multiple journals.
4. *Ghost authorship* occurs whereby individuals or organizations make significant contributions towards the writing of a scientific manuscript, yet are omitted as named authors. This commonly occurs in the setting of academic researchers hiring industry-employed writers or where senior researchers are included as primary authors without contributing to the scientific work. Or when a pharmaceutical company hires a professional writer to favourably write about their product or an academic is hired to give the paper legitimacy.

5. *Denial of authorship* occurs when individuals who are part of a collaborative study generate significant amount of data for the study and are not acknowledged.

There are contributions to the scientific paper that do not warrant granting authorship. These non-author contributions⁴ can be any of the following:

1. Acquisition of funding
2. General supervision of research group
3. Administrative support
4. Statistical support
5. Writing assistance, technical editing, language editing, and proofreading
6. Collection of clinical data (clinical investigators)

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”).

In summary, authors of scientific papers must have contributed in an intellectually significant way to the work, must be able to take public responsibility for that contribution, and must have participated in writing the manuscript.

REFERENCES

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