

◆ Authorship Conference Accompanies Annual Meeting

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CBE Views

A draft white paper, research results, and varied perspectives were presented at the 24 May conference "Authorship in Biomedical Publication: Progress and Challenges". Held in conjunction with the CBE annual meeting, the conference was organized by the CBE Authorship Task Force and cosponsored by the US Department of Health and Human Services Office of Research Integrity (ORI). Frank Davidoff, editor of *Annals of Internal Medicine*, served as chair.

Early in the conference, which took place during much of the afternoon and evening, Richard Horton, editor of *The Lancet*, briefly summarized the white paper that a working group of the Authorship Task Force had drafted. This draft, which afterward was posted on the CBE Web site (www.cbe.org/cbe), included sections titled "The Problem", "The Current Research Environment", "What Is an Author?", "Solutions", and "Further Questions". Conference participants were encouraged to submit comments once they had read the draft.

Horton noted that the "diameter of authorship" is widening. Not only do investigators design, conduct, and write up studies, he observed. Editors and peer reviewers also shape the written products. Through the Internet, readers, too, can help construct the text. And patients, for example, those with AIDS, have influenced the design of some studies.

Research Presentations

Four speakers presented findings of research. The first, Anne Hudson Jones of the University of Texas Medical Branch, reported a survey of authorship policies at medical schools. In late 1996, she sent questionnaires to deans' offices of the 125 US medical schools. Of the 119 responding, 25 said that they had adopted authorship policies, and 11 reported being in the process of developing them.

The other 3 speakers presented studies related to the "contributorship" approach proposed by Drummond Rennie and colleagues (1). In this approach, scientific papers include

identification of the specific roles played by the people who contributed to the research, and "certain named contributors take on the role of guarantor for the integrity of the entire work."

Sue van Rooyen of the *British Medical Journal* (BMJ) described research, then under way, comparing authorship lists for articles in the BMJ with contributor lists for the same articles. Definitive conclusions, van Rooyen said, could not yet be reached; however, the study shows that not everyone listed as an author meets the authorship criteria stated by the International Committee of Medical Journal Editors (the "Vancouver Group") (2).

Work toward developing a multijournal database on authorship was described by Christine Laine of *Annals of Internal Medicine* (AIM). Thus far, she said, information on authors' contributions has been collected for some 100 articles each from AIM and *Radiology*, and a taxonomy of contributions has been developed. Conclusions included the following: Authors' contributions vary by position in byline, a "substantial proportion of authors fail to fulfill the Vancouver Group criteria", and fulfillment of these criteria varies by byline position.

Veronica Yank, of the University of California, San Francisco, summarized a study of roles listed for contributors to articles in *The Lancet* (3). The 10 most common, in descending order, were "wrote paper", "designed study", "analyzed or interpreted data", "collected data", "coordinated study", "performed clinical analysis or management", "performed laboratory analysis", "performed statistical analysis", "advised on design or analysis", and "managed data". In this study, as in the others, many authors did not meet the Vancouver Group criteria.

Panel and Open Discussion

Perspectives from discussants followed. David Sharp, of *The Lancet* and the European Association of Science Editors, identifying himself as a devil's advocate, asked what evidence exists that the contributorship approach is advantageous; he suggested checking whether contributor lists for given papers included

someone playing each role that one would expect. Mario Biagioli of Harvard reflected on the role of the guarantor. Paul Friedman of the University of California, San Diego, speaking as a former associate dean, discussed how authorship and the academic reward system are related. John Overbeke of the *Dutch Medical Journal* briefly described a study on authors' contributions. And Chris Palmer of *Statistics in Medicine* discussed authorship criteria for statisticians and, more broadly, the need to involve statisticians in research.

A panel discussion featured Chris Pascal of ORI; David Korn of the Association of American Medical Colleges; and Liz Wager, then of Janssen-Cilag. Pascal said that ORI becomes involved in authorship issues mainly when allegations of scientific misconduct arise, and he speculated that uniform criteria for authorship might decrease the number of authorship disputes. Korn endorsed educating the academic community about authorship rather than prescribing criteria or establishing regulations. Wager called for communicating with the pharmaceutical industry in developing authorship policies and mentioned a preliminary effort in the pharmaceutical industry to draft publication guidelines that address authorship. (See article on page 86.)

During the long open-discussion period, comments ranged widely. A recurrent theme was that norms for authorship differ among the various sciences, which have different cultures and entail different kinds of research. A participant noted that little attention had been paid to how aspects of authorship might affect readers. The discussion included debate on whether groups should formally endorse the contributorship concept.

In his closing remarks, Davidoff noted that the issue of authorship has many dimensions worth keeping in mind—for example, those related to patients, disciplines other than biomedicine, industry, electronic authorship, various countries, such constituencies as funders, and the situations of younger and older researchers. He observed that authorship is both a cognitive and a social issue and that therefore social scientists should perhaps be more involved. He also raised the question

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of what further efforts should be pursued in research, dissemination, and implementation, and, in particular, what role CBE should take.

Information on the CBE Authorship Task Force and materials on authorship are available at the CBE Web site. To keep current on CBE activities regarding authorship, please watch the

Web site or read CBE Views.

References

1. Rennie D, Yank V, Emanuel L. When authorship fails: a proposal to make contributors accountable. *JAMA* 1997;278:579-85.
2. International Committee of Medical Journal

Editors. Uniform requirements for manuscripts submitted to biomedical journals. *N Engl J Med* 1997;336:309-15.

3. Yank V, Rennie D. Disclosure of researcher contributions: a study of original research articles in *The Lancet*. *Ann Intern Med* 1999;130:661-70.