

BIOETHICS NOTES

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"A half truth is a whole lie."
Yiddish Proverb

Ghostwriting: "an academic crime akin to plagiarism."¹

By James Elmore MD

"All listed authors on a publication must meet the authorship criteria set by the International Committee of Medical Journal Editors. Making minor revisions to a manuscript does not qualify as authorship. Participating in the creation of ghost authored manuscripts is not permitted. A ghost author is defined as someone who makes substantial contributions to writing a publication but is not listed as an author. All individuals who have made a substantial contribution to the manuscript must be listed as authors. Accurately reporting authorship is essential for maintaining research integrity, and violating any of these rules is considered research misconduct akin to plagiarism or falsification of data." *Lacasse & Leo*

It has come to the attention of the medical profession that many medical articles have been written by hired writers, called ghost writers. Interestingly, these articles have been used as a marketing tool to saturate the medical literature. It has been found that doctors did not participate in the research or writing of the manuscript but then became the author of the paper due to their Academic status or Academic affiliation. These same doctors may then testify before FDA panels on the safety of these same drugs.

One such example occurred with clinical drug trials involving Rofecoxib commonly called Vioxx. This medication is well known now as the drug associated with increased cardiovascular risks and gastrointestinal bleeding. Due to these side-effects the drug was subsequently removed from the market place by Merck. Due to this attention and litigation, there has been a focus on the authorship of the articles written about Vioxx.

What is interesting about this type of research is that not only did Merck help write the articles but they also paid

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for the research that was performed to get the medication approved by the FDA. This type of conflict of interest is well known to the medical profession. What is of utmost importance is minimizing the impact of these conflicts on the research and on the subsequent publications.

While it is may be easy to judge that drug companies should have a limited role in medical research, many of the greatest advances in drug discovery have been by physicians working with pharmaceutical companies. These discoveries include cortisone, azathioprine, allopurinol, acyclovir, aropanolol and cimetidine.

Medical innovations developed by medical professionals in association with the medical industry will continue. Thus it is important that the physician involved be allowed to publish results freely and without undue influence by industry. Currently the minor statements attached to manuscripts regarding conflict of interest for each author are inadequate. I believe that the articles themselves must give more detail with regard to the influence of industry. Ethically, it is critical to assure that conflicts of interest are minimized and explicit in order to avoid patient harm and support the principle of nonmaleficence.

The Institute of Medicine proposed in 2009 that US academic medical centers ban ghost writing. A survey published in February 2010 indicated that only 26% of these academic centers have a ban in place. This leaves a large segment of the academic and non-academic

medical centers that can still participate in ghost writing. It has been proposed that ghost written articles be considered for retraction and that authors be sanctioned if they do not cooperate with their academic medical center in dealing with new guidelines.

So what's the big deal? Doctors and nurses use the medical literature to make decisions. We have to depend upon these articles to make informed decisions to treat our patients. If the articles that are saturating the medical literature are just an infomercial, than we get nothing more than another advertisement. We have an ethical need for reliable information written by the indicated authors. This is the social contract we have between researchers, the medical profession and the community at large that ultimately needs medical services. We must not have industrial bias in our medical literature. I do not suspect that ghostwriting has been an issue in the Geisinger Health System but on principle we should not allow it just like prohibiting "pizza and pens". Ghost writing is unacceptable. Geisinger Health System should not allow it. Geisinger Research Administration is reviewing policies regarding ghostwriting and will most likely ban this practice within the Geisinger Health System.

Respectfully Submitted,

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