

Duplicate and fragmented publications: Policy and Prevention at Annals of Saudi Medicine

*Excerpts from presentation by John T. Cathey**

Duplicate and fragmented publications wastes time and effort of editorial board and reviewers. They misguide the readers and complicate meta-analysis. Peer review and editing may result in different articles from submission.

Annals of Saudi Medicine policy as regards definition of duplicate or redundant publication are consistent with “Best Practice Guidelines”. Abstracts and posters are not considered duplication but we do request the authors to disclose this prior presentation. Prior publication in another language is also acceptable but this also requires disclosure.¹

Mojon-Azzi et al in a study on redundant publications revealed that there were 22,433 redundant articles published in seventy journals. It accounted for about 1.39% of all articles published. In 5% of the articles the conclusions were modified.² Gwilym et al reported that “one in three articles published in the Journal of Bone and Joint Surgery in Britain were duplicate or redundant publications. Out of 343 articles, twenty six (7.6%) had some degree of redundancy. The practice of redundant publications appears to be less than in other surgical specialties.”³

While dealing with such redundant or duplicate publications, Annals of Saudi Medicine enforces five years publication ban for duplicate publications. If good behaviour is ensured by the authors in future, some of them may be pardoned or this sentence can be reduced. In some cases permanent publication ban is imposed for duplicate publication. In case of fragmented publications, either the articles are rejected or the authors may face a possible ban. These policy decisions have been applied by Annals of Saudi Medicine since July 2005.

* John T. Cathey MS, ELS
Managing Editor
Annals of Saudi Medicine
Riyadh, Saudi Arabia.
E-Mail: jtcathey@gmail.com, jtcathey@kfshrc.edu.sa

The authors are provided three opportunities to read the statement regarding duplicate and redundant publications. Firstly it is provided in instructions to authors. Secondly at the time of submission of manuscripts the authors have to confirm that “the manuscript has been submitted solely to this journal, is not published in press or submitted elsewhere”. They are also asked if they are considering submitting or have submitted another manuscript to the Annals of Saudi Medicine or elsewhere using the same database or relating to the same topic. Thirdly at the time of acceptance of manuscript the authors are reminded that “please note that submission of this article implied that the work has not been published previously, that it is not under consideration for publication elsewhere.”

Thanks to the facilities of internet, now it is not much difficult to find out duplicate or redundant publications. The manuscript check-in procedure we practice includes a search of Google scholar. All accepted manuscripts are checked once again at production check-in-stage. Our experience at Annals of Saudi Medicine from 2005-2007 shows that we put nineteen corresponding authors on watch-list. Eleven authors were subjected to five years ban while one author was subjected to one year ban. Because of these measures, the number of attempted duplicate submissions at Annals of Saudi Medicine has declined. In one of the recent examples, an author submitted a manuscript in June 2006 to another journal. It was accepted in October 2006 and published in February 2007. The same manuscript was submitted to Annals of Saudi Medicine in January. We asked the author whether he was considering submitting or had already submitted another manuscript to Annals of Saudi Medicine or elsewhere using the same database or relating to the same topic. The answer from the author was NO. Further investigations revealed information which is given in Table-I.

Table-1 Comparison of title, objective and results of the same study in two journals		
	<i>Published study in other journal</i>	<i>Manuscript submitted to ASM</i>
Title	Treatment of X disease. Prognostic Factors in treatment outcome	X-disease: a ten years study
Objective	To determine whether clinical and Biochemical features predict response to treatment	To determine clinical manifestation and mode of treatment
Results	Statistical analysis of prognostic Factors vs. outcome	Description of signs and symptoms, treatment -no Analysis

In the Journal A which had published the paper, the authors reported that “treatment outcome with Z was determined in 190 patients, of whom forty two were electively treated with Y after failed medical therapy. The number of patients with successful Z treatment was 158 with 32 requiring more than one dose of Z.”

In Journal B (ASM) in which the manuscript was submitted the authors reported that “one hundred ninety patients received Z comprising 42 elderly treated with an additional 148 patients were treated with Z after failed medical therapy. The number of patients with successful Z treatment was 158 representing 83%, with 32 patients requiring more than one dose.”

REFERENCES

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