

Guidance on presenting cases to the Committee on Publication Ethics (COPE)

- (1) COPE considers cases of possible research misconduct referred by editors and offers advice on what action to take. Currently the committee considers only cases referred by editors.
- (2) Cases for consideration by COPE should be sent to Ms Anastacia Kirk, Secretary, COPE, BMJ Publishing Group, Tavistock Square, London WC1H 9JR; email cope@bmjgroup.com; telephone + 44 (0)20 7383 6602; fax + 44 (0) 7383 6668.
- (3) It is for the editor to decide what action to take. There is no obligation to follow the advice of the committee.
- (4) The cases considered by the committee are published in the annual report. They include the advice given, what action (if any) was taken, and the outcome.
- (5) Editors should present their cases as briefly as possible, avoiding extraneous detail, but presenting all relevant information to enable the committee to offer good advice. Examples can be found in the COPE annual reports available on our website (www.publicationethics.org.uk)
- (6) Cases must be anonymised to avoid problems of defamation, but without losing relevant content. The identity of the editor presenting the case will not be published in the annual report.
- (7) Editors should not give the names of journals, authors, institutions, countries, or titles of papers. They should be as general as possible about essential information. For example, refer to a “common chronic disease” rather than diabetes, if this needs to be mentioned at all, and use the term “study” rather than a randomised controlled trial unless this is critical to the case.
- (8) Editors can anonymise reports by removing information, but they should not give false information. If in doubt about the presentation of a case contact the secretary, Ms Anastacia Kirk.
- (9) Editors are encouraged to attend the meeting at which their case is to be presented.
- (10) Cases will be edited before inclusion in the final report.
- (11) Editors should feedback to the committee what actions they take and the ensuing outcomes (please quote the case reference number).

Summary of cases submitted to COPE since its inception

Year	No of cases	“Evidence of misconduct”	“Probably no misconduct”	Not applicable
2000	33	24	9	0
2001	24	20	4	0
Total (all years)	137	106	19	12

Breakdown of problems (some cases presented several issues)	
Redundant publication or submission	43
Authorship	24
Falsification	17
No informed consent	14
Unethical research	14
No ethics committee approval	13
Fabrication	9
Editorial misconduct	8
Plagiarism	6
Undeclared conflict of interest	6
Breach of confidentiality	4
Clinical misconduct	4
Ethical questions	3
Reviewer misconduct	3
Attacks on whistleblowers	2
Deception	1
Failure to publish	1

Update on cases submitted to COPE

1998 cases that have been closed since the publication of last year's report:

98/8

Redundant publication?

Almost identical papers submitted and published in two different journals within two months of one another; authors made no reference to published paper.

Outcome

Unsatisfactory.

98/12

Possible redundant publication

Outcome

Unsatisfactory.

98/17

Allegations of scientific fraud and unethical conduct of experiments with attempts to silence the whistleblower

Outcome

98/30

A falling out

Authors disagreed about the final published version of a letter in terms of the contribution of all the authors, errors of fact, and refusal by corresponding author to show proofs to all authors.

Outcome

The dispute has not been resolved.

1999 cases that remain open:

99/5 Ethical status of author's actions?

99/10 A first report, not followed by a second

1999 cases that have been closed since the publication of last year's report:

99/12

The careless surgeon

A personal paper was published on the carelessness of a surgeon operating several years ago, suggesting that something should be done. Nothing was, and the surgeon retired. It was suggested that the article be republished with comments from others on how things should be done now.

Outcome

No further action taken.

99/19

An anonymous letter in response to qualitative research

Suggestion of fraudulent data made anonymously on the basis of interviews conducted with women whose first language was not English.

Outcome

No further action taken.

99/22

Who ensures the integrity of the editor?

Editor fired for acting as a whistleblower after editor in chief's behaviour contravened aspects of the International Journal Committee of Medical Journal Editors.

Outcome

No further action taken.

99/24

Invasive intervention without consent

Concerns raised about consent despite local ethics committee approval.

Outcome

No further action taken.

99/27

Misconduct on a massive scale?

Some 30 published articles were thought to contain fraudulent data. A journal editor, to whom several papers by the same author were submitted, conducted independent investigations. The results suggested data fabrication. As the author was from overseas and seemed to be the head of his institution, the editor took the matter up with the national bodies concerned.

Outcome

Three national bodies have now declined to investigate. The journal is currently considering publishing extensive details of the case.

99/28

Author dispute concerning ownership of data

Outcome

Unsatisfactory

2000 cases that remain open:

- 00/08 A paper describing a case of possible medical negligence
- 00/09 The study that may or may not already have been published
- 00/10 The hazardous drug used in an unlicensed way
- 00/11 The wrong standard deviations, the over stringent selection criteria, and the overt attempt at advertising
- 00/15 Clinical misconduct(?), incidentally discovered
- 00/19 The dubious scientist
- 00/22 Duplicate submission of a paper

2000 cases that have been closed since the publication of last year's report:

00/12

Undeclared conflict of interest

An author had not declared a competing interest in a published paper, which was subsequently pointed out by a reader who knew this to be untrue.

Outcome

The editor sent the complainant's letter to the author in question after which a statement of competing interest was published in the journal.

00/14

The missing ethics committee and lack of written consent

Neither written consent from the patients nor formal ethics committee approval had been obtained for a study on microbiological diagnosis of a clinical condition. The authors defended their position by saying that the chair of the committee knew of the study and to have asked for written consent from the patients would have caused unnecessary distress.

Outcome

The journal declined to publish the paper.

00/16

Developing novel approaches to improve the assessment of absolute risk among patients with cardiovascular disease in routine primary care practice

Possible dual publication of papers came to light and both editors of the journals concerned agreed to withdraw the papers from the publication process.

Outcome

An independent review of the paper submitted to the second journal confirmed substantial overlap with a previously published paper. The editor wrote to the author, rejecting the paper and warning him about good publication practice.

00/21

Retrospective correction: how far back do we go?

A case report was subsequently found to be grossly misleading and inaccurate some nine years after publication. The editor wondered whether to retract the article and publish an editorial looking at the issues.

Outcome

The journal decided not to retract the article, and the editorial is still pending.

00/24

Reviewer submitting for publication material that had been removed from a paper he had reviewed

A reviewer submitted a letter containing material removed from the paper he had assessed. The authors of the paper complained. The reviewer had not recommended omitting this material when he reviewed the paper.

Outcome

Agreement was achieved between the authors and reviewers and explanatory correspondence was published in the journal.

00/25

A paper which discloses confidential material

Author B's paper was sent to Journal Z in April 2000. The following month, the reviewer (author A) alerted the journal to the fact that the paper contained material from a paper that he had submitted to Journal X earlier in the year, but which he had sent to B, asking for advice on a reference. A had told B that the paper had been submitted elsewhere and that the material was confidential.

Outcome

The Journal X paper was published in December, the Journal Z paper was rejected on its lack of merit.

Author A requested that the matter not be made public as he was collaborating with author B on a research grant proposal. And he thought this might be jeopardised by a disclosure from Journal Z. The request was respected.

00/27

Possibly unethical plastic surgery

A plastic surgery technique was very dangerous in the opinion of another plastic surgeon. The procedure had been carried out at a private clinic and the editor was sufficiently concerned to think about contacting the General Medical Council.

Outcome

The editor asked the original author for permission to publish something on their debate, but the request was declined. The editor now plans to raise the issue in a more general way. He did write to the British Association of Plastic Surgeons, but no action seems to have been taken.

00/30

Duplicate publication

A paper was rejected on the advice of a reviewer, who suggested that it had already been published, almost word for word. The authors appealed on the grounds that the “repetition” mostly concerned quotations and amounted to only 10 per cent of the paper.

Outcome

An independent reviewer confirmed that there was substantial overlap with the previous publication (also a hypothesis), so the rejection was upheld. The editors wrote to the authors, issuing a warning about the need to maintain good publication ethics.