

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 Mrs Rachel Fetches, Secretary, COPE, BMJ Publishing Group, Tavistock Square, London WC1H 9JR; email cope@bmjgroup.com; telephone + 44 (0)20 7383 6057; fax + 44 (0) 7383 6249.
- (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 The identity of the editor presenting the case will not be published in the annual report.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).
- (12) Actions taken by editors following advice from COPE are taken at the editors’ own risk.

Update on cases submitted to COPE

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

Case 99/05

Ethical status of author’s actions?

A paper on benzodiazepine abuse and resale on the black market, involving urine samples requested from patients requiring a prescription, did not contain evidence of patient consent or ethics committee approval.

Outcome

The paperwork for the case was lost, stimulating the journal to adopt a different filing system.

Case 99/10

A first report, not followed by a second

In 1984, Journal X published a brief report of a randomised trial as a letter. This trial was never fully published.

Outcome

The research team was invited to write to the journal, but as no response was forthcoming, the case was closed in November 2002.

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
- 00/11 The wrong standard deviations, the overstringent selection criteria, and the overt attempt at advertising
- 00/15 Clinical misconduct (?), incidentally discovered
- 00/22 Duplicate submission of a paper
- 00/33 Alleged plagiarism—has been referred back to COPE for further advice.

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

Case 00/10

The hazardous drug used in an unlicensed way

An author gave two patients a drug that is only licensed for a small number of indications. Neither patient met these criteria. It was unclear if the doctor told them that the drug was being used in this way, nor was there any indication of informed consent.

Outcome

The author was contacted, but the reply was an automatic receipt. The editor did not write again.

Case 00/11

The wrong standard deviations, the over-stringent selection criteria, and the overt attempt at advertising

An independent reviewer did not believe that the over-stringent selection criteria could have explained the low standard deviations in this paper, and the language of the paper adopted the style of an advertisement.

Outcome

Unsatisfactory; no further action was taken.

Case 00/19

The dubious scientist

A scientist wrote to a medical journal offering an editorial that criticised current HIV vaccine research. The author was the senior partner of a technology company, whose website advertised a patented toxin, which would remove the need for conventional anti-retroviral drugs.

Outcome

The author, who is overseas, cannot be traced.

Case 00/26

The undeclared competing interest

A letter was published on the importance of doing research on a long established drug. The author did not advise the journal that he was conducting a trial of the drug, which had been funded by a pharmaceutical company.

Outcome

The editor published a paper in 2001 on competing interests, highlighting journal policies on the issue.

2001 cases that remain open:

- 01/02 The single authored, unbelievable, randomised controlled trial
- 01/06 Doubts over the exact nature of a drug being used in a study
- 01/12 Attempted redundant publication
- 01/20 Dubious surgery

2001 cases that have been closed since the publication of last year's report

Case 01/01

The incomplete systematic review

A systematic review on the effectiveness of a comparatively new group of drugs omitted a Cochrane review published some four months earlier and the reviewer questioned the role of the advisory group to the study.

Outcome

The journal's ethics committee investigated the case thoroughly and compiled a report, concluding that the paper was muddled but that the authors had committed no outright research misconduct. The editor sent the report to the authors and requested that a copy be sent to the advisory group.

Case 01/04

The doctor with a very strange theory

A doctor described a very peculiar theory, which led him to treat patients with a chronic disease with nothing but a foodstuff. Concerns were raised that the doctor might be putting patients at risk, and the national regulatory agency was duly notified.

Further outcome

The regulatory body has now asked their disciplinary board to investigate further. It transpires that the same disciplinary board had already reproached the author over a previous breach of moral and legal rules.

Case 01/07

Dual submission due to discordant action of two authors

A reviewer pointed out that a paper describing pathophysiological observations in patients with abdominal symptoms had been submitted to another journal. The editor checked if all the authors' signatures had been included in the covering letter.

Outcome

All the authors had signed the covering letter. No further action taken.

Case 01/10

Redundant publication

Two readers advised the editor of journal A that the female component of a cohort published in the journal was identical to that in a paper published in journal B earlier that year.

Outcome

A notice of duplication and reply from the authors were published in the August 2001 issue of Journal A.

Case 01/23

Inadequately supervised research?

The first author of a piece of qualitative research into the experiences of families facing a particular illness, was both the families' main carer as well as being the researcher. This research was undertaken as part of her PhD and it was felt it had therefore been inadequately supervised. The editor wrote to the supervisor with the objections raised and referred the case to the journal's ethics committee.

Outcome

All the authors denied there was a problem with the research. The supervisor expressed concern that (1) the editorial committee felt it had a remit to question the adequacy of the PhD supervision; (2) that by writing directly to the student they had placed her in a difficult situation; and (3) that the allegation of inadequacy extended to the supervisor(s), examiners, and host organisation.

The authors requested that the allegations of inadequate supervision be withdrawn and they offered to submit the full thesis for evaluation.

The journal's ethics committee felt that the editor did have the right to question the adequacy of PhD supervision but the editor retracted his statement questioning the conscientiousness of the supervisor. The paper was rejected.

Case 01/25

Duplicate publication

An author published a paper in Journal A that looked extremely similar to one already published as guidelines in Journal B.

Outcome

The author involved has apologised to all of the individuals involved.