

Ghostwriting remains a fundamental problem in the medical literature

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An editorial this week in *PLoS Medicine* concludes that in the two years since extensive ghostwriting by pharmaceutical giant Wyeth to promote its hormone drug Prempro was exposed through litigation intervention by *PLoS Medicine* and The New York Times, medical ghostwriting remains a prevalent problem with few concrete solutions in sight. This week also sees the launch of the PLoS Ghostwriting Collection, which documents everything published across the PLoS journals on the topic.

Among these are three new articles published earlier this month in PLoS Medicine that provide new perspectives on medical ghostwriting. In a Policy Forum article, Simon Stern and Trudo Lemmens make the case for imposing legal liability on the "guest authors" who lend their names to ghostwritten articles. In a personal perspective, Alastair Matheson argues that the current International Committee of Medical Journal Editors (ICMJE) authorship guidelines allow for industry to exaggerate the contribution of named academic authors and downplay those of commercial writers, contending that the ICMJE guidelines should be fundamentally revised and the concept of origination given comparable importance to authorship and contributorship. In another personal perspective, former medical writer Linda Logdberg says why she acted as a ghostwriter.

The editorial quotes recent anecdotal evidence that ghostwriting remains prevalent (and has even affected PLoS Medicine), in contrast to the protestations of some in the pharmaceutical industry that [ghostwriting](#) is an outdated practice. The editorial argues that the novel and interesting

suggestions from Stern, Lemmens and Matheson will have little effect until there is a fundamental change in the attitude of all involved in the publication of medical articles. The editorial concludes that "Everyone involved in the medical publishing industry, including journals, institutions, and the bodies that oversee research, need to take specific action to eradicate the seemingly endemic corrupt authorship practices that remain within the medical literature—starting by accepting the extent of the problem."

More information: The PLoS Medicine Editors (2011) Ghostwriting Revisited: New Perspectives but Few Solutions in Sight. PLoS Med 8(8): e1001084. [doi:10.1371/journal.pmed.1001084](https://doi.org/10.1371/journal.pmed.1001084)

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