

BJS authorship

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In 1997, the International Committee of Medical Journal Editors (ICMJE) issued guidance regarding authorship in scientific communications. The group recommended that potential authors should be involved in three separate elements that result in a scientific publication:

1. Conception and design or analysis and interpretation of data; and to
2. Drafting the article or revising it critically for important intellectual content; and on
3. Final approval of the version to be published

All three conditions should be met.

Participation solely in the acquisition of funding or the collection of data was considered not to justify authorship nor was general supervision of a research group. An updated electronic version in February 2006, included acquisition of data under the first heading, but maintained the concept of involvement in all three phases. They advised that individuals who failed to meet criteria for authorship should be listed in the Acknowledgements section.

In practice, most journals do not seek written confirmation from all authors that they have complied with the above. Some journals, including BJS, seek to minimise the risk of gratuitous authorship by limiting the number of authors, but there are many prestigious journals that place no such limitation on author numbers. The resulting variations in publishing practices are clearly multifactorial reflecting the integrity of potential authors, attitudes of editors and the rigour with which journals pursue contributors to ensure appropriateness of authorship.

BJS has held the view that in the context of surgical publishing most articles are unlikely to involve significant contributions from more than six authors and this restriction on authorship has been in place for some years. The editors have always accepted a small number of exceptions, but have become increasingly concerned by the number of submissions where contributors seem unwilling to adhere to the maximum of six authors. Without an explanation of editorial policy, there are concerns that some contributors will feel unfairly treated.

BJS authorship policy

The editors continue to support the broad recommendations made by ICMJE. They accept that involvement with all three elements may become increasingly problematic as more submissions involve multi-disciplinary and multi-institutional collaborations. The editors believe that individuals whose total contribution to the entire submission is less than 10 per cent should not be authors. For the avoidance of doubt the editors wish to draw attention to specific circumstances where authorship is inappropriate.

The inclusion of a senior author (e.g. head of department, senior surgeon) who has had limited involvement in any part of the submission.

The inclusion of an individual whose sole contribution relates to the provision of a particular technical function. This is often someone who performs an assay or the performance and interpretation of histopathology or radiology, but who played no part in the conception of the study or in the writing process. This also applies to clinicians whose patients are included in a study but play no part other than contributing to data acquisition.

The inclusion of long lists of individuals from multi-centre studies, where the individual contribution must be small.

The way forward

Authorship should be discussed by all of those involved at the planning stage of a study, although it is clear from correspondence with BJS that this does not always occur. Most disputes regarding authorship stem from failure of contributors to settle this issue at the outset.

Acknowledgement is appropriate for individuals making an overall contribution of less than 10 per cent. In the case of large multi-author studies, the small number of individuals whose separate contributions exceed 10 per cent can be named, a group title agreed or a combination used. It seems reasonable to name the writers and principal investigators/grant holders, but it is surely unnecessary to list every clinician in every participating hospital. These and all other contributors can be acknowledged appropriately.

While encouraging contributors to follow ICMJE recommendations, it is accepted that there will always

be submissions demanding more than six authors. In these circumstances, potential authors should indicate the proportional contribution made by each to the final manuscript. It follows from the preceding paragraphs that a small number of papers will have more than six authors and none will have more than ten. To improve clarity

regarding relative contributions, the electronic version of BJS will state the percentage contribution made by each author, when more than six are listed.

Authors included under a group title should be aware that they are recorded as contributors when searching the PubMed database by author.