

CHEST[®]

Official publication of the American College of Chest Physicians



Goodbye Ghostwriters!*

Karen L. Woolley

Chest 2006;130:921-923
DOI 10.1378/chest.130.3.921

The online version of this article, along with updated information and services can be found online on the World Wide Web at:
<http://www.chestjournal.org/content/130/3/921.full.html>

CHEST is the official journal of the American College of Chest Physicians. It has been published monthly since 1935. Copyright 2007 by the American College of Chest Physicians, 3300 Dundee Road, Northbrook IL 60062. All rights reserved. No part of this article or PDF may be reproduced or distributed without the prior written permission of the copyright holder.
(<http://www.chestjournal.org/site/misc/reprints.xhtml>) ISSN:0012-3692

A M E R I C A N C O L L E G E O F



P H Y S I C I A N S[®]



Goodbye Ghostwriters!*

How To Work Ethically and Efficiently With Professional Medical Writers

Karen L. Woolley, PhD

(CHEST 2006; 130:921–923)

Key words: authorship; codes of ethics; drug industry; peer review, research

Abbreviation: SOP = standard operating procedure

WHY DO I NEED TO KNOW ABOUT PROFESSIONAL MEDICAL WRITERS?

If you recognize the ethical and scientific obligations to publish your research, but have not always been able to do so, you are not alone. Between one third to two thirds of medical research may remain unpublished.^{1,2} The main reason for nonpublication is lack of time, but limited manuscript preparation experience or English writing skills can also present challenges for authors.^{1,3–5} When limited by time, experience, or language, researchers may seek medical writing assistance.^{3,4} Although the legitimate role of professional medical writers has been recognized by journal editors, authors need to know how to work appropriately with writers.^{6,7} The purpose of this article is to describe how authors can work ethically and efficiently with professional medical writers—and, in so doing, say goodbye to ghostwriters!

*From ProScribe Medical Communications, Noosaville, Australia.

Professor Woolley is a paid university lecturer in medical writing and drug development and is also the Chief Executive Officer of ProScribe. ProScribe's PhD-qualified professional medical writers are paid by academic, biotechnology, and pharmaceutical clients to provide medical writing services. ProScribe staff do not ghostwrite.

Manuscript received July 2, 2006; accepted July 6, 2006.

Reproduction of this article is prohibited without written permission from the American College of Chest Physicians (www.chestjournal.org/misc/reprints.shtml).

Correspondence to: Karen L. Woolley, PhD, ProScribe Medical Communications, 18 Shipyard Circuit, Noosaville 4566, Australia; e-mail: kw@proscribe.com.au

DOI: 10.1378/chest.130.3.921

WHAT IS THE DIFFERENCE BETWEEN PROFESSIONAL MEDICAL WRITERS AND GHOSTWRITERS?

Before describing how to work with writers, professional medical writers must be differentiated from ghostwriters.⁸ For the purpose of this article, professional medical writers are writers who abide by ethical guidelines for medical writing (Table 1). When a professional medical writer assists authors, the writer ensures that the authors control the content, and that the writer's involvement and funding source are acknowledged in the publication. In contrast, due to ignorance or ill intent, ghostwriters may try to control the content and not disclose their involvement or funding source. Ghostwriters can expose authors, journals, and sponsors to justifiable, but undesirable, media attention.¹¹

WHO WORKS WITH PROFESSIONAL MEDICAL WRITERS AND WHY?

There is no single "type" of author who works with professional medical writers. A survey¹² on author attitudes toward medical writing found that authors who reported that they would use medical writing services included junior and senior academics, men and women, and those with excellent medical writing skills and extensive medical writing experience and those without. Professional medical writers may help authors prepare manuscripts based on studies sponsored by not-for-profit (*eg*, academic institutions, patient advocacy groups) or for-profit (*eg*, pharmaceutical, biotechnology, device companies) organizations. The prevalence of medical writing assistance in publications from high-ranking, international, peer-reviewed journals was recently reported to be 6% for non-industry-sponsored research and 10% for industry-sponsored research.¹³ As the number of, and demand for, medical writers is increasing, more authors may have the opportunity to work with professional medical writers in the future.¹⁴

Table 1—Guidelines From Medical Journal Editors and Medical Writers on Acknowledging Medical Writer Involvement*

Guidelines	Acknowledging Medical Writers
1. <i>CHEST</i> Instructions to authors; ghost authorship ⁹	“Any editorial or authorship contributions made by outside organizations, persons, funding bodies, or persons hired by funding bodies, must be appropriately acknowledged, and any potential conflicts of interest (<i>ie</i> , who paid for the extra editorial work). . . must also be acknowledged.”
2. International Committee of Medical Journal Editors; uniform requirements for manuscripts submitted to biomedical journals: writing and editing for biomedical publication; ethical considerations in the conduct and reporting of research ⁶	“All contributors who do not meet the criteria for authorship should be listed in an acknowledgments section. Examples of those who might be acknowledged include a person who provided. . . writing assistance. . . Editors should ask authors to disclose whether they had writing assistance and to identify the entity that paid for this assistance.”
3. World Association of Medical Editors; policy statement: ghost writing initiated by commercial companies ⁷	“Medical writers can be legitimate contributors. . . their roles and affiliations should be described in the manuscript.”
4. Good publication practice for pharmaceutical companies ³	“The contribution of the medical writer should be acknowledged.” “. . . acknowledge . . . the company’s involvement in the. . . preparation of the publication.”
5. Task Force on the Contributions of Medical Writers to Scientific Publications. American Medical Writing Association position statement on the contributions of medical writers to scientific publications ¹⁰	“Biomedical communicators who contribute substantially to the writing or editing of a manuscript should be acknowledged with their permission and with disclosure of any pertinent professional or financial relationships.”
6. European Medical Writers Association guidelines on the role of medical writers in developing peer-reviewed publications ⁴	“The involvement of medical writers and their source of funding should be acknowledged.”

*Although additional guidelines and statements have been published on publication ethics, the guidelines listed in this Table provide practical advice for authors who want to work with professional medical writers.

Authors elect to work with professional medical writers for various reasons. The most common reasons that have been cited by authors were that medical writers could help them prepare manuscripts that would: (1) be better written, (2) be of higher quality, (3) take less of their time to prepare, and (4) have a higher chance of being published.¹² Although more direct evidence is required, research indicates that medical writing assistance can reduce publication delays and enhance quality.^{13,15}

HOW CAN AUTHORS WORK ETHICALLY AND EFFICIENTLY WITH PROFESSIONAL MEDICAL WRITERS?

Authors can work ethically with professional medical writers by following guidelines developed by journal editors and professional medical writers (Table 1). There is a high level of consensus among these guidelines, with each reinforcing the importance of transparency. Essentially, authors working with professional medical writers need to do the following: (1) acknowledge the medical writer, and (2) disclose the associated funding source. If no funding was used for the writer’s services, this should be stated explicitly. Before writing begins, authors need to confirm that their medical writer complies with these guidelines.

Fortunately, the process required for ethical

manuscript preparation aligns well with the process used for efficient manuscript preparation. Professional medical writers will, ideally, follow a standard operating procedure (SOP) that facilitates ethical and efficient manuscript preparation. Manuscript SOPs may vary among writers, but every writer’s SOP should require that authors and writers work collaboratively throughout the process. The SOP should clarify that authors are responsible for identifying the key messages and data to be presented in the manuscript. The SOP may then recommend that the writer develop a comprehensive structural outline based on the author-identified messages and data. The outline should be reviewed, edited (as necessary), and agreed to by the authors. The SOP may then clarify that the writer prepares the first, full-text version of the manuscript only after the key messages, data, and the scope and sequence of content have been author approved. An experienced medical writer will be able to efficiently convert the approved outline into a submission-ready manuscript. The writer, rather than the authors, can perform many of the time-intensive tasks in manuscript preparation. These tasks include the following: drafting text that is clear, concise, credible, and grammatically correct; preparing figures and tables; tracking and incorporating author feedback; ensuring the manuscript meets the requirements of the journal (*eg*, word count, formatting); and finalizing

the multiple text and graphics documents usually required for on-line submission. The SOP should mandate that authors retain responsibility for approving the final version of the manuscript and submitting it to the journal. A professional medical writer can help authors efficiently address the issues (eg, problems with writing style, graphics, formatting) that have been previously identified as persistent problems in manuscripts submitted to *CHEST*,¹⁶ and help ensure that manuscripts are prepared ethically.

Readers of peer-reviewed publications need to know that authors, not medical writers, control the messages and data presented. Medical journals and professional medical writers need to work together to educate authors and readers about appropriate medical writer involvement. The monthly medical writing series in *CHEST* is a perfect example of how editors and writers can collaborate to benefit authors and, ultimately, readers.

SUMMARY

Authors who are limited by time, writing expertise, or English writing skills may seek medical writing assistance. Medical journals have recognized the legitimate role of professional medical writers, but the onus is on authors to work with professional medical writers, not ghostwriters. A professional medical writer can help authors prepare manuscripts ethically and efficiently by following a well-defined manuscript preparation process.

ACKNOWLEDGMENT: I thank Jane McDonald and Drs. Yoonah Choi, Julie Ely, Leigh Findlay, Christine Wichems, and Mark Woolley from ProScribe Medical Communications for their critical review of this article.

REFERENCES

- 1 Camacho LH, Bacik J, Cheung A, et al. Presentation and subsequent publication rates of phase I oncology clinical trials. *Cancer* 2005; 104:1497–1504
- 2 Wise P, Drury M. Pharmaceutical trials in general practice: the first 100 protocols; an audit by the clinical research ethics committee of the Royal College of General Practitioners. *BMJ* 1996; 313:1245–1248
- 3 Wager E, Field EA, Grossman L. Good publication practice for pharmaceutical companies. *Curr Med Res Opin* 2003; 19:149–154
- 4 Jacobs A, Wager E. European Medical Writers Association (EMWA) guidelines on the role of medical writers in developing peer-reviewed publications. *Curr Med Res Opin* 2005; 21:317–322
- 5 Irwin RS. A new face of *CHEST* heralds a new era [editorial]. *Chest* 2006; 129:1–3
- 6 International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals: writing and editing for biomedical publication; ethical considerations in the conduct and reporting of research. Available at: www.icmje.org/index.html#ethic. Accessed June 25, 2006
- 7 World Association of Medical Editors. Policy statement: ghost writing initiated by commercial companies. Available at: www.wame.org/wamestmt.htm#ghost. Accessed June 25, 2006
- 8 Woolley KL. Letter to the editor. *AMWA J* 2005; 20:184
- 9 *CHEST* editorial department. Instructions to authors. Available at: www.chestjournal.org/misc/authorInstructions.pdf. Accessed June 25, 2006
- 10 Hamilton CW, Royer MG; for the AMWA 2002 Task Force on the Contributions of Medical Writers to Scientific Publications. AMWA position statement on the contributions of medical writers to scientific publications. *AMWA J* 2003; 18:13–16
- 11 Wilde Matthews A. Ghost story: at medical journals, writers paid by industry play big role. *The Wall Street Journal*, 13 Dec 2005: A1
- 12 Phillips SG, Carey LA, Biedermann G. Attitudes toward writing and writing assistance in peer-reviewed articles. *AMWA J* 2001; 16:10–16
- 13 Woolley KL, Ely J, Woolley M, et al. Declaration of medical writing assistance in international, peer-reviewed publications and effect of pharmaceutical sponsorship [abstract]. Paper presented at the International Congress on Peer Review and Biomedical Publication; September 16, 2005; Chicago, IL
- 14 Koreith K. Medical writing market appreciation. *Centerwatch Monthly* 2004; 11:1–5
- 15 Wager E, Middleton P. Effects of technical editing in biomedical journals: a systematic review. *JAMA* 2002; 287:2821–2824
- 16 Block AJ. The results are not perfect [editorial]. *Chest* 1999; 115:1223

Goodbye Ghostwriters!
Karen L. Woolley
Chest 2006;130; 921-923
DOI 10.1378/chest.130.3.921

This information is current as of March 26, 2009

Updated Information & Services	Updated Information and services, including high-resolution figures, can be found at: http://www.chestjournal.org/content/130/3/921.full.html
References	This article cites 9 articles, 4 of which can be accessed free at: http://www.chestjournal.org/content/130/3/921.full.html#ref-list-1
Citations	This article has been cited by 2 HighWire-hosted articles: http://www.chestjournal.org/content/130/3/921.full.html#related-urls
Open Access	Freely available online through CHEST open access option
Permissions & Licensing	Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at: http://www.chestjournal.org/site/misc/reprints.xhtml
Reprints	Information about ordering reprints can be found online: http://www.chestjournal.org/site/misc/reprints.xhtml
Email alerting service	Receive free email alerts when new articles cite this article. sign up in the box at the top right corner of the online article.
Images in PowerPoint format	Figures that appear in CHEST articles can be downloaded for teaching purposes in PowerPoint slide format. See any online article figure for directions.

A M E R I C A N C O L L E G E O F



P H Y S I C I A N S[®]