Plagiarism – a Societal Contagious Disease or Just a Means for Opportunists to Reach for a Better Position?

Sanda-Maria Copotoiu, Dan Dobreanu

The amount of medical articles retracted by editors is escalating alarmingly. Accessed on May the 3^{rd} 2011, the Pub Med site displayed 644 articles retracted. The dimensions of the phenomenon mirrored by other data source are impressing: "of the 9 398 715 articles published between 1950 and 2004, 596 were retracted. This wave of retraction impacts highly respected journals." [1]. And the increase even if limited to the period comprised between 1990 and 2006 is significant with a p = 0.002 [1].

It would be insane to read them all in order to identify the reasons they were sieved, it would be unprofessional since nobody is qualified enough to assess them in a reliable way and obviously it would be impossible to fulfill such an unrealistic task. Nobody would benefit of it.

The editors always make a formal statement as to the reasons of retractions: inquires unveiling the lack of ethics committees' approval of research, the inability to provide the documents relevant to the research published, unintentional alteration of the data, inappropriate use of statistics, any form of trespassing the ethical conduct of research, to name a few.

Sometimes, plagiarism is committed involuntarily. For instance, a prominent lecturer recently paraphrased a statement omitting to quote the author, failing to acknowledge the paraphrasing, and still pointing out on research fraud. Seated in the audience, somebody next to me showed me a book purchased at the airport bookstore. The book contained an example promoted by the lecturer. I can only imagine that taken by the wave of rhetoric, he forgot to credit the author and involuntarily committed plagiarism while vituperating against it. Is it then so easy to misbehave, or are the definitions of plagiarism too tight?

Not quite so. But if committing plagiarism in contemplation of a better professional outcome, such as promotion, or when engaging in a quest for highlighting in an attempt to project oneself on the track of scientists' society, then the benefit is obvious. Pressure to publish is a frail excuse. When success follows an undetected fraud, there is a natural tendency to try again to cheat on the others to the point when plagiarism becomes a way of life and the author is so refined, that he infringes in the audience a sense of guilt to even suspect he would not be innocent. These are the charismatic scientific crooks.

But when it comes for the benefit...

One of the most delicate issues is the copyright. Often this is not fully understood since the consequences of reproducing figures without written permission was not always followed in justice, or at least only vaguely mirrored in the medical society. As for the responsibilities of the editors faced with plagiarism, these are critical. Reputed publishers have already issued their guidelines. Not only the editors should pursue cases of suspected misconduct revealed during the peer-review process and publication, they are supposed to carry on to the extent and in ways defined in capital documents, such as those promoted by Blackwell Publishers, who offer flow charts for the those concerned with publication to follow [2].

Patchwork writing is misleading, falsely generating the idea that the authors understood the topics and that they master the diving into the themes, a position often subject to dispute [3].

Scientific integrity seems to be in decline, since retraction rates are on the rise [1]. Medical research is based on trust. We trust the researchers that they perform just as if continuously monitored. This is common knowledge and therefore, we do not risk to be accused of plagiarism if not citing the alleged authors. The problem is that facing so many reports on scientific misconduct, one is forced to submit all the articles elected for publication to plagiarism detection programs. Not all the detection programs really work, but if properly used, they are able to pinpoint on the faulty writings. When is the proper time to apply such a tool? Should it be before handling the medical writing to the peer-reviewers, such as screening for bugs, or should we spare their efforts by checking for plagiarism beforehand? This is still to be debated.

The reason we felt the urge to write this editorial is that due to the multidisciplinary character of our journal, it isn't always easy to detect subtle forms of plagiarism, such as ideas, study designs or even discussions. Up to now, we were able to detect just one clear case of plagiarism and the article was not published as submitted.

We do not intend to suspect all the authors since until not proven, they are not guilty, but as much as we hate to do this, we will take severe measures to refrain the predators, for we will never encourage or cover scientific fraud, no matter the excuses.

We therefore consider that plagiarism is a syndrome encountered in a contagious societal disease called "opportunitis" and that the pathway from the first symptoms to the florid stage of this condition should be blunted by a common effort, not only of the editorial board, but also of the readers.

References

- Cokol M, Iossifov I, Rodriguez-Esteban R, Rzhetsky A How many scientific papers should be retracted?, EMBO Rep, 2007, 8:422–423
- Graf C, Wager Elizabeth, Bowman Alyson, Fiack Suzan, Scott-Lichter Diane, Robinson A – Best Practice Guidelines on Publication Ethics: A Publisher's Perspective, Int J Clin Pract, 2007, 61 (Suppl.152), 1–26
- Neville C The Complete Guide to Referencing and Avoiding Plagiarism, Mc Graw Hill, Open University Press, 2007, 28–32