

DCCR Disease/Clinical Interest Group Authorship Policy

November 2008

Introduction

The Dublin Centre for Clinical Research has established an array of clinical interest/disease groups to undertake collaborative clinical research across the city. This policy relates to any research studies and clinical trials that DCCR Clinical Interest/Disease Groups (DCCR Groups) agrees to undertake. It provides guidance to groups about how the contributions of group members will be presented in research publications. The following pages set out the DCCR's principles and policies with respect to recognizing individual effort and contributions in research publications.

General Principles

DCCR Groups agree to follow the following general principles:

1. Successful clinical research involves a wide range of contributions and DCCR Groups recognise that patient recruitment and consent followed by the collection of clinical information and tissue samples are critical contributions to a successful research paper.
2. Only those researchers, clinicians and allied health professionals who actively contribute to research should be recognised, e.g. no automatic recognition for Academic Department Heads.
3. Where DCCR Groups choose to collaborate with other groups outside the DCCR, clarity and agreement on publication policy will be secured before starting such a collaborative research project.
4. DCCR Groups will provide the opportunity for all their members to participate in the research formulation, drafting and reviewing activities that will allow members to be acknowledged as authors.

5. Notwithstanding general principle 4, whilst DCCR Groups must respect the editorial policies of journals, they shall make reasonable efforts to promote principles 1 to 4 in favour of group members.

Publication Policies

The DCCR Groups recognise the following definition of author promoted by the International Committee of Medical Journal Editors. An “author” is generally considered to be someone who has made substantive intellectual contributions to a published study. Authorship credit should be based on:

1. substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data;
2. drafting the article or revising it critically for important intellectual content; and
3. final approval of the version to be published.

Authors should meet conditions 1, 2, and 3. If acquisition of data is a researcher’s sole contribution to condition 1, then they should have contributed at least 5% of the samples collected. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. (e.g. Make presentation to peers at conferences and respond to questions).

Other Types of Contribution

Other members of a DCCR Group not meeting the criteria identified above will be recognised in the acknowledgements. It is also vital to appropriately recognize the contributions of allied health professionals such as research nurses, data managers, laboratory and pharmacy staff.

Collaboration with Other Groups

From time to time a DCCR Clinical Interest/Disease Group may wish to collaborate with other groups of researchers in Ireland (through ICRIN) or Overseas (through ECRIN, NICRIN or the UKCRN). Such groups may have their own authorship policy and in some cases a DCCR Group may need to decide how it will allow the policy of the larger group to override its own policy.

Provision of Samples and Clinical Data to Other Researchers

Where a DCCR Group agrees to share samples and clinical data with other research groups, it is expected that this group will provide authorship opportunities to members of the DCCR Group and that the relevant teaching hospitals and medical schools are cited in the acknowledgements.

Appropriate Recognition of the Dublin Centre for Clinical Research

The DCCR expects to be cited in the acknowledgements as making a contribution to the research paper.

Dispute Resolution

Any disputes between collaborators in the area of authorship and publication will be addressed by a dispute resolution process identified by the Management Team of the DCCR.

Policy Review

This policy will be reviewed in November 2009.