

GAPP email 13 Feb 2012

Hello Ivan,

Thank you for your questions. I hope the following responses are helpful.

1. How will GAPP work to decrease the rate of non-publication?

GAPP is aiming to distinguish ghostwriters from professional medical writers. The rate of non-publication could be reduced if authors had access to professional medical writing assistance.

Professional medical writers can help authors, who have received commercial or public research funds, with many of the time-intensive tasks during the manuscript preparation process. As Liz Wager (a friend of Retraction Watch) has cited in her book (Getting Research Published), the "average" time to prepare a manuscript is seven months. Researchers don't "whip off" papers any more, especially if they want to meet best practice reporting and disclosure guidelines. Doing so takes time...and time is one of the major factors cited by authors as a reason for non-publication (see Krzyzanowska MK, et al., JAMA 2003; Sprague et al., J Bone Joint Surg Am 2003; Camacho LH et al, Cancer 2005). Professional medical writers help authors adhere to best practice; indeed, in my experience, particularly when working with authors from developing countries, we are often alerting authors to CONSORT, PRISMA, STARD, STROBE etc...and guiding them on disclosure requirements. I don't know who would be alerting and guiding these authors if we weren't.

When you see the conclusions* reported by the illuminating study from Joseph Ross and his colleagues, you have to ask whether funding agencies (public or private) should ensure that trial budgets include funds for manuscript preparation. You also have to ask yourself why Ross' conclusions have not made front page news. Note that a manuscript "costs" less than 2% of an average Phase 3 clinical trial budget; we can find funds for investigator meetings, protocol workshops, recruitment advertising etc...can't we find funds for the ultimate goal and responsibility of research...publishing the results?

2. Who pays most of the fees of GAPP's members? I better cover off both ways that this question could be interpreted:

a. GAPP members are all volunteers - nobody pays our fees as we don't charge anything.

b. GAPP members each work in different organizations and I am not privy to their financial accounts. I am happy to share information from our company. Almost half of our revenue comes from non-pharmaceutical company clients. Interestingly enough - and I know this would surprise those who don't work with authors on a daily basis - we have to spend more of our time convincing academic authors about the need for complete and transparent disclosure than we do authors who work on large international pharma-company sponsored trials. Our experience aligns with the evidence presented by Adam and Cindy in their latest survey of publication practices of EMWA and AMWA members.

Interestingly, our company has seen a significant increase in requests for assistance from academic and not-for-profit organisations. Not all academics and not-for-profits have budgets set aside for medical writing, but the results from Ross could change this. In our company, we only employ experienced, PhD-qualified medical writers and we pay them salaries that are benchmarked against what they could earn in academia or in industry medical writing positions. Yes, we do have to charge fees to employ these talented and highly trained writers. I think medical writing is a wonderful and highly ethical career choice. Companies like ours offer a way to keep highly trained scientists within the world of science. That's a good thing. Of course, if people keep confusing professional medical writers with ghostwriters, we may lose the good people we need to attract to the profession. Thus, the actions of GAPP may, down the line, also help distinguish professional medical writing from ghostwriting in the minds of scientists contemplating their next career move.

*Conclusions Despite recent improvement in timely publication, fewer than half of trials funded by NIH are published in a peer reviewed biomedical journal indexed by Medline within 30 months of trial

completion. Moreover, after a median of 51 months after trial completion, a third of trials remained unpublished.

With kind regards,

Karen Woolley, PhD, Certified Medical Publication Professional Professor, University of Queensland; Professor, University of the Sunshine Coast; Honorary Fellow, American Medical Writers Association; ISMPP Director and Chair, Asia-Pacific Advisory Committee CEO ProScribe - Internationally recognised for excellence in medical communications

T: +61 7 5455 6330 F: +61 7 5455 6331 E: kw@proscribe.com.au W: www.proscribe.com.au

ProScribe's services include: manuscripts; clinical, regulatory, and marketing documents; training courses (medical writing and publication planning courses).

The information contained in or attached to this message is intended only for the people it is addressed to. If you are not the intended recipient, any use, disclosure or copying of this information is unauthorised and prohibited. This information may be confidential or subject to legal privilege. Please reply to the sender if you have received this message in error. Thank you.