

Plagiarism with a twist in the tale

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From the editor

Plagiarize! Let no one else's work evade your eyes!
Tom Lehrer

Welcome to the first issue of 2017. We hope you like the new design of the Journal, which, as well as giving a more up to date feel, is intended to improve its readability.

One of the least pleasant aspects of being the editor of a journal is dealing with cases of plagiarism. As we make clear in our instructions for authors, the *JRCPE* takes a serious view of plagiarism (including self-plagiarism). Plagiarism represents a serious threat to the integrity of the medical literature, the scientific process, and calls into question the probity and integrity of those committing plagiarism. The policies of the Journal on this matter are fully in line with those of the International Committee of Medical Journal Editors.

All papers submitted to the Journal for publication are screened for potential plagiarism (both published and 'only' online) using the iThenticate system. This computer software automatically trawls the literature for similar content. When a manuscript returns a high iThenticate score, we then chase down the source material to ensure it has been properly cited.

Once a manuscript has been peer-reviewed and accepted for publication, it passes through a copyediting stage during which all the references are checked. At this stage, too, plagiarism may be detected.

Sometimes it is apparent that an inexperienced author has directly quoted a large section of work without attribution. In such cases the Section Editor or Editor-

in-Chief and editorial staff will work with the author to rework the manuscript to obviate the issue. However, in other cases it is clear there is a genuine intention to pass others' work as the author's own. Fortunately the Journal only receives a few such cases a year. Each case is reviewed individually by the Editorial Board, and an appropriate sanction imposed. The Board takes into account the seniority of the author. Importantly, in all cases, we consider it mandatory that the authors pursue some formal training in academic integrity and medical writing.

While it is increasingly the case that how to *read* (i.e. evaluate) a paper is considered an important part of undergraduate and postgraduate medical training – perhaps one of the more positive results of evidence-based medicine – it seems to be the case that there is little formal training for medical students and medical trainees in how to *write* scientific and medical papers. Training in 'scientific writing' – including specifically on plagiarism – is increasingly provided in non-medical university faculties. Is it not time that medical schools followed suit?

Plagiarism, academic dishonesty, threatens to the integrity of the medical literature – what a dismal way to greet the New Year, you might be thinking. There is, however, a twist in the tale. Our most recent case of plagiarism turned out to be a case of inadvertent self-plagiarism caused by a new scourge: the predatory journal. Both the author Dr Runcie and the readership of the Journal are losers here: the Journal was not in a position to publish her fascinating paper. Please read the editorial that Dr Runcie and our erstwhile Clinical Section Editor Dr Witham have written on this growing problem.