Towards better cardiovascular journals

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In their never-ending search for truth, science and medical research rely heavily on data published in peer-reviewed journals. Subsequent publication of incorrect scientific data may interfere with the process of implementation of new treatment modalities and insights and understanding of disease processes. This may be caused by simple mistakes or involuntary misinterpretation without overt scientific misconduct or fraudulent publication. However, there are common problems that all medical and/or scientific journal editorial boards face:

- a. Fraud which includes data falsification, faked data, data manipulation, omission of important data.
- b. Ethical misconduct with regard to study design, patient inclusion and interpretation of data.
- c. Misconduct: for example, presentation of strongly tainted data under pressure of industry, companies and for-profit organisations; or failure to maintain confidentiality and embargos.
- d. The problem of inappropriate authorship.
- e. Plagiarism: data, information or complete medical papers from others and other groups are presented as original own work.
- f. Double publication and redundant publication: parts of, or the same research data and results are presented in different journals without consent or notification of the journal editors. Duplicate publication can take other forms such as splitting data into the 'minimal publishable unit' (MPU).¹

All the aforementioned issues may lead editors to withdraw some papers after publication or to write careful corrections and warnings for misinterpretation of scientific data. Sometimes a warning to omit

citation and inclusion in reference lists is simply not enough. Should these papers be removed from databases like PubMed? What are the legal aspects? Should other editorial boards be warned for papers and publications from research groups that have obviously misbehaved? Should there be a black list of authors who have violated the rules of good scientific conduct and what is the definition of these rules?

It is obvious that journal editors should be aware of fraudulent papers or presentation of incorrect scientific data. However, they themselves also face possible problems such as conflict of interest of (peer)-reviewers and editors. Researchers in the same fields may for instance prevent publication of important scientific work of other research groups. As all editorial boards of scientific papers have basically the same duties and responsibilities, the scientific community has been searching for a more comprehensive approach and is trying to combine the efforts of editors and editorial boards of cardiology papers with regard to these topics.

The HEART (Heart Editors Action Round Table) Group is an initiative by Dr William Parmley, former Editor-in-Chief of the Journal of the American College of Cardiology, and consists of the Editors-in-Chief of PubMed listed cardiovascular journals.

One of the first initiatives of the HEART Group has been to issue a mission statement on ethics and to offer a platform for scientific exchange. The purpose is to ensure transparency and honesty in the scientific process that promotes ethical conduct in performance and publication of research.

The issues that will be part of this process are listed and described in the accompanying Statement on ethics from the HEART Group.²

Furthermore, the HEART Group has tried to define important areas in which to develop common policies and best practices:

- a. The submission process: to promote standardised formats and platforms for manuscript submission. These would include the electronic submission process and common reference styles.

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- b. Peer review: to promote standards for excellence in peer review. Specific issues include:
 - Authors' responsibility to divulge prior reviews;
 - Conflict of interest for reviewers;
 - Statistical issues.
- c. Publication process and electronic publication to promote increased efficiency in publication, thereby shortening publication time.
- d. To address issues related to free access.
- e. To serve as a common voice when issues regarding HEART Group journals arise, particularly in relation to governmental bodies, professional organisations, the media, and the public.

Finally, in 2005, the International Committee of Medical Journal Editors (ICMJE) initiated a policy requiring investigators to deposit information about trial design and objectives before the onset of actual patient enrolment.^{3,4} The World Health Organisation's International Clinical Trial Registry Platform developed a coordinated process for identifying, gathering, duplicating and searching trials from registries around the world. The HEART Group is working towards

creating a uniform policy in accordance with their recommendations. In this respect, the HEART Group has developed a document which is published in the current edition of our journal.² The document addresses general ethical principles in the conduct of the scientific process with which all of the editors concur. The editorial board of the Netherlands Heart Journal participates actively in the HEART Group and expresses the hope and expectation that this important platform will help to improve and extend the scientific level of our journal. We encourage you to read this very interesting document which has important consequences for international publication policies. ■

References

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- 4 Laine C, Horton R, DeAngelis CD, et al. Clinical trial registration - looking back and moving ahead. *N Engl J Med* 2007;**356**:2734-5.