

PUBLICATION POLICY FOR RESEARCH PAPERS, REVIEWS AND SHORT COMMUNICATIONS/LETTERS FOR THE MTW CENTRE

SCOPE and DEFINITIONS

The MTW Centre is a federation of independent clinical and academic teams contributing to the central vision, namely to find a cure for pulmonary fibrosis (See organogram).

This policy applies to publications based on analysis of data generated by members of the Margaret Turner Warwick Centre for Fibrosing Lung Disease (MTW Centre) whose primary affiliation is either the NHLI (Imperial College) or the Royal Brompton Hospital (Guys and St Thomas' Hospital).

The MTW Centre is led by Professor Gisli Jenkins and supported by members of the MTW Centre Steering Committee (Prof Edwin Chilvers, Dr Peter George, Dr Philip Molyneaux, Prof Clare Lloyd, Prof Sejal Seglani) and the Executive Committee (Mr Des Chow, Mr Matthew Smith, Dr Alison John, Ms Natasha Richmond, Dr Iain Stewart, Dr Phil Molyneaux).

The MTW Centre partners include the staff who have actively contributed ideas, samples and data. Individual names included on the list of data contributors are defined by the investigators themselves when signing up for the MTW Centre. This information is recorded and retained by the MTW Centre Administrator and will be updated quarterly. To remain a partner of the MTW Centre individuals will be required to demonstrate engagement with the MTW Centre through attending MTW seminars, Steering Committee meetings, the annual MTW Centre Away Day providing clear evidence of collaboration (provision of data, tissue samples, joint grant submissions etc).

PRINCIPLES

The MTW Centre encourages the generation of high-quality evidence, disseminated widely through the peer-reviewed literature, pre-prints, conferences, and other media.

The MTW Centre is a consortium therefore the primary affiliation for all authors should be their primary employers (eg NHLI, Imperial College for Imperial College employees etc.). The MTW Centre for Fibrosing Lung Diseases should be listed as a secondary (or tertiary) affiliation as appropriate.

The MTW Centre supports global collaboration, collegiality, inclusivity, and equity for the benefit of patients, clinicians and scientists globally, building trust through open and fair discussion when planning analysis and throughout the execution.

Decisions regarding attribution of authorship and contribution will be made by the Senior Academic leading the analysis, based on this policy, which closely aligns to ICMJE guidance. The MTW Centre Steering Committee will provide decision support where required. The MTW Centre promotes the transparent and inclusive attribution of all contributions made by individuals and institutions to the generation of evidence.

The composition of the Steering Committee, membership of the MTW centre and the publication policy will be reviewed annually and updated as required. All decisions require final approval by the steering committee.

General authorship directives

Authorship confers credit and has important academic, social, and financial implications. Authorship also implies responsibility and accountability for published work (1). The following recommendations are intended to ensure that contributors who have made substantive intellectual contributions to a paper are given credit as authors, but also that contributors credited as authors understand their role in taking responsibility and being accountable for what is published (1).

The ICMJE recommends that authorship be based on the following 4 criteria:

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- Drafting the work or revising it critically for important intellectual content; AND
- Final approval of the version to be published; AND
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

In addition to being accountable for the parts of the work he or she has done, an author should be able to identify which co-authors are responsible for specific other parts of the work. In addition, authors should have confidence in the integrity of the contributions of their co-authors.

All those designated as authors should meet all four criteria for authorship, and all who meet the four criteria should be identified as authors. Those who do not meet all four criteria should be acknowledged. These authorship criteria are intended to reserve the status of authorship for those who deserve credit and can take responsibility for the work. All individuals who meet the first criterion should have the opportunity to participate in the review, drafting, and final approval of the manuscript.

The individuals who conduct the work are responsible for identifying who meets these criteria and ideally should do so when planning the work, making modifications as appropriate as the work progresses. We encourage collaboration and co-authorship with colleagues in the locations where the research is conducted.

It is the collective responsibility of the authors, not the journal to which the work is submitted, to determine that all people named as authors meet all four criteria; it is not the role of journal editors to determine who qualifies or does not qualify for authorship or to arbitrate authorship conflicts.

If agreement cannot be reached about who qualifies for authorship, the institution(s) where the work was performed, not the journal editor, should be asked to investigate. The criteria used to determine the order in which authors are listed on the title-line may vary and are to be decided collectively by the author group and not by editors. If authors request removal or addition of an author after manuscript submission or publication, journal editors should seek an explanation and signed statement of agreement for the requested change from all listed authors and from the author to be removed or added.

When a large multi-author group has conducted the work, the group ideally should decide who will be an author before the work is started and confirm who is an author before submitting the manuscript for publication. All members of the group named as authors should meet all four criteria for authorship, including approval of the final manuscript, and they should be able to take public responsibility for the work and should have full confidence in the accuracy and integrity of the work of other group authors. They will also be expected as individuals to complete disclosure forms. Minor contributions to a study, not sufficiently meritorious of full title-line co-authorship, will be eligible for consortium authorship as listed below as members of the consortium of MTW Centre for Fibrosing Lung Disease partners.

PUBLICATION: Manuscripts may be published open access in any journal selected by the Member(s) leading the analysis. The MTW Centre encourages the use of pre-print publishers or publications that make manuscripts available during the peer review process such as Wellcome Open Research.

ACCREDITATION: All pre-print and full-text, peer-reviewed publications will list the MTW Centre for Fibrosing Lung Disease (either as final authors or on behalf of the MTW Centre). The academics leading the analysis are responsible to select the corresponding author(s), the authors named in the title-line and the order of the authors including the MTW Centre. The MTW Centre recommends using the CRediT ontology and the ICMJE criteria for authorship as a guide for selection. CRediT ontology is available at (<http://credit.niso.org/>). ICMJE criteria are available at <http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>.

Membership of the MTW Centre will be detailed as per Annex 1- Author & Contributor Details. MTW Centre partners details should be included in, or as supplementary material to, the publication. All MTW Centre partners and contributors whose data were included in the analysis will be named on this list according to the CRediT ontology. All individuals named in Author title-line & partner annex should have a citation retrievable through the US National Library of Medicine MEDLINE®. It is the responsibility of the corresponding author to agree such accreditation with the publisher where possible. Submissions to journals that will not assign citations to consortium contributors are permitted, but not preferred.

Acknowledgements and Conflicts of Interest defined for MTW Centre members and partners will be included for all named authors and contributors on a publication.

Any output other than pre-print and full-text, peer-reviewed publications should follow the guidance above insofar as is possible. Where Author & Contributor Details cannot be included due to space restrictions, the following link can be included as a proxy.
<https://www.imperial.ac.uk/mtw-centre-fibrosing-lung-disease/>

Role of corresponding author.

The corresponding author is the one individual who takes primary responsibility for communication with the journal during the manuscript submission, peer review, and publication process. The corresponding author typically ensures that all the journal's administrative requirements, such as providing details of authorship, ethics committee approval, clinical trial registration documentation, and disclosures of relationships and activities are properly completed and reported, although these duties may be delegated to one or more co-authors. The corresponding author should be available throughout the submission and peer review process to respond to editorial queries in a timely way, and should be available after publication to respond to critiques of the work and cooperate with any requests from the journal for data or additional information should questions about the paper arise after publication.

Collaborative studies involving GSTT / Royal Brompton Hospital and Imperial College London staff

Collaborative studies a) where evaluation of samples taken (including bronchoscopy, post-surgical tissue and explant tissue) primarily for clinical purposes where additional research samples are collected or b) make use of clinically collected data will offer authorship based on the degree of involvement in the study.

Where staff have detailed knowledge of the study and fulfil all four of the ICMJE criteria listed they will be listed as title-line authors.

Staff from the institution where patients are cared for, phenotyped, monitored and treated and samples are obtained, will be offered material involvement in the study so they may have the detailed knowledge of the study and the opportunity to contribute and meet ICMJE criteria for authorship. To avoid duplicate studies, to mitigate future disputes, and to ensure transparency, collaborative studies will be presented and registered on the MTW Centre Website and presented at the weekly RBH research meeting whilst in planning phase with a record to be kept of all studies presented and hosted on the MTW Centre website.

Where staff have collected samples and fulfil all four of the ICMJE criteria listed they will be listed as consortium authors.

Staff who have been involved in patient diagnosis and care and have collected samples but do not have substantial involvement and do not fulfil sufficient ICMJE criteria to qualify for authorship acknowledgements will be listed in the appropriate section.

Where this work forms part of larger multicentre projects the authorship options may be limited by external constraints and priority will be provided to those directly undertaking the research. There will be an expectation that the MTW centre is acknowledged in any resulting publication.

Prospective or externally funded investigator led interventional or observational trials

These studies include externally funded investigator led trials, prospective sampling and follow up of patients and in general will involve obtaining patient level consent with a predefined (and ideally published) protocol and REC approval in place.

All prospective studies should have an agreed steering committee and analysis plan in advance of obtaining samples or data and should be listed on the MTW webpage. The principal investigator will take responsibility for determining the title-line authorship.

Dispute Resolution

It is possible that certain decisions on authorship might occasionally be difficult and lead to disagreement and challenge.

Where disagreements occur over authorship occur following deposition of analysis plan or publications on the MTW Website the following escalation protocol should be followed until agreement is reached.

- 1) Arrange minuted meeting with PI to discuss.
- 2) Raise as agenda item and attend MTW Steering group meeting to get the Committees advice.

- 3) If authorship disagreement persists and involves GSTT- RBH clinical staff, arrange a minuted meeting with clinical lead for ILD, research lead for ILD and Director of research at RBH and Chair of the MTW Centre Steering Committee.
- 4) Send formal request for Dispute Resolution committee for independent mediation.

Under no circumstances should journals be directly contacted regarding publications under review or in press without agreement of the PI and approval by MTW Steering Committee as this can lead to serious reputational damage for all concerned.

If required, authorship disputes will be reviewed by the MTW Centre dispute resolution team who will consist of four clinicians and academics from GSTT-RBH and Imperial College London with editorial experience in medical publishing and who do not have authorship interests in the manuscript leading to the dispute.

The dispute resolution team will provide an annual report to the MTW Centre steering committee outline disputes and outcomes in the prior year and make suggestions for updating the ILD publication policy.