



Ghostwriting in Clinical Research: An Unethical Practice

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In every research, timely reporting and documenting its outcome is an ethical necessity—dissemination of finding through preparing the manuscript based on guidelines and principles. In clinical research, presenting findings in a meaningful way is equally important. Sometimes researchers take help from other people, those who were not involved in a particular research group or study. This is known as “Ghostwriting”.

Christy Walsh coined the term “ghostwriter” in 1921. The word “Ghostwriter” means back-formation or to write for another who is the presumed author. These ghostwriters neither are visible to editors, peer reviewers, readers, or those who may wish to hire the author or the writer, they also publicly not accountable for their work because they did not get any credit. Drummond Rennie stated that “Ghostwriting is deliberately deceptive and foolish because it allows writers to let their work be taken by others”.

Editors encounter some obstacles when ghostwriting is involved such as difficulty in reviewing and consideration of a manuscript. They also face difficulty in identifying potential biases and conflicts, which need to be made available to readers. Sometime after publication if they need any modifications or revisions so they are unable to do. That’s why sometimes editors also lost trust in authors.

Some medical editors value the way of writing, not the ghosting. They believed that any ghostwriter involved in writing should be acknowledged just as a statistician or laboratory assistant. All members or organizations engaged in the research work must be recognized if they did the work as an author or acknowledged if they supported the work. I think there should be an explicit

instruction before accepting the manuscript that ghostwritten papers are unacceptable. It’s good if all the authors write their papers, and develop skills to present their idea in their own words and write them well. The reasons authors prefer ghostwriting are due to lack of time, poor writing skills, less confidence to get published in highly indexed journals, and lack of information about how to prepare the manuscript for some reputed journals.

To overcome these ghostwriting practices, we need to adhere to guidelines for research reporting and writing. There should be a proper authorship criterion, which includes what and how the author contributed to particular research work. This will also help to prevent conflict of interest between authors. In every research work, there should be a clear acknowledgment section that gives credit to all who contributed substantially to a manuscript but who do not merit authorship. This is the place to disclose the medical writer assistant who helps in writing the manuscript. Authors ensure that before acknowledging get written permission from all persons to be named. The author can also declare the contributorship if they include professional writers in assisting with preparing a draft of the manuscript, finding relevant literature review, and preparing the manuscript and additional files such as graphs, and figures as per the requirement of the journal.

Ghostwriting is ethically not acceptable writing practice. A key to maintaining ethical standards is to communicate or disseminate the finding with proper disclosure including disclosure of the contribution of the writer and assistant and acknowledge them.