

TITLE PAGE

PREDATORY OPEN-ACCESS PUBLISHING IN PALLIATIVE AND SUPPORTIVE CARE

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Running Head: Predatory publishing in palliative care

INTRODUCTION

Predatory publishing is commonly defined as an exploitative, fraudulent, open-access model that applies charges to authors without providing proper editorial services, characteristic of legitimate journals¹. This phenomenon is universally considered as one of the most serious threats to scientific community. To enhance awareness among scholars and clinicians, predatory publishing has been surveyed in several biomedical fields, such as neuroscience, orthopedics, rehabilitation and anesthesiology²⁻⁴. The aim of the present study is to describe the characteristics of predatory publishers and journals in the field of palliative and supportive care.

METHODS

Two authors independently (AB, EG) surveyed an archived, freely accessible version of the original Beall list⁵ of potential predatory publishers and journals, which is still the most authoritative source of information about this topic⁶. Three other authors (AC, FS, FL) were involved to solve discrepancies. Our search strategy for journals and publishers consisted of the following keywords: "Palliative", "Supportive", "Pain", "Analgesia" and "Hospice". In case of doubt, pertinence of the journals was evaluated by consensus among using available information from journals' website.

We registered the following data: number of journals and published papers; publishers' reported location (reported location was verified through Google street view)^{2,4}; number of editorial board (EB) members and competency basing on the reported affiliation (using a cut-off of 30% of EB with incongruent affiliation); Editor-in-Chief (EIC) presence and number of published article (as retrieved by Scopus); availability of email contacts; declared review time (time-lapse between submission and acceptance); article processing charges (APC); metrics; English form evaluated by a native speaker. We also verify the reported registration/indexing in the following databases: PubMed, Scopus, Google Scholar, directory of open access journals (DOAJ)⁷, Committee of Publication Ethics (COPE)⁸, International Committee of Medical Journal Editors (ICMJE)⁹. The last date of the search was 15 October 2018.

RESULTS

From both lists of 1206 publishers and 1383 standalone journals, we identified 57 journals from 43 different publishers.

Address, email and language

The vast majority of the publishers' websites reported a primary address in the United States (24/43, 57%), followed by India (6/43, 14%) and the United Kingdom (2/43, 4%). The remaining publishers (6/43, 14%) stated to be located in Canada, Hong Kong, the Netherlands, Hungary, Hong Kong or Pakistan. In two (4%) cases, the address was not specified, while in three (7%) cases multiple addresses were reported.

Forty-nine percent (21/43) of publishers' addresses was judged as "unreliable". Six (14%) publishers' website reported a primary address not consenting any localization.

A professional email address (related to an editorial or publisher office) was reported in 53 (97%) of the journal websites. The quality of English language was judged as "very low" in 6 (11%) journals, "low" in 20 (35%) and "standard" in 31 (54%).

Databases, Metrics, International Standard Serial Numbers

Thirty-one (54%) journals claimed to be indexed in one or more database, with a median number of databases of 10 (interquartile range – IQR - 5–12; range, 1–16). The number (and percentage) of journals claiming to be indexed in the major databases or registries (i.e., PubMed, Scopus, Google Scholar, ICMJE, COPE, and DOAJ) and with a verified indexing or registration are reported in Table 1. Forty percent (23/57) of journals declared to use one or more "misleading or fake metrics", such as "Global Impact Factor", "Index Copernicus", and "CiteFactor". Twenty-one (37%) journals reported an International Standard Serial Number (ISSN), which was verified as regularly "registered" in all cases.

APCs and Submission Process

A total of 45 (79%) journals clearly reported the APC amount for publication. The median APC amount was 960 USD (IQR 519–1700 USD; range, 0–3649 USD). Twelve (22%) journals declared to apply an APC reduction for authors submitting articles from low- or middle-income countries.

In the identified journals, manuscripts could be submitted through a webpage (19/57, 33%), by email (16/57, 28%), a combination of email/webpage (10/57, 18%) or email/submission manager (9/57, 16%) and a submission manager only (2/57, 4%). In 1 case, this information was absent.

Editor-in-Chief and Editorial Board

The EIC name and affiliation was reported by 28% (16/57) of the journals. EICs authored a median number of 99 (IQR 64–180; range, 1–280) articles in Scopus. EB was reported in

70% of the journals, with a median of 22 members (IQR 13–29; range, 3–96). On the basis of the reported affiliation, EBs' competency was judged as incongruent for 5 (9%) journals, while indeterminable for 22 (39%) cases.

Invitation of collaboration as a Reviewer was present in 25% of the journals' website, while in 21% of the cases it was found a call to join the EB.

Published Articles, Review Process, and Editorial Flow

Thirty-five (61%) journals published one or more articles, with a median number of 20 (IQR 6–67; range, 1–521) publications in a median time of activity of 2 years (IQR 1–4; range, 1–11). In the 57 identified journals, the total number of published articles was 2404.

The review process time could be analyzed in 89% of the cases; in the remaining 11%, the dates of submission and/or acceptance were not reported. The median duration was 29 days (IQR 14–59 days; range, 2–262). The editorial process (including peer review) was clearly described in 30 (53%) journals; only 15 (26%) journals reported the criteria for scientific misconduct and article retraction.

DISCUSSION

To the best of our knowledge, this is the first attempt to analyze the phenomenon of predatory publishing in the field of palliative and supportive care. Globally, the characteristics of retrieved journals and publishers, locations, APC are in line with those described for other biomedical fields²⁻⁴. Interestingly, almost half of publishers' reported locations that appeared unreliable when checked (e.g. detached house with swimming pool, football field, postal boxes, pharmacies, supermarkets). The most important finding is that journals reported false indexing in PubMed, Scopus, Google scholar, DOAJ, COPE and ICMJE. Thus, authors may be prone to submit manuscript to these journals basing on false reported information. This finding has been already described in other settings, leading to a call for more stringent criteria for indexing, especially in major databases¹⁰.

Although shedding light on the phenomenon of predatory publishing in palliative and supportive care, our investigation, has several limitations. First, predatory publishing is a rapidly evolving phenomenon. Although the version of Beall list we used is constantly updated, it is still possible that some predatory journals and publishers were missing. Second, "blacklist" seems to be not the best way to evaluate legitimacy of a journal. The presence of a journal or publisher in this list should not be considered as a certain proof of "predatory" activity because editorial practice may change, and hopefully improve, over

time⁴. However, all the that analyzing the phenomenon in other fields used the Beall list²⁻⁴, which remains the most authoritative and validated source of information, even though criticized⁶. We suggest that authors should use all available information when evaluating journals before submission. Some awareness campaigns have been launched (e.g. the “Think. Check. Submit” campaign) to help scholars in evaluating journals before submissions. Moreover, checking reported information, when in doubt, may help in identifying false metrics, indexing and registration.

Table 1. Declared and Verified Indexing/Registration of Retrieved Journals

Database	Journals Claiming to be Indexed or Registered, n (%) (Total: 57)	Verified Indexing or Registration, n (%)
<i>PubMed</i>	5 (9)	2 (40)
<i>Scopus</i>	4 (7)	2 (50)
<i>Google Scholar</i>	29 (51)	10 (34)
<i>ICMJE</i>	21 (37)	5 (24)
<i>COPE</i>	13 (23)	0 (0)
<i>DOAJ</i>	4 (7)	0 (0)

ICMJE: International Committee of Medical Journal Editors; COPE: Committee of Publication Ethics; DOAJ: Directory of Open-access Journals

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