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Plagiarism

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Plagiarism

“To steal ideas from one person is plagiarism; to steal from many is research.”

Steven Wright
Case/ Incident

• Two residents, under the mentorship of a faculty member (whom reviewed the material and approved its submission), submit a case report to our medical journal, *Advances in Clinical Medical Research and Healthcare Delivery*.

• A few weeks later, the authors, as well as the residency director, received an email from the journal editor. The email contains a serious concern: much of the case report's discussion section appeared to have been copied from other sources. The email includes extensive screenshots.

• The mentor was both shocked and embarrassed by this revelation – as was one of the two residents (the one that did not write the discussion).
colonization by Aspergillus spp. is often difficult to distinguish from IPA, particularly at an early stage.

Airway colonization by Aspergillus species is a common feature of chronic pulmonary diseases. Aspergillus can usually colonize in the upper respiratory tract, where the progress of the infection requires penetration of the spores in the lower airways, which is associated with germination and tissue invasion. Given the small size (2–3 mm) of Aspergillus spores, A. fumigatus can reach lung parenchyma through the airways. The use of culture or microscopic examination of respiratory tract specimens has been criticized because of the presence of airborne conidia of Aspergillus and the possibility that a positive culture from such specimens results from accidental contamination.

Though there is a paucity of data, there is growing evidence to suggest that COPD patients are at risk of IPA. In a review of 50 studies, COPD was the underlying condition in 26 out of 1,941 (1.3%) patients with aspergillosis. In one large study, 9% of 595 patients with IPA suffered from pulmonary disease, without distinguishing among respiratory disorders.

In COPD patients, ciliary activity of the bronchial epithelium, defense mechanisms of the airways, phagocytic host defense, and natural killer lymphocytes are often impaired, which facilitates the infectious process. Ultimately, one of the major risk factors for Aspergillus species colonization/infection in COPD patients is treatment with corticosteroids which is typically the typical management for COPD inflammatory process. As with other forms of aspergillosis, the general symptoms of IPA (primarily fever, chest pain, cough, malaise, weight loss, and dyspnea) are variable and nonspecific. The presence of a fever of >38.5°C that is unresponsive to antibacterial therapy, previously recognized as the hallmark for initiating antifungal treatment, is no longer applicable, since corticosteroid-treated patients with IPA frequently do not have elevated temperatures.

Chronic sputum and bronchiectasis often result from repeated lung infections, such as pneumonia or tuberculosis, and can lead to permanent structural damage in the airways. Bronchiectasis is a chronic inflammatory lung disease. The underlying cause is not typically identified in the majority of patients, but bronchiectasis is associated with a number of severe infections, immunodeficiency, and autoimmune disorders. Regardless of the underlying cause, the disease is characterized by a vicious cycle of bacterial colonization, chronic inflammation and airway structural damage. Bronchiectasis typically has permanent airway dilatation (often demonstrated on high-resolution CT scanning) and recurrent airway symptoms of daily sputum production and episodic infective exacerbations.

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http://www.ncbi.nlm.nih.gov/pmc/articles/PMC88920/

indicate the extent of the disease and whether bone invasion has occurred. CT scanning can be used in conjunction with brain magnetic resonance imaging in patients with cerebral aspergillosis. The use of culture or microscopic examination of respiratory tract specimens has been criticized because of the presence of airborne conidia of Aspergillus and the possibility that a positive culture from such specimens results from accidental contamination. The presence of A. fumigatus in clinical samples from patients at risk for IA is, however, highly suggestive of an infection, a conclusion which is supported by a careful study.
Who is Responsible?

• Resident that wrote the discussion section?
• Resident that wrote the rest of the manuscript?
• Faculty mentor/senior author?
• All of the above?
Learning objectives

• Plagiarism overview
• A special case: LLM and academic writing
Plagiarism

• Latin word for “to kidnap”

• According to the Merriam-Webster online dictionary, “to plagiarize means: to steal and pass off (the ideas or words of another) as one's own; to use (another's production) without crediting the source; to commit literary theft; to present as new and original an idea or product derived from an existing source”
Your writing and reader’s impression

No citation, No quotation marks
• Your own idea/ opinion and it’s elaboration in your own words
  • The literature to date seems to support the placement of a hot tub in the GME office for the ACMO’s well-being.

Citation but no quotation mark
• someone else’s information written or interpreted in your own words
  • The literature to date seems to support the placement of a hot tub in the GME office for the ACMO’s well-being.²

Citation with quotation mark
• someone else’s information in their words
  • “The literature to date seems to support the placement of a hot tub in the GME office for the ACMO’s well-being.”²

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²Alweis R. The importance of hot tubs in the well-being of Associate Chief Medical Officers: A Systematic Review and Meta-Analysis. Imaginary Journal of Fictional Results 2024. 2:3; 45-61.
• A resident found a case for their noon conference presentation. They looked online and found a similar case which was published in the 1970’s in a little known, now defunct journal. They liked the way discussion section was written. In fact they liked it so much that they wrote it verbatim in their discussion section.

Is this plagiarism?

Yes

No
A resident found a case for their noon conference presentation. They looked online and found a similar case which was published in the 1970’s in a little known, now defunct journal. They liked two sentences in the discussion section of the case report. In fact they liked it so much that they wrote it verbatim but used quotation mark and appropriate reference.

Is this plagiarism?

Yes

No
Plagiarism is

• Submitting someone else's work as your own
• A resident hears a colleague discussing a research project that they want to do. He feels that the project is promising and would lead to a publication. The resident gathers his team and submit an IRB proposal without collaborating with his colleague.

Is this plagiarism?
Yes
No
Plagiarism is

• copying words or ideas of others without giving credit
A resident is writing a manuscript. She likes a paragraph from another article she is using as a reference. She uses the paragraph in her manuscript verbatim. She uses incorrect reference.

What are the mistakes and what she could have done differently?
Plagiarism is

• writing a quotation without quotation marks
• submitting incorrect information about the source of a quotation
  • Be careful about AI hallucinations!
A resident is writing a manuscript. She likes a paragraph from another article she is using as a reference. She uses the paragraph and changes a few words by using “synonyms” functionality in Microsoft Word. She uses appropriate reference.

Is this a plagiarism?
Plagiarism is

• Copying sentence structure with minimal word replacement
• A resident is writing a manuscript. He comes across an article which he really likes. In fact he likes the article so much that he decides to use the structure and sentences in the article. He makes a few changes in the sentences and uses the original article as a reference. Also, in the manuscript he thanks the author of the original article and says he drew inspiration from the author’s work.

• Is this plagiarism?
Plagiarism is

• Copying lots of words or ideas from a source that makes majority of your work. In such a case does not matter if you give credit.
• A resident writes a manuscript. He uses multiple articles but copy and pastes paragraphs from different articles. He rightly uses quotation mark and references. In fact the whole manuscript looks like a quotation from multiple authors.

• Is this plagiarism?
Plagiarism is

- Copy and pasting from multiple sources to create your paper (mosaic plagiarism)
Summary: Plagiarism is...

• Submitting someone else's work as your own
• copying words or ideas of others without giving credit
• writing a quotation without quotation marks
• submitting incorrect information about the source of a quotation
• Copying sentence structure with minimal word replacement without giving credit
• Copying lots of words or ideas from a source that makes majority of your work. In such a case does not matter if you give credit.
• Copy and pasting from multiple sources to create your paper
Plagiarism FAQs
How Do I Check for Plagiarism?

• Search engines
• Software – but they aren’t all that good
What are the Repercussions of Plagiarism?

- Ban from the journal?
  - Intentional Plagiarism:
    - Submitting pre-written papers or purchased papers
    - Copy and pasting from multiple sources to create your paper
    - Words and ideas of others without giving credit
  - Unintentional Plagiarism:
    - Lazy paraphrasing
    - Incomplete citation
    - Incorrect or incomplete references

- Demotion or Expulsion from institution
- Legal action, fines and penalties
- A permanent note in your residency program file

Ban likely; editors DO NOT forgive these
Ban unlikely; editors more forgiving of these
Can You Plagiarize Yourself?

• Yes, if you do not own the copyright!

• Examples of where residents, fellows, and faculty have been caught:
  • Abstract accepted to national meeting and meeting publishes its abstracts in a supplement (e.g., ACC and Circulation)
  • National meeting likely owns the copyright; check at time of submission!
  • If you can’t find the answer, ask!
Are There International Rules That Address Plagiarism?

• Yes!

• Almost all legitimate journals follow the ICMJE guidelines:
  • ICMJE | Recommendations | Scientific Misconduct, Expressions of Concern, and Retraction

• COPE (committee of publication ethics) also publishes guidelines for institutions:
  • Search resultsFlowcharts | COPE: Committee on Publication Ethics
Are There RRH Rules That Address Plagiarism?

• Yes!
• RRH has a research misconduct policy, and a research compliance officer that is charged with investigating allegations of plagiarism and presents those findings to the System CMO, whom can take disciplinary action (as laid out in separate standards)
• Misconduct in Science (pstat-live-media.s3.amazonaws.com)
When Plagiarism is Found, Which Authors are Responsible?

• All of them!

• Per the International Committee of Medical Journal Editors (ICMJE):
  4 criteria--all connected by AND not OR:

  1. “Substantial contributions to the conception or design of the work; or the
     acquisition, analysis, or interpretation of data for the work
  2. Drafting the work or revising it critically for important intellectual content
  3. Final approval of the version to be published
  4. 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.”

Adapted from:
ICMJE | Recommendations | Defining the Role of Authors and Contributors; accessed 10/6/23
Is There a Single Website That I Could Use to Remind Myself of the Rules?

• Yes, I recommend the Harvard Guide to Using Sources: Harvard Guide to Using Sources

• Don’t forget to reference websites when used as sources, too!
Why do People Plagiarize?

Symptoms of Plagiarism

- Too lazy/too hard to create own work
- Poorly designed assessment tasks
- Time poor or poor time management
- It is very easy and convenient to do
- Cultural perspectives
- Pressure to achieve high grades
- Disorganised
- Ignorant of formatting/protocols
- Lack of consequences if caught
- Low chance of being caught, others do it
- Lack of skills to extract/create information
- Language barriers
- Not exposed to modeling of best practice
- Simply doesn’t care about the ethics

If symptoms persist see your teacher librarian...

A Special Case
Large Language Models and Writing

The five recommendations are as follows:

- LLMs [large language models] or other generative AI tools should not be listed as authors on papers.
- Authors should be transparent about their use of generative AI, and editors should have access to tools and strategies for ensuring authors’ transparency.
- Editors and reviewers should not rely solely on generative AI to review submitted papers.
- Editors retain final responsibility in selecting reviewers and should exercise active oversight of that task.
- Final responsibility for the writing and editing of a paper lies with human authors and editors.

Summary

• You can easily avoid plagiarizing, but it can be hard to know what your co-authors have done. Your name is on the manuscript, so you are equally responsible
  • Trust but verify; use a search engine or other methodology to review parts that you yourself did not write
• Know the local and international rules on authorship, plagiarism/research misconduct for your own protection
• Indicate when LLMs are used in your writing
SPEED BUMP

GRAND THEFT AUTO... YOU ?

PLAGIARISM.
Some Representative References


