

## Letter

# Citation Etiquette in Biomedical Publications: False Claim of “First Reported Case”

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To the Editor:

Some individuals feel that errors in published research papers reflect poor research, and that poor training in research methodology, inadequate review by institutional review boards, and continual use of inappropriate research methods may account, in part, for the prevalence of such errors (1). In addition, the thoroughness of an individual's literature review may reflect one's understanding of the research problem being addressed in a particular study. And despite the peer review process and admonitions to authors, errors continue to make their way into the biomedical literature. As emphasized in a recent editorial in *Comparative Medicine* (2), there remains a need for careful manuscript preparation with adequate supervision and instruction of junior colleagues.

A specific problem in manuscript preparation arising from an inadequate literature review, and possibly inattention from senior authors, is the false claim of “first reported case.” This designation obviously confers some measure of prestige to the authors, but it should be invoked only after a thorough and rigorous literature search substantiates the claim (3). Otherwise, proper credit may not be given to the authors of earlier papers (4). For example, the following sentence is from a report (5) on splenic rupture recently encountered by us: “...to our knowledge this is the first reported case [of spontaneous splenic rupture] in a patient receiving streptokinase.” While spontaneous splenic rupture following anticoagulation or thrombolytic therapy is not common, a report (6) had already documented this complication of streptokinase thrombolysis twelve years earlier. In fact, an additional report—apparently the same case after inspection of the paper's English abstract—was published by the same authors (7) in another language (Swedish) the year following the original report. A literature search of the MEDLINE database (1966 to present), utilizing the search terms “streptokinase” and “splenic rupture,” yielded the English and Swedish versions of this report. Inspection of the 1978 volume of the *Index Medicus*, under the subject headings of “streptokinase”

and “splenic rupture,” also yielded both papers.

This example illustrates why authors should view literature searches and manuscript preparation more seriously, so that such errors do not get published. Falsely claiming the “first reported case” undoubtedly irritates the authors of earlier reports, as well as possibly confusing the chronology of the scientific record. Furthermore, the authors making the false claim may be embarrassed after the inaccuracy is brought to attention, and their reputations may subsequently be harmed. We expect that editors of scientific journals attempt to identify cases of “false firstedness” prior to publication, but the responsibility for verifying the legitimacy of such a claim belongs solely to the authors—a particularly important role for mentors or senior authors. While postpublication peer review affords the opportunity to correct such inaccuracies, a thorough internal review prior to submission is the preferred time to identify these false claims. And the urge to malign authors making a claim of “false firstedness” should be resisted, since few of us have reached a state of perfection in our scientific writings.

## References

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