

## Peer Review Comments and Author Responses

### Reviewer 1

1. *Dear author and editor, great article with robust arguments. This is a serious critic to a very well-regarded journal, but you presented enough evidence to support your point of view.*

Thank you for that encouraging and enthusiastic outlook.

2. *I would like to make a suggestion about considering exchanging "opacity versus transparency" in key-words (line 16 - abstract) to "IFA".*

IFA represents instructions for authors, which already appears in the title. Also, to my knowledge, it is not customary to add abbreviations to the key words. I also decided not to replace "opacity versus transparency" with IFA because the issue of opacity and transparency are essential to this paper's discussion. I will leave the decision regarding key words to the Editor-in-Chief.

### Reviewer 2

3. *Thank you very much for this opportunity to review this interesting article!  
Feedback for the Reviewer on the Paper "Trivialization of a journal's instructions for authors: Case of number of authors in letters to the editor published in the New England Journal of Medicine"*

4. *Strengths of the Paper:*

- *The paper addresses a significant concern: potential inconsistency between the New England Journal of Medicine's (NEJM) author guidelines and editorial practices regarding the number of authors on Letters to the Editor (LTEs).*
- *The author uses a data-driven approach to analyze the violations of the NEJM's author limit.*
- *The paper emphasizes transparency and accountability in editorial decision-making.*
- *The reviewer acknowledges the strengths of the systematic review approach and the discussion of limitations.*
- *The wider implications of the issue for the NEJM's prestige and research ethics are explored.*
- *The conclusion effectively summarizes the key points and calls for further investigation.*

5. *Title, abstract:*

*Overall, the title, abstract, and keywords are well-crafted and align well with the content and focus of the paper. No major suggestions for improvement are needed in this area.*

6. *Some minor comments:*

• *Possible Improvements:*

- *Strengthen the opening: Instead of "serves as a rule-book," a more impactful statement could be: "Establishes ethical and practical guidelines for authors..."*

That was an excellent suggestion. The suggested edit was made.

- *Quantify the violation: Instead of "12 out of 78," state the percentage of violations. For example: We found that 15.4% (12 out of 78) of published LTEs exceeded the NEJM's three-author limit.*

This was also an excellent suggestion. I modified the data representation, as well as the wording and expression. I also defined the limit of the sampling date.

- *Focus on impact: Briefly mention the potential consequences of violating author limits (e.g., fairness, transparency).*

I have emphasized the two potential consequences of violating author limits, i.e., fairness and transparency.

7. *Keywords:*

- *Strengths: Relevant keywords are included.*
- *Possible Improvements: Consider adding:*

- *New England Journal of Medicine (NEJM) (since it's a key focus)*

From my experience, abbreviations are not typically added to the list of key words; moreover, also from my experience, words that appear in the title should not be repeated in the list of key words. I have thus adopted this general rule and thus did not add "New England Journal of Medicine (NEJM)" to the key words. However, I seek the Editor-in-Chief's advice regarding this specific point.

8. *Letters to the Editor (LTEs) (for specificity)*

From my experience, abbreviations are not typically added to the list of key words; moreover, also from my experience, words that appear in the title should not be repeated in the list of key words. I have thus adopted this general rule and thus did not add "New England Journal of Medicine (NEJM)" to the key words. However, I seek the Editor-in-Chief's advice regarding this specific point.

9. "journal policies" or "journal guidelines"

This was an excellent suggestion, and I supplemented “journal policies and guidelines” to the key words.

10. *Strengths of the Rest of the Paper:*

- *Detailed Analysis: The paper provides a thorough analysis of the number of author violations in NEJM's LTEs.*
- *Data Presentation: Including figures and a table (consider titling it "Examples of LTEs with Exceeding Author Numbers")*

I felt that the suggested new title was interesting, but not sufficiently specific to the studied case, so I decided not to modify the title of Table 1) strengthens the argument.

- *Wider Context: The paper discusses the broader implications for editorial accountability and author rights.*

11. *Revision Suggestions for a Stronger Paper:*

- *Focus: Sharpen the argument on author limit violations and their impact on accountability and author rights. Briefly mention topics like bias and conflicts of interest.*

That was an interesting suggestion. I had briefly considered / mentioned the issues of bias and conflicts of interest, but I added a little bit more information about these two issues and how they could be linked.

- *Alternatives: Discuss reasons beyond intentional rule-breaking for exceeding the author limit (e.g., unintentional oversight).*

That's a good point. There may be cases of both intentional and unintentional cases of rule-breaking. I expanded the argument to cover both these bases. Also, the authors whose LTEs are listed in Table 1 were emailed directly to try and gain some appreciation of the reason for this breach of journal instructions.

- *Impact: Explore potential consequences of exceeding the limit, such as effects on research quality or peer review fairness.*

Evidently, since the NEJM does not employ an open peer review format, it is difficult to explain precisely why these violations have taken place at the level of peer review, and also at the level of editorial handling. It is not even clear if letters are peer reviewed, or whether they are only handled by the Editor-in-Chief and/or select Editors, so there is an issue of opacity regarding the process itself. However, a short LTE has specific advantages and disadvantages related to a longer one, and these also are related to advantages and disadvantages for the letters' authors. Since I found this to be an interesting issue to discuss,

I added a new paragraph dedicated to this discussion. Thank you again for raising this important point.

- *Solutions: Suggest potential solutions or areas for further research on this issue.*

This was another excellent suggestion. I made a number of suggestions for improvement.

- *Language: Use neutral terms like "inconsistency" instead of "trivialization" when discussing the NEJM's practices.*

That was another very good suggestion to moderate the tone, making it as neutral as possible, allowing the facts and violations to speak for themselves. I replaced the term “trivialization” with “inconsistency” or other alternatives. This has even impacted the title now, so thank you for this great suggestion.

- *Limitations: Briefly mention limitations like using a single journal (NEJM) and focusing solely on author numbers.*

These limitations were already noted in the last paragraph.

- *Flow: The response from the NEJM editor could be integrated into the discussion of editorial discretion.*

I relocated the response by the Managing Editor.

- *The paper primarily focuses on the NEJM's potential violation of its own rules. Briefly discuss alternative explanations for exceeding the author limit. Perhaps some authors unintentionally exceeded it due to oversight.*

As was noted above, I expanded the argument to cover both intentional and unintentional possibilities, giving the authors of the LTEs in Table 1 an opportunity to respond.

- *Slightly strengthen the concluding remarks by highlighting the broader relevance of the findings and the need for increased accountability and transparency in academic publishing.*

Slightly enhanced arguments have now been made.

- *Citations: Ensure all citations are formatted correctly.*

PPCR journal referencing style was followed.

*Addressing Abbreviations:*

- *Mention and define COPE, ICMJE, IFA, LTE, and NEJM at their first use in the text.*

All abbreviations were defined in full at first mention.

12. *Overall, this is a well-executed and thought-provoking paper that addresses an important issue in research and publishing ethics. With a few minor refinements, it could make a valuable contribution to the field.*

Thank you for this encouraging and positive feedback. I sincerely hope that the edits and improvements that were made are to your satisfaction.

### Reviewer 3

13. *The article is very straightforward in highlighting a critical issue, in this case within the NEJM regarding the violation of authorship guidelines. It uses detailed data to support the established claims, which translates to a clearly strong basis for the arguments. The ethical implications are very well explained and defined, providing great points on the importance of editorial accountability and adherence to established guidelines.*

*Possible areas of improvement would be the following:*

*-Providing a broader analysis to include other high-impact medical journals other than NEJM would provide a more comprehensive understanding of how large in scale this issue is, providing more evidence to the argument, and hence more validity to the article itself.*

This is a very time- and energy-consuming task, so this is a first assessment using a premium medical journal. I have acknowledged that one limitation of this study is that it focuses only on one journal, and have also noted that a future analysis could look at other top-tier medical journals to assess whether the same phenomenon is taking place elsewhere. Having clear data about the NEJM only does not diminish the importance of the findings, even if other journals are not analyzed, in my opinion. Should this paper be accepted and published, however, then this is a strong motivation to complete a future larger-scale analysis using other journals and a larger team.

14. *Data organization and improvement in data visualization is a great recommendation for this article. The text on the discussion for the great points that are mentioned throughout this article, could be organized in sections, in order to show the arguments in a clearer way. There is a lot of quantitative data that is very well described and analyzed, however showing this information in figures and/or tables could definitely make the information more visually understandable.*

Indeed, the text was presented as a continuum of information, running logically from one paragraph to the next. However, following this suggestion, I have introduced some sections to make it easier for the readers to digest the information and to make the paper's content and findings easier to follow.

15. *Providing recommendations for the NEJM and other journals with this situation would add practical value to the article. For instance, suggesting solutions such as for improving transparency and reinforcement of guidelines could promote better editorial practices.*

I made a number of suggestions for improvement.

16. *Perhaps, if this was an option, trying to gather information from the editors of the mentioned LTE to not only have “one side of the story” in this case, regarding the violation of authorship guidelines; if they had any limitations or were instructed as to having these guidelines not apply to certain cases, for instance.*

This was a very good idea. I sent an email request to each of the corresponding authors of the letters in Table 1, indicating that NEJM had a 3-author rule, and then requesting any information or insight as to why their letter had in excess of the stipulated limit to the number of authors. In one case, no corresponding author was listed, so the two seniors (last authors) were contacted.

17. *Overall, this article seems to be a valuable contribution to the topic on publishing ethics and editorial practices. By addressing the identified areas for improvement, it can provide even greater insight in a more detailed and organized way, and practical solutions to the challenges medical journals face in keeping up with ethical guidelines with integrity.*