

The growing number of authors signing scientific articles in recent decades has called the attention of editors of Brazilian^{1,2} and foreign journals^{3,4}, who are concerned with the resulting ethical and operational implications, particularly with regard to the overload in bibliographical documentation and information systems. This issue surfaced again recently after an article published in *Jornal de Ciência Hoje*, referred to a stance taken by the editor of *Jornal de Pneumologia*, which had produced a reaction by the general reading public⁵.

Multiple authorship — particularly in the field of medical and biological sciences — became an increasingly frequent phenomenon in early 1950s. For example, from 1920 to 1980, the *American Journal of Public Health* suffered a decrease of some 90% in the number of articles signed by one single author⁶. This same trend was observed in several similar journals^{7,9}, and there are famous cases like the article published by the Japanese journal *Kansenshogaku Zasshi* in 1986, with — hold your breath — some 193 authors!¹⁰

In a provocative article entitled “The Weight of Medical Knowledge”¹¹, D. Durack estimated that from 1955 to 1977, the average weight of a copy of *Index Medicus* had increased sevenfold, to a whopping 30 kg! According to the author, this gain in *weight* was due — at least in part — to a significant increase in the number of authors per article.

The phenomenon of multiple authorship should be viewed as consequence of the process of growing scientific specialization, to the extent that the growing sophistication of technical and methodological procedures in subjects pertaining to the health field necessarily leads to multiprofessional collaboration, resulting in the publication of articles with multiple authors.

Perhaps one of the greatest dilemmas for authors and editors is how to determine which quantitative level(s) of participation in research work justify(ies) *co-authorship*. A number of different editors have produced vast material on this issue^{12,14}. Some editors have suggested an upper limit of, say, five

authors per article¹². Others prefer to leave this entirely up to the principal author, calling their attention to observance of recommendations in a document produced by the *International Committee of Medical Journal Editors* with regard to criteria for authorship and of scientific works. These recommendations have been accepted by over 300 journals and are published in Spanish in the *Bol Of Sanit Panam*, vol. 107, pp. 422-37, 1989.

According to this document, all authors should have substantial intellectual participation in the conception, execution, and drafting of an article in order to assume **public** responsibility for the same^{7,15}. Credit to other collaborators should be given in the section on **acknowledgements**, at the end of the article.

Some suggest that the concept of **authorship** of scientific works be replaced by that of **credits**¹⁶. According to this idea, a list of credits would be attached at the end of articles, indicating each collaborator's specific contribution, much as in cinema productions. Readers will note from this brief discussion of scientific authorship that there is an intense debate underway in the editorial world and considerable concern over the growing number of cases of *irresponsible authorship*^{1,2,7}. It is important that editors of Brazilian scientific journals be aware of this debate and seek to take the necessary steps to discourage such abuses in the field.

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References: (1) *Rev Inst Med Trop S Paulo* 29:191-93, 1982; (2) *Rev Assoc Med Brasil* 32:183-84, 1986; (3) *Br Med J* 287:1569-70, 1983; (4) *Can Med Assoc J* 130:842, 1984; (5) see *Jornal de Ciência Hoje*, 1993, issues 273 and 276; (6) *Am J Public Health* 76:809-15, 1986; (7) *Bol Of Sanit Panam* 108:141-52, 1990; (8) *Lancet* 2:1090-91, 1976; (9) *N Engl J Med* 301:180-83, 1979; (10) *Science* 241: 1437, 1988; (11) *N Engl J Med* 298:773-75, 1978; (12) *Lancet* 2:815, 1984; (13) *Am J Public Health* 77:271-73, 1987; (14) *Ann Intern Med* 97:602-5, 1982; (15) *Br Med J* 291:722-24, 1985; (16) *Ann Intern Med* 100:592-594, 1984.