

FROM THE EDITORS' DESK It's OK to Talk About It: Exceptions to the Ingelfinger Rule

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F inding that a new way of organizing his clinic had improved patient care and reduced costs, a prospective author asked if he could send the draft manuscript describing it to his hospital leadership for discussion. "I don't want to hurt its' chances of being published," he said, "but I want to give them a heads up."

"Information wants to be free," Stuart Brand famously told Apple cofounder Steve Wozniak as the internet was being born.¹ Even as far back as the 1930s, Michael Polayni and other scientists proposed that the strongest inquiry springs best from a radical transparency. Though never implemented, their program proposed the elimination of scientific copyrights (and even patents), foreshadowing today's open-access journals. They thought free dissemination of findings a boon to truth and the best antidote to false doctrines like the Stalin-endorsed but errant biologic theories of Lysenko.^{2,3} Our times tend again toward doctrinaire fact-free assertions, yet true information dissemination is cheaper and easier than ever. Why, then, do the editors of JGIM ask you not to disseminate your work before we publish it?

The Ingelfinger rule, named for a New England Journal of Medicine (NEJM) editor, dates back to 1969.⁴ Journals that adhere to it, including JGIM, require that accepted articles' findings have not appeared elsewhere. In their full-throated defense of the rule even as electronic communication became ubiquitous, subsequent NEJM editors Marcia Angell and Jerome Kassirer credited it with keeping poorly researched articles and biased overenthusiastic researchers out of the public eye.⁵ So many findings announced directly to the lay press fail the ensuing quality control of peer review—do readers remember cold fusion or more recently, Theranos? Others worry more about the lives lost while waiting for important findings to see the light of day. They urge medical researchers to follow astronomers and computer scientists and post preprints of their work on publicly available websites as they undergo review so as to speed awareness and change practice faster.

On balance, we believe that rigorous review is worth the wait. However, like all good rules, the Ingelfinger rule lives or dies by its exceptions. Vigorous debate is at the heart of scientific discourse, so presentations at scientific conferences are a time-honored exception, as are public health announcements and congressional testimony. The editors of this journal think that the

abovementioned prospective author's urge toward local improvement priorities should be honored as well. If a hospital, university, or agency hosts an author's work, respect for that partnership justifies their learning how that work might affect them. Changing practice is hard, and having local knowledgeable advocates helps. Especially in health services research, testing ideas in your own practice environment is often part of their development.

So please do not call press conferences about your good work before JGIM gets a chance to publish it. But feel free to talk to your colleagues and your leadership individually about it without fear. This includes sharing the manuscript within your organization and debating its merits as long as it is marked not for further distribution. It also includes limited use of social media, in our view, such as short posts about findings previously presented at scientific conferences that avoid a link to the unpublished manuscript. We will speed the time to online publication as much as possible, and afterwards, we will do what we can to bring the findings to the public eye including sometimes providing free open access. We hope most journal editors feel the same.

NOTES

- 1. Brand, S, *The Media Lab: Inventing the Future at MIT*, Viking Penguin, 1987.
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- 4. Definition of sole contribution. N Engl J Med 1969;281: 676–677.
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- 6. Ioannidis JP. Stealth Research and Theranos: Reflections and Update 1 Year Later. JAMA 2106;316(4):389–90.
- 7. Lauer MS, Krumholz HM, Topol EJ. Time for a prepublication culture in clinical research? Lancet 2015;386(10012):2447–9.

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Compliance with Ethical Standards:

Conflict of Interest: The authors declare that they do not have a conflict of interest.