Building trust in journals and in peer review: need of the hour during the COVID-19 pandemic

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We read with interest about the survey carried out by a group of international rheumatology journal editors [1]. The survey assessed the opinions of authors, reviewers and other scholars on the impact of the COVID-19 (Coronavirus disease 2019) on scholarly publishing and journal targeting. This survey has come in a critical time when most journals are possibly handling a deluge of submissions compounded by logistics limitation due to the pandemic. Many reviewers and also editors may still be overburdened by their clinical duties. Also, a spate of retractions in high-ranking journals have increased the stress on reviewers and editors as gatekeepers of science [2].

Though a third of the respondents often targeted local journals, only half of this number (17% of total) reported trusting their local society journals! This might have been made worse by poor previous experiences with possible predatory journals. Even in the scholarly group surveyed, 16% were not aware of predatory journals. In a previous survey amongst Indian rheumatologists, the second most widely read rheumatology journal was the society journal of the Indian Rheumatology Association (IRA), the Indian Journal of Rheumatology [3]. We are of the opinion that the trust in a journal is decided by its reviewers as much as its editors.

"Soft peer review" would lead to damage, including flawed and biased evidence as well as retractions. The system of peer review may not be perfect, but it is indispensable [4]. In the survey, a majority (63%) felt that the use of preprint servers without peer review would promote pseudo-scientific and untrustworthy articles. However, peer reviewers are often blamed for being “too strict” [5]. The editors’ comments are often generic, but the peer reviewers’ words are personal.

It was motivational to read a recent Lancet editorial boosting trust in peer review [6]. The Lancet editors have also recognised the fact that some of us in low-to-medium income countries are often overwhelmed with clinical work, and peer review usually has to be done sacrificing our leisure time or even sleep. It is encouraging to receive appreciation for this apparently thankless task with initiative such as Publons and the ‘Peer review week’ held every September since the last 5 years [4].

Some reviewers are altruistic and par excellent. Sometimes, language leads to misunderstanding, especially with non-Anglophone writers [7]. At other times, the geopolitical or epidemiological differences in distant parts of the world may confuse. Another major issue of contention between editors and authors seems to be associated with plagiarism. Novice authors may not be aware that plagiarism is not just verbatim copy but the appropriation of ideas by various means without giving due credit [8].

For rheumatology, the Emerging EULAR (European League Against Rheumatism) Network (EMEUNET) group has initiated a mentored training programme for learning the nuances of peer review [9]. We believe that this will go a long way in strengthening the review quality and building trust in the process. The process can be further reinforced by integrating peer review into rheumatology education [10].

We honestly believe all peer reviewers work to improve the quality of manuscripts and, thus, of science. Authors sometimes confuse rejection with negativism about their work. Sometimes it is difficult for reviewers to opine honestly. Most reviewers still endeavour to use the best...
language. This fosters confidence of the authors in journals and in the peer-review system at large. However, an offhand remark may hurt the very foundations of trust that generations of peer reviewers and editors have attempted to protect along with the sanctity of scientific publishing.

Compliance with ethical standards

Conflict of interest Sakir Ahmed declares that he has no conflict of interest, including no relationship with pharmaceutical companies. Mohini states that she has no conflict of interest, including no relationship with pharmaceutical companies.

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