

November 15, 2004

NIH Public Access Comments
National Institutes of Health
Office of Extramural Research
6705 Rockledge Drive, Room 350
Bethesda, MD 20892
Via e-mail: PublicAccess@nih.gov

RE: Enhanced Public Access to NIH Research Information

The Infectious Diseases Society of America (IDSA) appreciates this opportunity to provide comments in response to the notice of the National Institutes of Health (NIH) of its proposal to enhance public access to NIH research information (69 Fed. Reg. 56074, September 17, 2004). IDSA wishes to express its appreciation for the valuable role that NIH plays in fostering scientific research and promoting science in the interest of public health. As a member of the non-profit publishing community and a signatory of the DC Principles for Free Access to Science, IDSA commends NIH for the laudable goal of expanding access to scientific information. However, IDSA has concerns about whether the current NIH proposal can be implemented without unintended consequences on NIH grantees; the integrity of the peer-reviewed scientific literature; and the publishing community, including non-profit medical societies that reinvest revenue from their journals in the direct support of science worldwide. We urge NIH to fully assess the possible consequences of the proposal before putting it into place.

Journals of the Infectious Diseases Society of America

IDSA represents nearly 8,000 physicians and scientists devoted to patient care, education, research, and community health planning in infectious diseases. IDSA has two peer-reviewed scientific journals: *Clinical Infectious Diseases (CID)* and the *Journal of Infectious Diseases (JID)*. Approximately 45 percent of articles published in *JID* have NIH funding; approximately 55 percent of *JID* articles have some type of government funding. Approximately 11.5 percent of articles published in *CID* have funding from NIH; approximately 31.5 percent of *CID* articles have some type of government funding. Revenue from IDSA's journals helps to support IDSA's mission and activities, including research grants, scholarships, scientific meetings, educational outreach and advocacy, the free dissemination of information for the public, and improvements in

scientific publishing. *CID* and *JID* have implemented the following forms of free access:

- Selected important articles of interest, including all IDSA practice guidelines and all electronic-only manuscripts published in *CID*, are free online from the time of publication.
- The full text of all articles in both journals is freely available online worldwide within 12 months of publication. *CID* has published more than 5,784 articles online. Of these, 4,804 are freely available, while 980 are access-controlled. *JID* has published more than 5,025 articles online, with 4,081 freely available and 980 access-controlled. In sum, approximately 80 percent of *CID* and *JID* content is available online at no charge.
- The content of both journals is available for free or at greatly discounted rates to scientists in many resource-limited countries through IDSA's participation in the World Health Organization's Health InterNetwork Access to Research Initiative (HINARI). In addition, IDSA offers greatly discounted dues, including journal subscriptions, to individuals in resource-limited countries.

Comments of the Infectious Diseases Society of America

IDSA agrees that scientific research should be more broadly and readily accessible. We respectfully request that NIH consider the following questions and concerns about how best to achieve this goal:

1. What is the evidence of the need for this proposal? As noted above, IDSA, like many non-profit publishers, has invested in technology and software to make the contents of its journals more widely accessible. IDSA's journals are two of the 4,500 publications that participate in Medline, which enables readers to search for topics in 14 million articles, about 1 million of which are freely accessible. In addition, popular search engines such as Google enable members of the public to search the scientific literature even without having specialized knowledge of scientific sites. Finally, libraries across the country continue to make peer-reviewed journals available to the public. The fact that scientific literature is more accessible now than ever before raises the question of whether the federal government needs to be involved in dictating when access to journal content will be granted.

2. What impact will this proposal have on NIH's ability to support biomedical research? There would be substantial costs associated with developing, hosting, and maintaining a web repository of all NIH-funded research. Estimated costs range from \$2.5 million per year to \$50 million per year. PubMedCentral (PMC) already accounts for \$2.5 million of the budget of the National Library of Medicine. Given the existence of numerous information resources, is such an expansion of PMC an appropriate use of NIH's limited budget?

3. What impact will this proposal have on journal publishers? There is a striking lack of data about potential consequences in this area. A government-mandated schedule for

giving away access to manuscripts could harm publications that rely on subscription and advertising revenue to cover their costs.

4. What will be the impact on authors if journals are forced to impose large author page charges to make up for a decline in subscription revenue?

5. How will the proposal affect the scientific literature? IDSA has concerns about the scientific integrity of manuscripts that would be deposited in PMC under this proposal. Journal publishers invest substantial time and resources in the peer-review and editing processes, identifying mistakes, such as drug dosing errors, that could have serious consequences if published. Will early, unedited versions of manuscripts be available on PMC? What means will exist to ensure the integrity of the archived content? In addition, IDSA requests that NIH consider the implications of having access to NIH-sponsored studies without access to accompanying editorials (not funded by NIH) that put the work in perspective.

6. What will be the impact on copyright? IDSA requests that NIH consider the possibility of third-parties selectively using scientific studies for commercial gain, as has previously happened with work that has been published in scientific journals (N Engl J Med 351;13, 1343). As copyright holders, journal publishers are able to take legal action to stop such action and correct any misleading information that has been distributed to the public.

7. What guidance can NIH offer on issues related to plagiarism or scientific misconduct? Although rare, instances of plagiarism and scientific misconduct sometimes arise after a journal accepts a manuscript for publication. Journal publishers have developed policies and procedures for addressing these issues, yet the NIH proposal is silent on this matter.

In closing, IDSA appreciates the opportunity to comment on the NIH proposal. We remain committed to furthering the cause of science through promoting excellence in journal publishing and promoting access to scientific research.

Sincerely,



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Stanley M. Spinola, MD
Chair, IDSA Publications Committee

