



It's Time to Acknowledge Authorship for Librarians and Information Professionals on Evidence Synthesis Publications

Act in accordance with the Committee on Publication Ethics (COPE) guidance and International Committee of Medical Journal Editors (ICMJE)

Librarians and information professionals have a vital role in the development of evidence synthesis publications, such as guidelines and systematic reviews. These contributions include refining clinical questions, identifying appropriate resources, performing comprehensive literature searches, providing reproducible search strategies, and writing the methods section of the manuscript.

Librarian and information professional expertise is essential for objective and unbiased methods upon which clinical decisions are made. Several research reports show having a librarian as a coauthor correlates with better search reproducibility, greater transparency, better reporting (1-3), and a lower risk of bias (4) in evidence synthesis. In addition, several guidelines, such as the Cochrane Handbook for Systematic Reviews of Interventions and the 2011 guidelines from the National Academy of Medicine, strongly recommend including a librarian or information professional as part of the evidence synthesis team (5,6).

In accordance with [Committee on Publication Ethics \(COPE\) authorship and contributorship guidance](#) and [International Committee of Medical Journal Editors \(ICMJE\) authorship criteria](#), librarians and information professionals merit authorship on evidence synthesis publications, such as guidelines and systematic reviews, for their intellectual contribution to the final work.

The Medical Library Association (MLA) and Canadian Health Libraries Association/ Association des bibliothèques de la santé du Canada (CHLA/ABSC) serve as professional homes for more than 500 health sciences librarians and information professionals who contribute to guidelines and systematic reviews. MLA and CHLA/ABSC both have systematic review and knowledge synthesis communities of practice which provide specialized education and publications on guideline and systematic review development. The skilled and knowledgeable members of these communities of practice are uniquely positioned to partner with publishers and other organizations to raise awareness and ensure adherence to authorship criteria.

Guideline associations, journal editors, peer reviewers, and collaborators must ensure all authors who meet ICMJE authorship criteria receive appropriate credit for their contributions.

Those who define authorship for evidence synthesis publications should provide specific examples for those who design and provide reproducible search strategies. Two examples using ICMJE criteria follow:

“Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work” could be followed by a clarifying sentence such as: “For example, the intellectual contribution of a librarian who designs and executes literature search strategies.”

“Drafting the work or revising it critically for important intellectual content” could include a clarifying sentence that indicates, “For example, a librarian who writes the search methods and provides reproducible search strategies for the manuscript.”

MLA and CHLA/ABSC have a Systematic Review Caucus community of practice and Knowledge Synthesis Interest Group, respectively which provides specialized education and publications on guideline and systematic review development. We invite organizations to partner with us to ensure adherence to authorship criteria by signing on to the statement which will be shared with editors and publishers.

1. Rethlefsen ML, Farrell AM, Trzasko LC, Brigham TJ. Librarian co-authors correlated with higher quality reported search strategies in general internal medicine systematic reviews. *Journal of clinical epidemiology*. 2015 Jun 1;68(6):617-26.
2. Meert D, Torabi N, Costella J. Impact of librarians on reporting of the literature searching component of pediatric systematic reviews. *Journal of the Medical Library Association: JMLA*. 2016 Oct;104(4):267.
3. Schellinger J, Sewell K, Bloss JE, Ebron T, Forbes C. The effect of librarian involvement on the quality of systematic reviews in dental medicine. *PloS one*. 2021 Sep 1;16(9):e0256833.
4. Aamodt M, Huurdeman H, Strømme H. Librarian co-authored systematic reviews are associated with lower risk of bias compared to systematic reviews with acknowledgement of librarians or no participation by librarians. *Evidence Based Library and Information Practice*. 2019;14(4):103-27.
5. Lefebvre C, Glanville J, Briscoe S, Featherstone R, Littlewood A, Marshall C, Metzendorf M-I, Noel-Storr A, Paynter R, Rader T, Thomas J, Wieland LS. Chapter 4: Searching for and selecting studies. In: Higgins JPT, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA (editors). *Cochrane Handbook for Systematic Reviews of Interventions* version 6.3 (updated February 2022). Cochrane, 2022. Available from www.training.cochrane.org/handbook.
6. Institute of Medicine (US) Committee on Standards for Systematic Reviews of Comparative Effectiveness Research. *Finding What Works in Health Care: Standards for Systematic Reviews*. Eden J, Levit L, Berg A, Morton S, editors. Washington (DC): National Academies Press (US); 2011.

Approved by:

Medical Library Association
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Canadian Health Libraries Association/Association des
bibliothèques de la santé du Canada (CHLA/ABSC)
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