Note of Editorial Concern

Peer review forms the basis for assessment of quality and selection of manuscripts submitted to Anesthesiology. As such, any compromise of peer review is taken very seriously. Such a compromise occurred in the review of Ramachandran SK, Nafiu OO, Ghaferi A, Tremper KK, Shanks A, Kheterpal S: Independent predictors and outcomes of unanticipated early postoperative tracheal intubation after nonemergent, noncardiac surgery. Anesthesiology 2011;115:44–53.

At the time of submission of this manuscript, an article by some of the same authors on a closely related database query had been accepted or had just been published electronically ahead of print by the European Journal of Anaesthesiology (EJA): Nafiu OO, Ramachandran SK, Ackwerh R, Tremper KK, Campbell DA Jr, Stanley JC. Factors associated with and consequences of unplanned post-operative intubation in elderly vascular and general surgery patients. Eur J Anaesthesiol 2011;28:220–4. The EJA article focused on unplanned intubation within 30 days of surgery in patients older than 65 yr, whereas the Anesthesiology article focused on unplanned intubation within 3 days of surgery in all adult patients. These questions overlap considerably because half of the unplanned intubations within 30 days of surgery occur in the first 3 days and because adult patients include those older than 65 yr. The manuscript submitted to Anesthesiology failed to cite the authors’ EJA manuscript. This lack of transparency robbed the reviewers of the opportunity to judge whether the incremental knowledge in the Anesthesiology submission beyond the EJA article was adequate for this manuscript to reach a level of priority high enough for publication. In addition, failure to disclose that overlapping searches of the database on closely related questions had been performed precluded a proper statistical review of the manuscript because statistical correction for duplication was not checked. As noted by the authors themselves (Nafiu OO, Tremper KK: Accusation of Salami publication: The new bane of large database investigations? Young investigators beware! Eur J Anaesthesiol 2011;28:545–6), this lack of transparency is duplicitous behavior.

Given that there is no reason to suspect that the data presented in both the Anesthesiology and EJA articles are fraudulent and given that both articles can contribute to care of our patients, Anesthesiology will not issue a retraction in this instance. It is imperative that authors disclose multiple related queries on databases and properly cite “in press” or published work from these queries in manuscript submissions to Anesthesiology.

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