By reading an academic journal, you are already at high risk of publishing addiction (PA). So, read on and see if you have it.

PA is proposed as a previously unreported behavioural addiction. Gambling, excessive smartphone use and unrestrained shopping are other behavioural ‘addictions’.1,2 Although widespread, PA is masked by its normalization within academia, as alcoholism may be accepted in a brewery. PA can greatly impact the lives of those in its grip.

The distinguishing features of PA include an urgent desire to keep publishing, getting emotional kicks from various publishing stages, including seeing your name in print, devoting excessive time to the habit, imagining that your articles are important, deluding yourself that your articles are actually read, blaming others when your articles get rejected and creating behaviours and strategies to support the habit.

PA has several characteristics in common with other behavioural addictions. These include a lack of insight or denial, an inability to stop the behaviour, and delayed gratification. There may be damage to oneself and family and giving up of some social activities. Repeated rituals may develop, such as frequently checking citations and H-index on Google Scholar. The classic drug addict strategy of keeping a steady supply of the drug is echoed by constantly having several articles at various stages of publication. Some publishing addicts even start their own journal.3

Minor features of PA include constantly being on the lookout to publish even very minor issues (such as ‘Antecubital fossae petechiae in Scottish country dancers’)4 and performing publishing tricks, such as breaking the record for the shortest publication (two words).5 Time wasted on these multiple small pursuits could be better spent on grant applications and research leading to fewer, more important publications. Other PA features include developing coping strategies: using an exhaustive ‘response to referee’ method that leaves an editor with little room to reject, and viewing rejection as evidence of the article being ‘an idea before its time’ and one step closer to eventual acceptance. Warning signs of PA might include publishing more than 10 articles per year or having more than 100 publications.

PA has similarities with alcohol addiction. Most drinkers occasionally have an enjoyable drink, but a few develop alcoholism. But while alcoholism is almost universally negative, PA often also brings positive benefits. It turbocharges spreading your ideas, and may lead to peer recognition, promotion, invitations to lecture or advise, and to stimulating academic encounters. Your career may flourish and go from success to success. But PA can lead to ruin, through salami publications, duplicate publications, plagiarism and fabricated results.

In the academic publishing business model, the author does all the work, gifts it to the publisher, and then has to pay to make it widely available. Potato growers wouldn’t put up with such an absurd offer from a supermarket. But academic authors accept this outrageous situation allegedly because they want to disseminate their research, to enhance their CVs, and because employers require them to publish. For many, however, the real underlying reason is to feed their PA.

My interactions with the BJD, coupled with my PA, have included being the British Association of Dermatologists’ Treasurer (BJD income being critically important), being President and trying to restructure editorial arrangements, being on the Editorial Board and refereeing, but my main involvement has been as author. As addicts trying to manipulate the supplier, our team members have tried to ‘use’ the BJD to help develop our quality-of-life measures, partially successfully. And, on leaving my office window open, even the Cardiff birds with PA chose my BJDs to nest on (Figure 1).

Figure 1 The BJD: ideal for nurturing precious ideas (and eggs).
How might PA insights help the editors of a major journal, such as the BJD? Top-ranking authors are likely to have PA. The BJD wants to attract top-ranking authors. If you understand what gives these authors their big kicks, you can develop and enhance these, creating journal ecstasy. Then you’ve got them!

Journals already flaunt their glitzy impact factors on their websites to suck in authors, much as casinos attract gamblers with their gaudy surroundings. But they could do better. The highs of PA include receiving an acceptance email (parallels here with gambling addiction, hitting the jackpot), seeing the proofs, noticing your article on PubMed, and, the ultimate kick, finally seeing it published. Editors could try to enhance these highs. Make the submission response more personal. Individualize rejection letters and be encouraging. Make the acceptance letter more celebratory. Enhance the proofs experience. Make it simple to access the pdf of the final publication. Arrange a tracking system to inform the author of current status and likely dates. Essentially, reduce the technical, enhance the emotional and massage the trigger points.

After lecturing on PA, several dermatologists contacted me to admit their addiction, and an anonymous reviewer of this manuscript also self-diagnosed PA. This disorder may be prevalent in the academic community across all disciplines, especially among the most ‘successful’ academics. These academics may also be in the grip of the closely related ‘research addiction’ for which the ultimate high is the Eureka moment of scientific discovery. PA probably occurs among other authors such as novelists and journalists, whose career choice may spring from their PA.

Understanding PA may allow authors to have more insight into their behaviour and enable editors to strengthen their journals.

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