

Open Pharma Roundtable

Innovations in medical publishing

15 June 2020

Welcome, introductions, objectives and agenda

Richard Smith, Chair



Agenda



Time (BST)	Agenda item	Speaker
13:45–14:00	Sound and equipment check	Richard Smith
14:00–14:30	Welcome, introductions, objectives and agenda	Richard Smith
14:30–15:00	Summary of January roundtable	Tim Koder and Chris Winchester
15:00–15:20	Coffee break	
15:20–16:20	Transparency Open access policy 2021 Promoting mandatory Open Access, benchmarking and overcoming barriers Update on the Open Pharma position statement on open access Discussion	Ashley Farley Will Gattrell Chris Winchester All
16:20–16:30	Coffee break	
16:30–17:00	Accountability and Discoverability Open access journals and patient impact Improving the use of ORCID during the manuscript publication process Discussion	Durhane Wong-Rieger Sarah Sabir All
17:00–17:10	Coffee break	
17:10–17:40	Accessibility Publication Plain Language Summaries (PPLS) Preprints in the time of COVID-19 Discussion	Avishek Pal Steph Macdonald All
17:40–18:00	Summary and close	Richard Smith

Speakers today



Chair

- Richard Smith, Chair of Patients Know Best

Co-chair

- Tim Koder, Oxford PharmaGenesis

Speakers

- Ashley Farley, Bill & Melinda Gates Foundation
- Will Gattrell, Ipsen
- Chris Winchester, Oxford PharmaGenesis
- Durhane Wong-Rieger, Canadian Organization for Rare Disorders
- Sarah Sabir, Oxford PharmaGenesis
- Avishek Pal, Novartis
- Steph Macdonald, Oxford PharmaGenesis

Meeting participants



Members

- Slavka Baronikova, Galápagos
- Christine Vanderlinden, GSK
- Santosh Mysore, GSK
- Mette Holt, Novo Nordisk
- Paul Farrow, Oxford PharmaGenesis
- Chris Rains, Takeda
- Valérie Philippon, Takeda

Supporters

- Shweta Rane, Alexion
- Jon Druhan, AstraZeneca
- Catherine Skobe, Pfizer
- Rikke Egelund Olsen, Roche
- Janet Davies, UCB
- Linda Feighery, UCB
- Gavin Sharrock, Wiley

Apologies

- Julie Newman, Gilead

Participants

- Jennifer Harris, ABPI
- Andrew Balas, Augusta University
- Anna-Lisa Fisher, BI
- Richard Sands, BMJ
- David Mellor, Center for Open Science
- Mike Taylor, Digital Science
- Kirsty Reid, EFPIA
- Liz Allen, F1000
- Stephan Kuster, Frontiers
- Laura Dormer, FSG
- Jonny Patience, Informa
- Rob Matheis, ISMPP
- Jayme Trott, J&J
- Rebecca Cooney, *The Lancet*
- David Sampson, The NEJM Group
- Shawna Sadler, ORCID
- Deborah Dixon, OUP
- Sara Rouhi, PLOS
- Stuart Taylor, Royal Society
- Pasha Javadi, Sanofi

Listening

- Frederick Fenter, Frontiers
- Joanne Walker, FSG
- Simon Page, Ipsen
- Peter Llewellyn, NetworkPharma
- Brian Falcone, Oxford PharmaGenesis
- Tanya Stezhka, Oxford PharmaGenesis
- Richard White, Oxford PharmaGenesis
- Niamh O'Connor, PLOS

Facilitation and reporting

- Victoria Lee, Oxford PharmaGenesis
- Debbie McNicol, Oxford PharmaGenesis
- Francesca Ounsworth, Oxford PharmaGenesis
- Zoe Watts, Oxford PharmaGenesis

Objectives



- Build on discussions from the January roundtable
- Gain a further understanding of US perspectives on open access and how we can secure mandatory open access policies
 - Provide attendees with an update on the White House consultation and Plan S
- Explore the ways patients' access and discover medical information and how we can build trust using ORCID
- Listen to and gauge attendees' experiences and perspectives on plain language summaries and preprints

Summary of January roundtable

Tim Koder and Chris Winchester,
Oxford PharmaGenesis



Open Pharma 2019 achievements



Open Access Week 2019

Launch of the Open Pharma position statement on open access

Article on the position statement published in *The Telegraph*

Open Pharma and Pint of Science event
'Clinical trial transparency – lets talk'



Publications

'Open access policies of leading medical journals' published in *BMJ Open*

'Access all areas' published in *Research Fortnight*

'Registration and use of ORCID by pharma'

'How open are pharma publications?'



Engagement

We welcomed two new Members and two new Supporters^a

Blog, Twitter and other communications

January 2019

326 followers on Twitter

152 subscribers to the blog

84 weekly digests

30 original articles

January 2020

526 followers on Twitter

286 subscribers to the blog

130 weekly digests

42 original articles



Launch of the Open Pharma figshare page

1840 views and **573** downloads

Delivered presentations at the 48th EMWA Conference, LERU Information & Open Access Policy Group meeting, ABPI workshop: Open Access and Transparency and OpenCon

Facilitated panel and roundtable discussions at European ISMPP, ISMPP Annual Meeting and the CBMRT BioMedical Transparency Summit

ORCID discussions at Agency Executive Forum and MPIP

Introductory and update calls with DataCite, EFPIA, medRxiv, NISO, PLOS, WHO and several new biopharma companies

Figures correct as of 17 January 2020

ABPI, Association of the British Pharmaceutical Industry; *BMJ*, *British Medical Journal*; CBMRT, Center for Biomedical Research Transparency; EFPIA, European Federation of Pharmaceutical Industries and Associations; EMWA, European Medical Writers Association; LERU, League of European Research Universities; ISMPP, International Society for Medical Publication Professionals; MPIP, Medical Publishing Insights & Practices; NISO, National Information Standards Organization; PLOS, Public Library of Science; WHO, World Health Organization

Recent Open Pharma achievements



On 20 January 2020 ...



Members, Supporters and Advisors of Open Pharma met for a roundtable discussion at GSK House to discuss open access, patient and public involvement in medical communications, and the visibility of publications



Session 1: shaping policy with the Open Pharma position statement



Attendees discussed

- The wide support and coverage of the Open Pharma position statement on open access
- Considerations for pharma mandating open access
 - accessibility and discoverability
 - author freedom
 - cost
 - avoid perception of cherry-picking

Next steps

- Continue to work with publishers to develop their open access models
- Work with institutions/libraries who are in close contact with the authors
- Communicate with authors and provide education on open access
- Understand the impact of libraries not renewing subscriptions with big publishers
- Explore potential for read-and-publish agreements

Session 2: patient and public involvement



Attendees discussed

- The use of publication enhancements to increase the reach of data using the appropriate channels
- The acceptability of using enhancements to increase research discoverability
- Potential strategies for aligning the development of publication enhancements across pharma, journals and publishers

Next step

- The next step is to engage with additional publishers to discuss common standards for publication enhancements

Session 3: visibility of publications



Attendees discussed

- The scientific integrity of preprints and the level of expertise of those providing feedback
- The use of self-archiving repositories to increase research accessibility
- Available options for publishing research via the green open access route

Next step

- Continue to work with pharma to facilitate the understanding of different open access publishing routes

Building on January's discussions



Today, we will:

- Gain a further understanding of US perspectives (publishers, institutes and libraries) on open access
- Explore the ways in which we can help patients' access and discover medical information and how we can build trust using ORCID
- Discuss options for pharmaceutical companies wanting to explore publishing plain language summaries, preprints and other enhanced content

Transparency



- **Gates Foundation open access policy** – Ashley Farley, Bill & Melinda Gates Foundation
- **Promoting mandatory open access, benchmarking and overcoming barriers** – Will Gattrell, Ipsen
- **Update on the Open Pharma position statement on open access** – Chris Winchester, Oxford PharmaGenesis
- **Discussion** – All



BILL & MELINDA
GATES *foundation*

OPEN ACCESS POLICY 2021

Modernized for Impact and Compliance

Ashley Farley, Program Officer
Knowledge & Research Services Team / OA Team
June 2020



WHY OPEN ACCESS MATTERS TO THE FOUNDATION

Barrier-free access to foundation-funded research advances innovation and helps create a world where everyone has the opportunity to lead a healthy and productive life.

Broad and unfettered dissemination of primary research for greater impact and reuse aligns with our Global Access Commitment.

During the pandemic it has never been more apparent the importance of access to research and research transparency to find solutions to tough problems.

NEWS · 05 NOVEMBER 2018

Wellcome and Gates join bold European open-access plan

The Wellcome Trust has also announced how it will implement the plan, which could provide a blueprint for others.

Richard Van Noorden



NEW DRIVER FOR CHANGE: PLAN S

- Launched by cOAlition S
September 2018
- Gates and Wellcome joined the
cOAlition in 2019
- Strives to couple bold OA policy
changes with realistic
implementation strategy
- Journal Checker Tool in active
development



COALITION S: BUILDING AN ALLIANCE OF FUNDERS AND STAKEHOLDERS

Supported by



National funders



Luxembourg National
Research Fund



The Research Council
of Norway



UK Research
and Innovation



VINNOVA
Sweden's Innovation Agency

Charitable and international funders



BILL & MELINDA
GATES foundation



World Health
Organization



For research on
diseases of poverty
UNICEF • UNDP • WORLD BANK • WHO



Aligning Science
Across Parkinson's

European funders





Rapid & Transparent Publishing

Gates Open Research is a platform for rapid author-led publication and open peer review of research funded by the Bill & Melinda Gates Foundation

SUBMIT YOUR RESEARCH

OR

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F1000Research

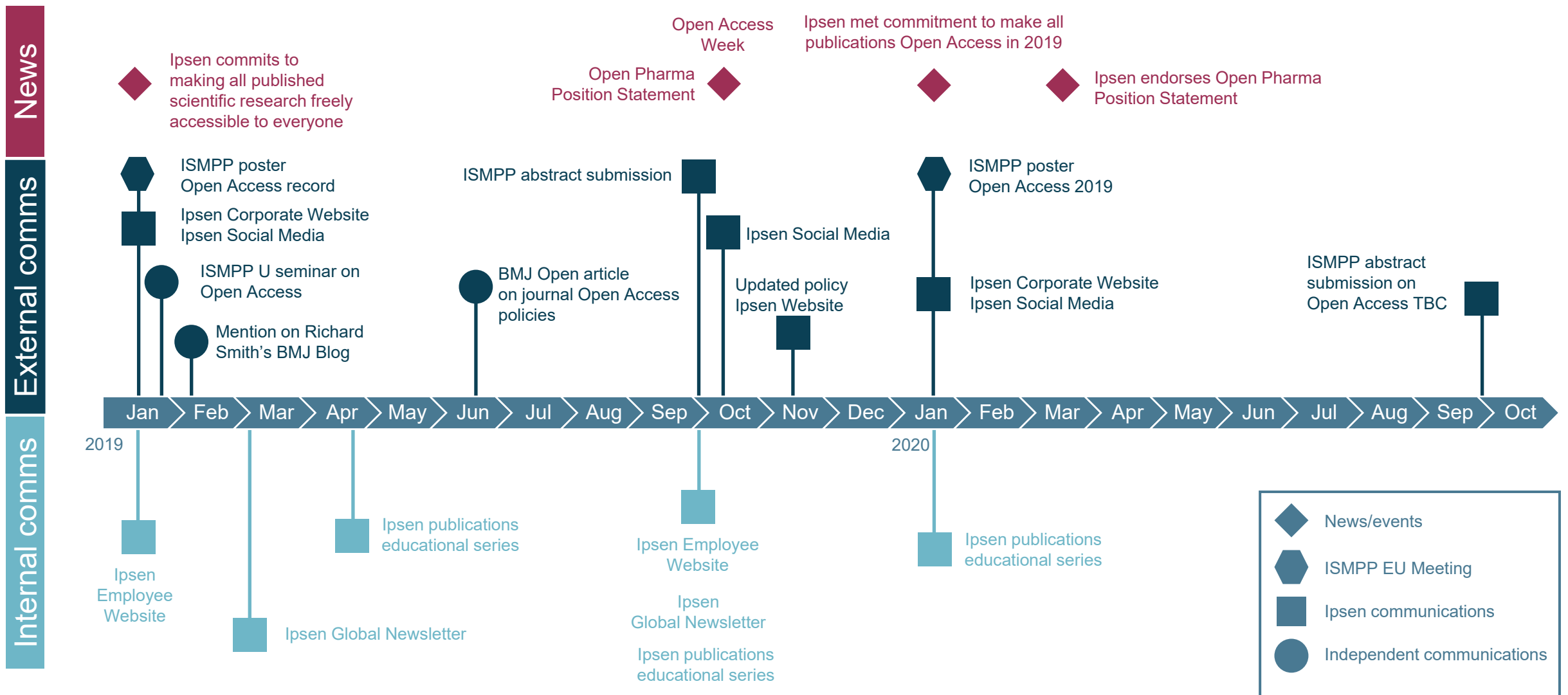


Promoting mandatory Open Access, benchmarking and overcoming barriers

Open Pharma Roundtable Meeting, June 15 2020

Will Gattrell

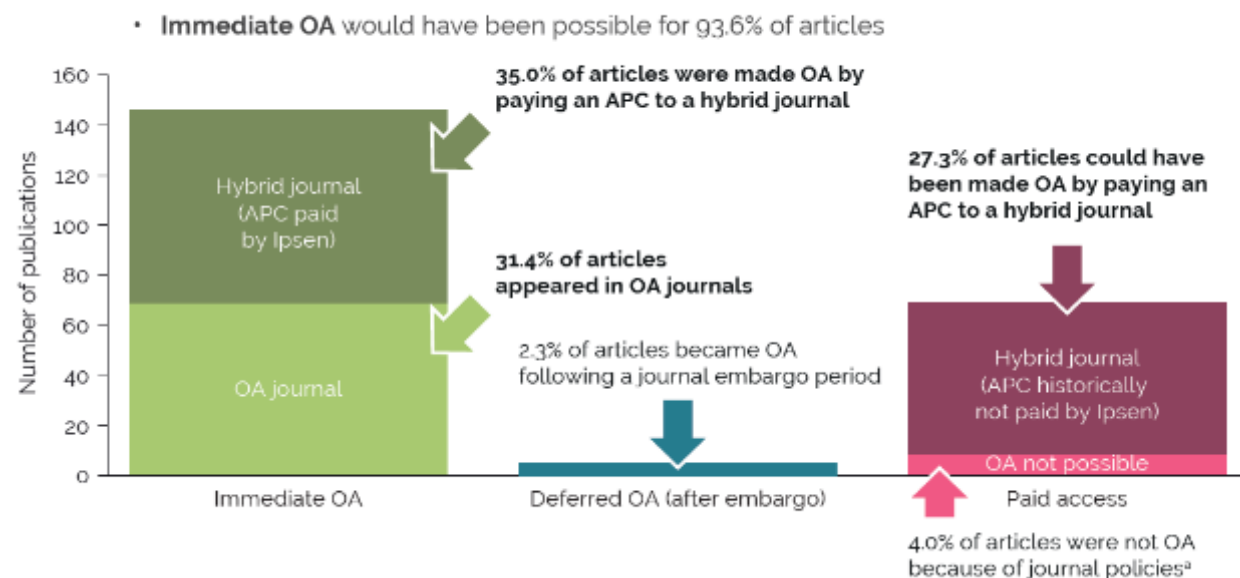
Promoting mandatory Open Access



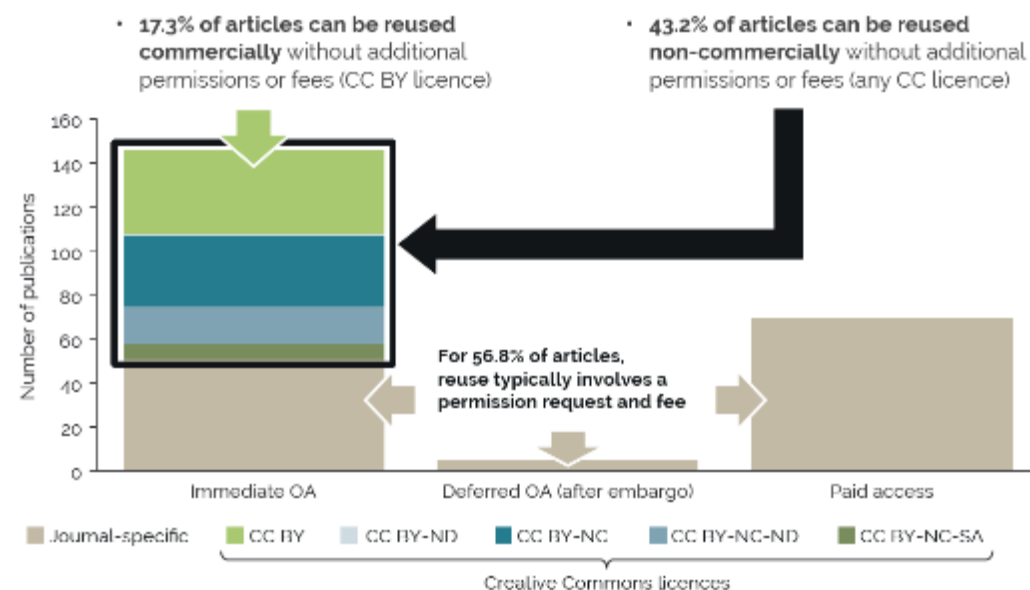
Benchmarking

The historical Open Access record for Ipsen

Would a mandatory OA policy affect journal choice?



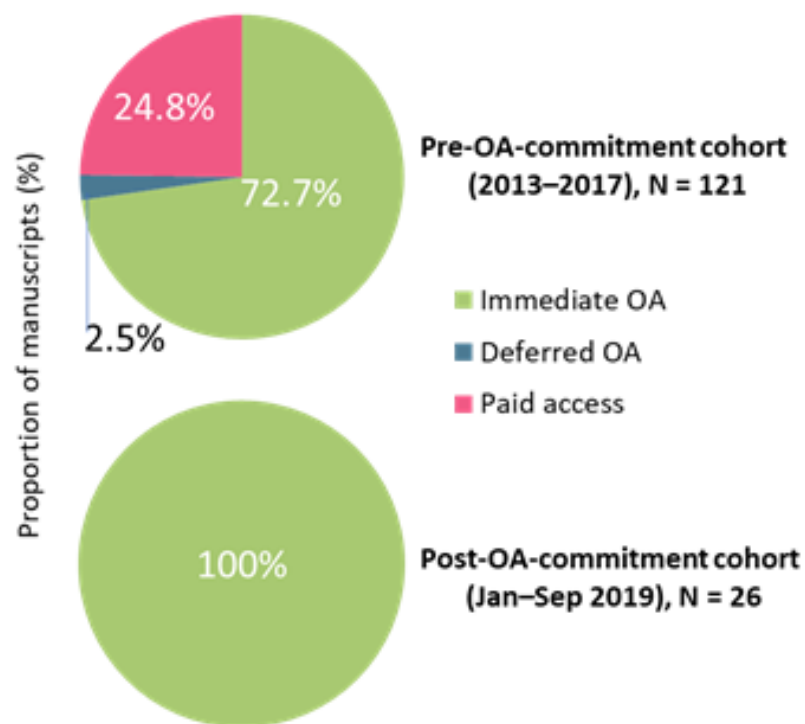
How can articles be reused?



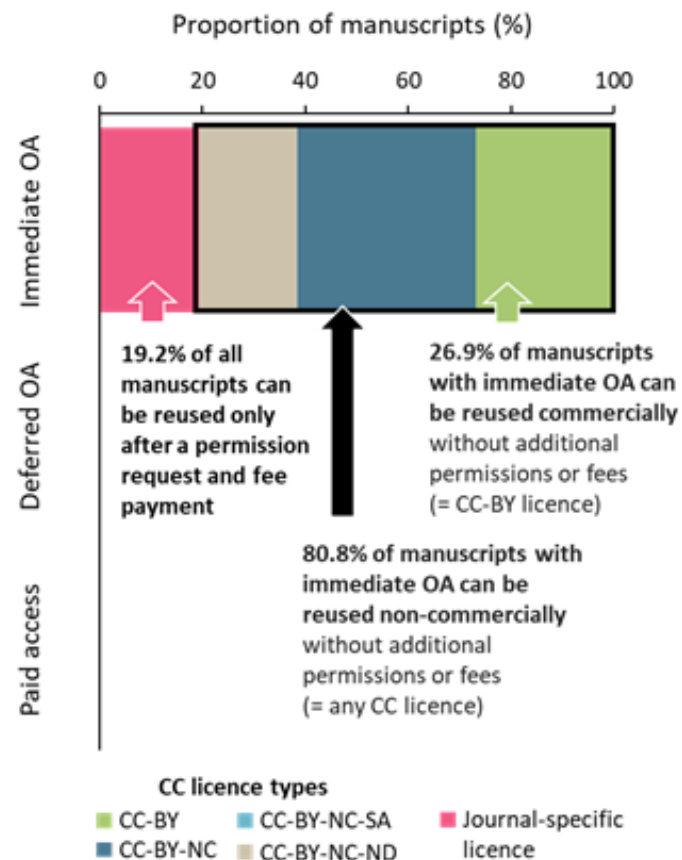
Lang *et al.* Open access publishing of research affiliated to Ipsen, 2013–2017: a baseline assessment. *Curr Med Res Opin* 2019;35(Suppl 2):39

Benchmarking

The 2019 Open Access record for Ipsen



Post-OA-commitment cohort (Jan–Sep 2019), N = 26



Page *et al.* Open sesame! Evaluation of an open access commitment on Ipsen-sponsored publications. Presented at ISMPP EU, January 2020

Overcoming barriers

Planning, education and communication are key

- Ipsen: in a unique position?
 - Small enough to be agile, big enough to make a difference
 - Publications team is structured by function, rather than product, which facilitates alignment and roll out
- Clear, measurable definition of the Open Access commitment at the outset
 - Commitment encompasses company-sponsored research only; contracts for investigator-sponsored studies now encourage publishing Open Access
- Communicated commitment internally and externally regularly, and at implementation
 - Everyone has been supportive, in particular authors and patient centricity
- Updated relevant documents, training materials, SOPs, author materials etc, as soon as possible
- Global budget available to pay Open Access charge where affiliates did not budget
 - Educating everyone to set budget aside for future publications

Update on the Open Pharma position statement on open access

Chris Winchester, Oxford PharmaGenesis

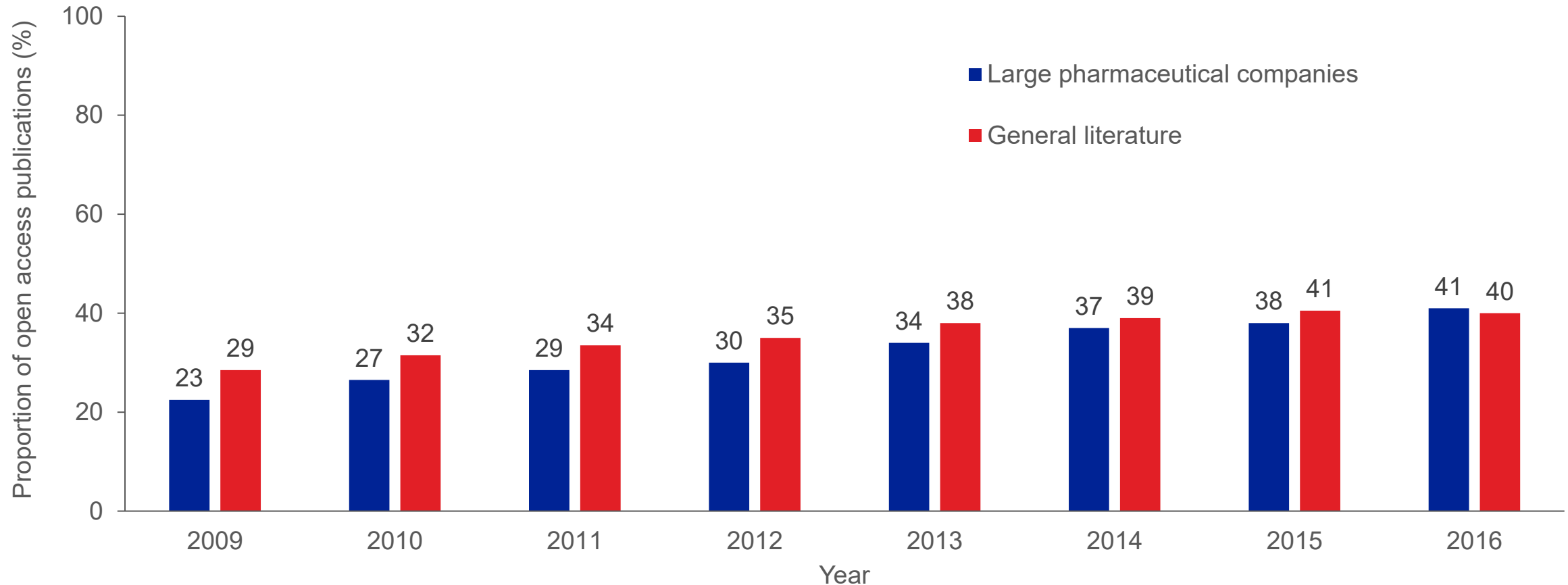
How well do you think pharma is doing in promoting and implementing open access?

- Pharma is doing very little or nothing to promote or implement open access
- Pharma is doing okay, but there is a long journey ahead
- Pharma is doing very well, but there's a little more work to do
- Pharma is doing exceptionally well in promoting and implementing open access



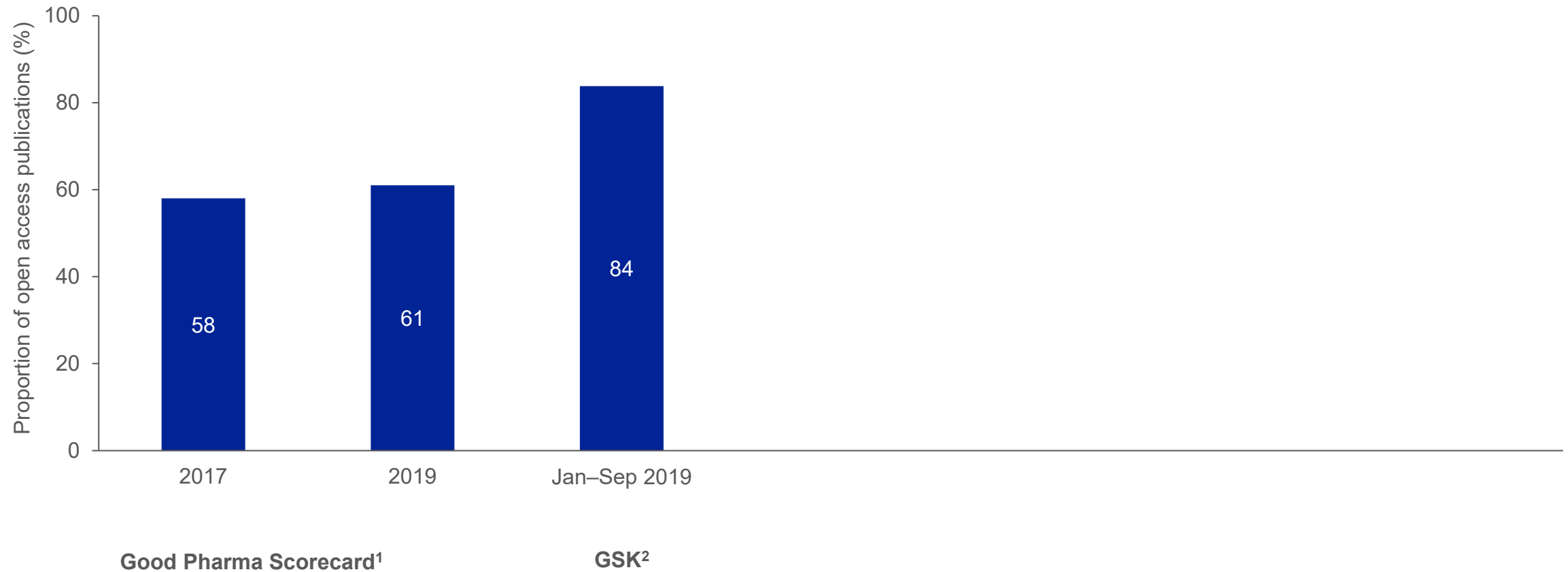
Pharma was lagging but is starting to take the lead

Large pharmaceutical companies have been publishing an increasing proportion of their scientific papers in open access journals¹

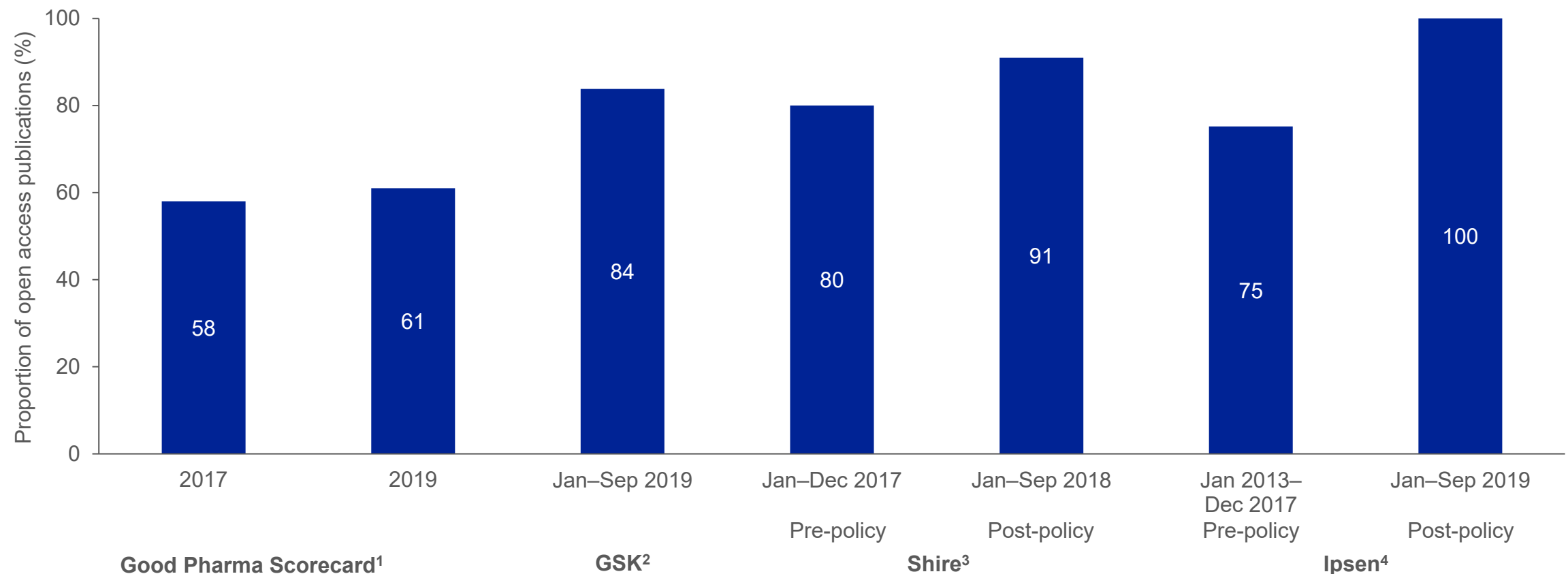


1. Yegros-Yegros A, van Leeuwen TN. SocArXiv 2019; <https://doi.org/10.31235/osf.io/zt6kc> (Accessed 20 April 2020).

Pharmaceutical companies can achieve up to ~80% by encouraging open access



And up to 100% by mandating open access



1. Macdonald S, Koder T. Presented at ISMPP, January 21–22, 2020, London, UK; 2. Mysore S *et al.* Poster presented at ISMPP, January 21–22, 2020, London, UK; 3. Philippon V *et al.* Poster presented at ISMPP, January 21–22, 2020, London, UK; 4. Page S *et al.* Poster presented at ISMPP, January 21–22, 2020, London, UK;

Position statement on open access



We, as Open Pharma, a group of pharmaceutical companies and other research funders, alongside healthcare professionals, regulators, patients, publishers and other stakeholders in healthcare, recognize the importance of publishing research with open access, where papers can be read without payment of a one-off access charge or subscription



Our objectives

Our immediate priority



Secure authors publishing company-funded research the **same right to publish open access** as authors publishing research funded by other sources



All research to be made **free to read from the date of publication**



Any variant of Creative Commons or equivalent licence

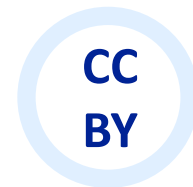
Our long-term goal



Secure authors publishing company-funded research the **same terms** as authors publishing research funded by other sources



Free to read – **and reuse** – from the date of publication



Sustainable use of **CC BY**

Endorsements from individuals, organizations, pharmaceutical companies and publishers

152 endorsements

8 publisher endorsements

Betasciencepress Publishing

ecancer

F1000 Research Ltd

Frontiers Media SA

Future Science Group

MDPI

PLOS

Wiley

27 endorsements from other organizations

Ataxia and Me

Autoinflammatory UK

Cambridge Rare Disease Network

Canadian Organization for Rare Disorders

Centro Español de Investigación Farmacoepidemiológica

Cinclus Pharma Holding AB

DSL Consulting, LLC

Epi-Fit

Galápagos NV

International Kidney Cancer Coalition

Ipsen

KAN Consulting MON. I.K.E

Kidney Research UK

Observational and Pragmatic Research Institute Pte Ltd

Outcomes Positive, Inc

Oxford Health Policy Forum

Oxford PharmaGenesis

Pedalling4ACure

SCN2A Australia

Scott Pharma Solutions

Scriva medical Communications

Sequoia Medical Communications Ltd

Solanum Medical Communications Ltd

SUDEP Action

The Aarskog Foundation

ThinkSCIENCE, Inc.

Zimbabwe Evidence-Informed Policy Network

■ 1–2 endorsements ■ 3–5 endorsements ■ 6–30 endorsements ■ 31+ endorsements

Contributors



We thank all Members, Supporters and Followers of Open Pharma for their valuable input



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Publications Innovative
Solutions Lead, Pfizer



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Head of GMA
Medical Functions,
Takeda



Chris Winchester
CEO, Oxford
PharmaGenesis



Julie Newman
Associate Director,
HIV, Gilead



Lise Baltzer
Director Global
Publications, Novo Nordisk

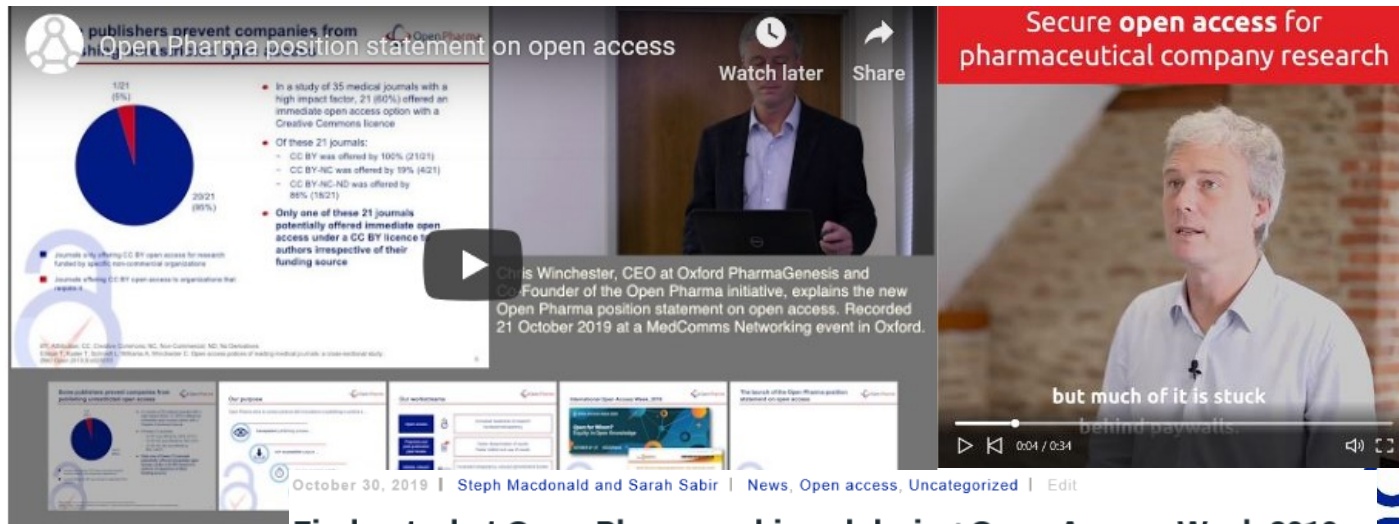


Sarah Sabir
Medical Writer, Oxford
PharmaGenesis



Valérie Philippon
Head, Global Publications,
Takeda

Coverage from Open Pharma



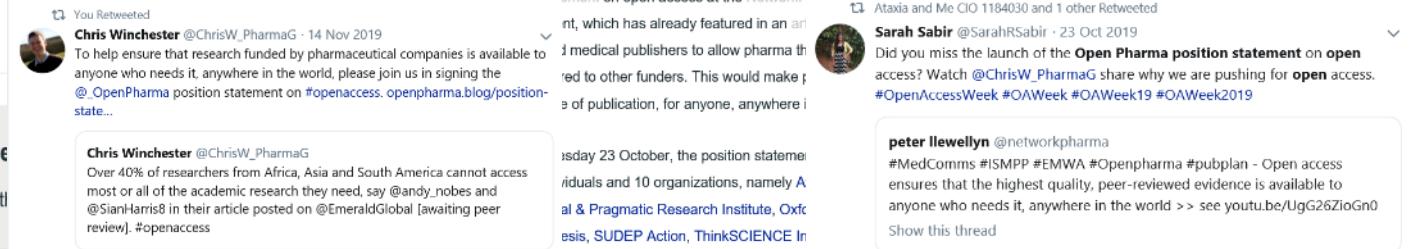
Chris Winchester, CEO at Oxford PharmaGenesis, explains the new Open Pharma position statement on open access.

November 7, 2019 | sarahsaber | Open access | Edit

Reflecting on the release of the Open Pharma position statement on open access

Today, just over two weeks from the launch of the Open Pharma position statement on open access, we reflect on how the statement came about, the benefits it offers to different types of stakeholders and the success it has had so far.

Subscribe
Join 283 others



Reach of the position statement

You Retweeted
Future Science Group @futuresciencegp · 18 Nov 2019
Reinforcing our commitment to #openaccess publishing, @futuresciencegp are very proud to support the @_OpenPharma position statement on #openaccess #openforall #medicalresearch

The Telegraph
ecancer @ecancer · 7 Nov 2019
ecancer is proud to endorse @_OpenPharma's position statement on open access - by breaking down barriers to the published results of research we can narrow the gap between those who have access to adequate cancer prevention, treatment and care and those who do not. #openaccess

News · Global Health Security · Science & Disease

Drug companies urged to make research available to health workers in poorer countries



F1000 @F1000 · 1h
Supporting @_OpenPharma to make pharma-funded research accessible to anyone who needs it, anywhere in the world. @rml_s, Managing Director @F1000, shares her thoughts on this goal & the benefit of immediate #OpenAccess #OAWeek #OpenScience openpharma.blog/position-state...



New organizational endorsements and 150 individual endorsements via Open Pharma

Open Pharma is pleased to announce that we have now gained 150 individual endorsements on our position statement on open access. We also have new endorsements from the Canadian Organization for Rare Disorders and Outcomes Positive, Inc., which brings us to a total of 37 organizational endorsements!

Chris Banks @ChrisBanks · 24 Oct 2019
Things I didn't know:
1) Pharmaceutical companies fund 1/2 of biomedical #research
2) Some companies are committed to publishing #OA
3) They are often prevented from publishing #OA by #Publishers - no even playing field with other funded research
#OAWeek19



Position statement on open access

Pharmaceutical companies, which fund approximately half of all biomedical research, are now leaders in publication and disclosure of research. However, they are often prevented from publishing #OA by #Publishers - no even playing field with other funded research. #OAWeek19

13 retweets, 15 likes

MAP NEWSLETTER
Highlights Leadership Message News & Trends What's New

Open Pharma Releases Position Statement on Open Access

Nov 13, 2019 | Highlights



Open Pharma @_OpenPharma · May 21
We are pleased to welcome @rare disorders and Outcomes Positive Inc. to a group of over 30 other organizations who have endorsed the #OpenPharma position statement on #OpenAccess! You can read and endorse the #OpenPharma position statement below.



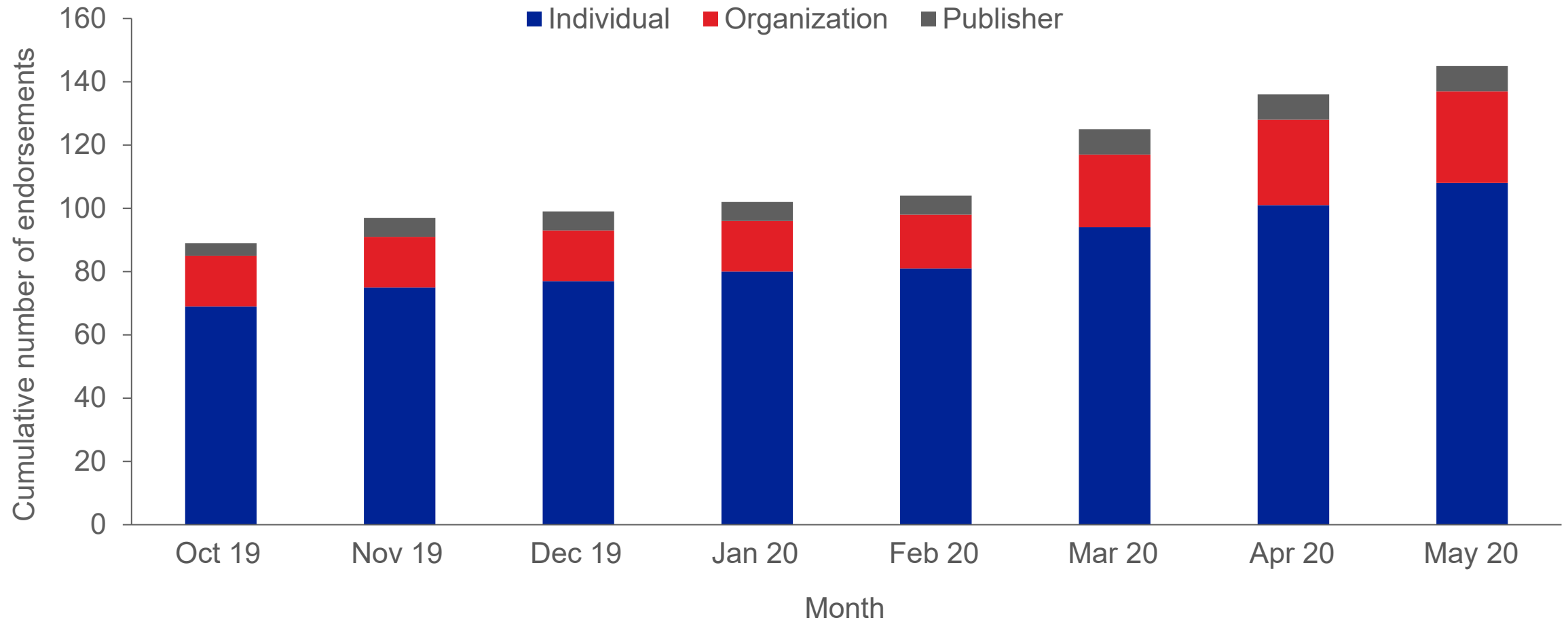
You Retweeted
Chris Winchester @ChrisW_PharmaG · 28 Oct 2019
In the spirit of the @_OpenPharma position statement, @tandfmedicine offer #openaccess to all authors, regardless of their funding source or affiliation. 🌞
To read the position statement in full, and sign up, see openpharma.blog/position-state... #OAWeek #openaccessweek #pubplan

Taylor & Francis Medicine and Health @tandfmedicine
We welcome further discussion led by @_OpenPharma around making research more accessible and @tandfmedicine offer open access options to all of our authors irrelevant of funding/affiliation. #openaccess #open science #openforall #OAWeek #pubplan #SMPP

ely half of all
ation and disclosure...

8 retweets, 7 likes

Cumulative monthly endorsements



Comments from individual endorsers



“A vital element of open access is ‘knowledge mobilization’ – bringing as many relevant stakeholders to engage with published research as possible to maximize its reuse and impact. Open access offers a way to maximize contact with multiple audiences, spark new ideas and understanding, and ensure new interventions and treatments can reach those that need them as soon as possible.”

–Rebecca Lawrence, F1000Research

“If we are committed to “doing the right thing for patients”, then we must all support open access and transparency.”

–John Gonzalez, Solanum Medical Communications Ltd

“One of the persistent challenges facing various stakeholders in the health sector in Zimbabwe and other low- to middle-income countries is physical and cognitive access to relevant credible evidence to use in identifying research priorities, doing the research, develop policy and in making programme interventions to ensure universal health coverage, posing a serious threat for the health sector.”

–Ronald Munatsi, Zimbabwe Evidence Informed Policy Network

“Science should be open. Research cannot be kept locked for access to a limited few. It’s contrary to the principles of doing clinical research. We make volunteer participants give us valuable results and then block the end users from using the same to help these volunteers.”

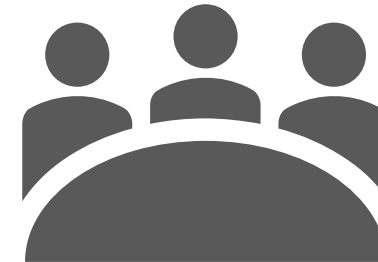
–Alban Sigamani, Narayana Health

“Important step in enabling patient groups and charities to share relevant information with the community and build an informed society.”

–Alan Thomas, Ataxia and Me

Next steps for the position statement

- Secure additional pharma company endorsements
 - What discussions have been initiated?
 - What resources will be helpful to secure endorsement?
 - What are the barriers?



For later discussion

Update to the ICMJE recommendations (December 2019)
“Policies that dictate where authors may publish their work violate the principle of academic freedom”

If you haven't done so already, what are the reasons for not signing the Open Pharma position statement on open access?

- I haven't had a chance to sign it yet, but it's on my list to do
- I agree with the position statement but cannot sign it without my company's backing
- I don't think the position statement calls for enough action
- I don't agree with the position statement
- I haven't read it yet
- Other, reason not listed



Discussion

All

Accountability and Discoverability



- **Open access journals and patient impact** – Durhane Wong-Rieger, Canadian Organization for Rare Disorders
- **Improving the use of ORCID during the manuscript process** – Sarah Sabir, Oxford PharmaGenesis
- **Discussion** – All

Should pharma provide scientific information to patients?

- Yes, it is our obligation
- Yes, but we have to be careful
- No, but I can see the value in doing so
- Absolutely not, it contradicts the safeguarding we have in place
- Don't know



OPEN ACCESS JOURNALS AND PATIENT IMPACT

DURHANE WONG-RIEGER, PHD
CANADIAN ORGANIZATION FOR RARE DISORDERS, PRESIDENT & CEO
RARE DISEASES INTERNATIONAL, CHAIR



TERRIFYING COMPUTER NOTIFICATIONS

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<input type="radio"/> 48-Hour online access	\$7.00
Details	
<input type="radio"/> Online-only access	\$16.00
Details	
<input checked="" type="radio"/> PDF download and online access	\$42.00
Details	
Checkout	

FEES TO ACCESS

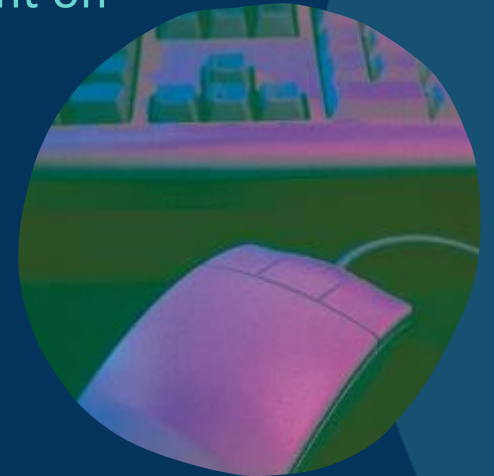
WHY PATIENTS NEED ACCESS TO PUBLISHED PRIMARY RESEARCH

Many types of patient users

- Individual end users: participate in informed decision making, input to research, trial design, ethics reviews, health institutions
- Patient organizations: advice to patients; input to research, trial design, PROMs, access, HTA, health systems, and policy
- Patient researchers: participate, interpret, disseminate, apply finding
- Patient authors and reviewers: conduct or collaborate on original research, comment on research findings, peer review

Patients have been mostly absent from the debate

- Not considered as relevant user (unique barriers and needs)
- Not represented in dialogues (patient advocacy as driver)
- Considerations of public access and impact in designing OA (not just citations)



WHAT IS THE CURRENT ACCESS STATUS FOR PATIENTS?

Personal (N of 1)

- Husband with PD developed psychosis and dementia: psychiatrist prescribed medication
- Good news: several up-to-date summary articles were available for free to download
- Bad news: about half of the articles referenced in these summary overviews were NOT available to gain better understanding as to the patients in trials, etc.
- In the end, decided to try recommended medications, one of which seriously aggravated the symptoms with side effects; the other, given in very low dosage, is tolerated and seems to have reduced hallucinations and depression

Primary research difficult to find

- Clinical trial findings
- Cost-effectiveness reports
- Rare disease research

25%

ARTICLES ARE ACCESSIBLE
(DEPENDENT ON TOPIC)

CASE: PATIENT AND PATIENT GROUP ACCESS (OR NOT)

MARTIN EVE

Humanities researcher, open access innovator and cerebral vasculitis patient

- I was dealing with four team: neurology, vascular, rheumatology and stroke... I was bounced from one team to another, with different narratives..., access to relevant research ... felt necessary for me ... to understand what ... the likely prognosis would be... to be able to read the literature and feel some sort of patient-led conversation was taking place was heartening and got me through.

ERNESTO PRIEGO

Multi-scholar and carer

- My father ... was a super healthy person all his life... A motor-neuronal disease hit him suddenly.... Doctors ... said it was Parkinson's but when he started hallucinating I started do some research and found out that a lot of the literature I wanted to access to show my father's doctors and my family were paywalled.
- Around the time ... Ebola was all over the media. ...I did some research and realised most of the ... research was paywalled. I created a dataset and crowdsourced on Twitter the access and license types of these articles.

CHRISTY COLLINS

Mother and M-CM patient advocate

- Signe got a formal diagnosis of M-CM when she was about eight months old from a local geneticist. He sent us on our way with only a few paragraphs of information....
- ... we can't depend on all of our doctors to consult the published research literature about M-CM.... It's not practical for doctors to spend a lot of time learning about a syndrome that they may see only once in their careers... parents...will make the time to learn everything they can — and this is why the inaccessibility of medical papers to patient families is so very frustrating. Some of the people most motivated to do this research are unable to.

PATIENT “LIFELINES” TO ACCESS RESEARCH



Phone a friend

- In university with library account (willing to find or willing to loan out ID)—but not all universities have all journals
- If drug-related, in a “pharma” friend (willing to bend the rules)
- In patient organization

Search alternatives

- Open Access Journals: ScienceOpen, F1000Research, Unpaywall
- Pirated Articles: Sci-Hub

Become a Researcher (Join Research Sharing Network)

- Join ResearchGate
- Join Mendeley
- Join Research project through UK Participatory Research Network, PCORI, National Center for Advancing Translational Sciences (NCATS) Toolkit for Patient-Focused Therapy Development, CIHR Support for Patient-Oriented Research (SPOR)

WHAT ELSE NEEDS TO BE DONE



Drop Open Access
fees for patient
authors to publish



Provide plain
language
research reports
(for all lay
readers)



Increase “research
literacy” of public
and patient users to
interpret and apply
research findings



Develop appropriate
“metrics” beyond
citations to
demonstrate impact
(uptake in
healthcare/clinical
practice, discussions in
social and other media,
impact on policy or
access, etc.)



Include patients on
editorial and other
expert boards



Include patients
in advocacy on
Open Access

CONTACT



TWITTER

@Durhane



FACEBOOK

durhane.wongrieger



EMAIL

durhane@sympatico.ca

Improving the use of ORCID during the manuscript publication process

Sarah Sabir, Oxford PharmaGenesis

What is an ORCID iD?

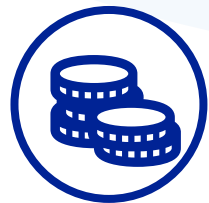
- A **persistent digital identifier** that distinguishes an account holder from every other researcher
- An ORCID iD can be **connected** with the researcher's professional information



Affiliations



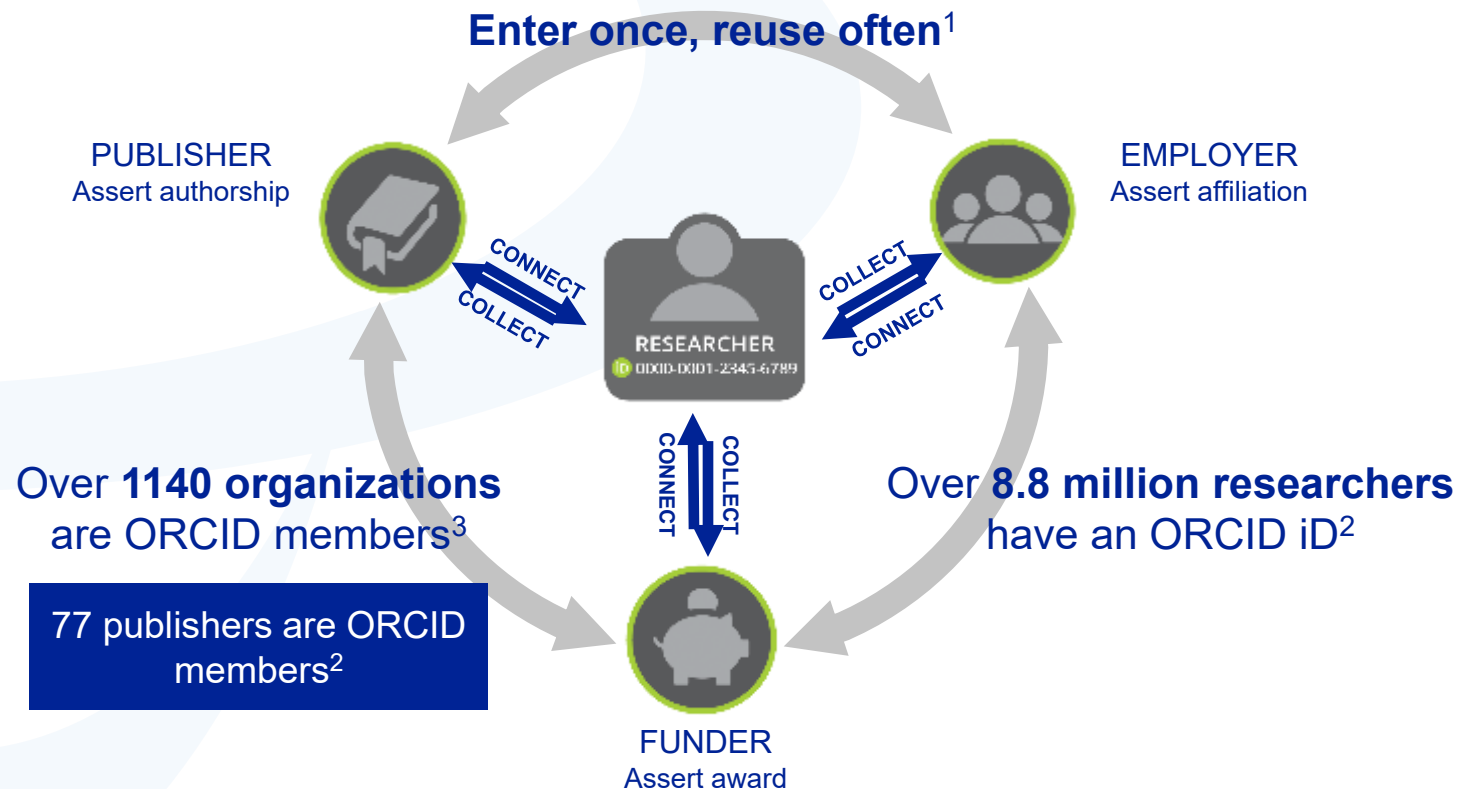
Publications



Grants

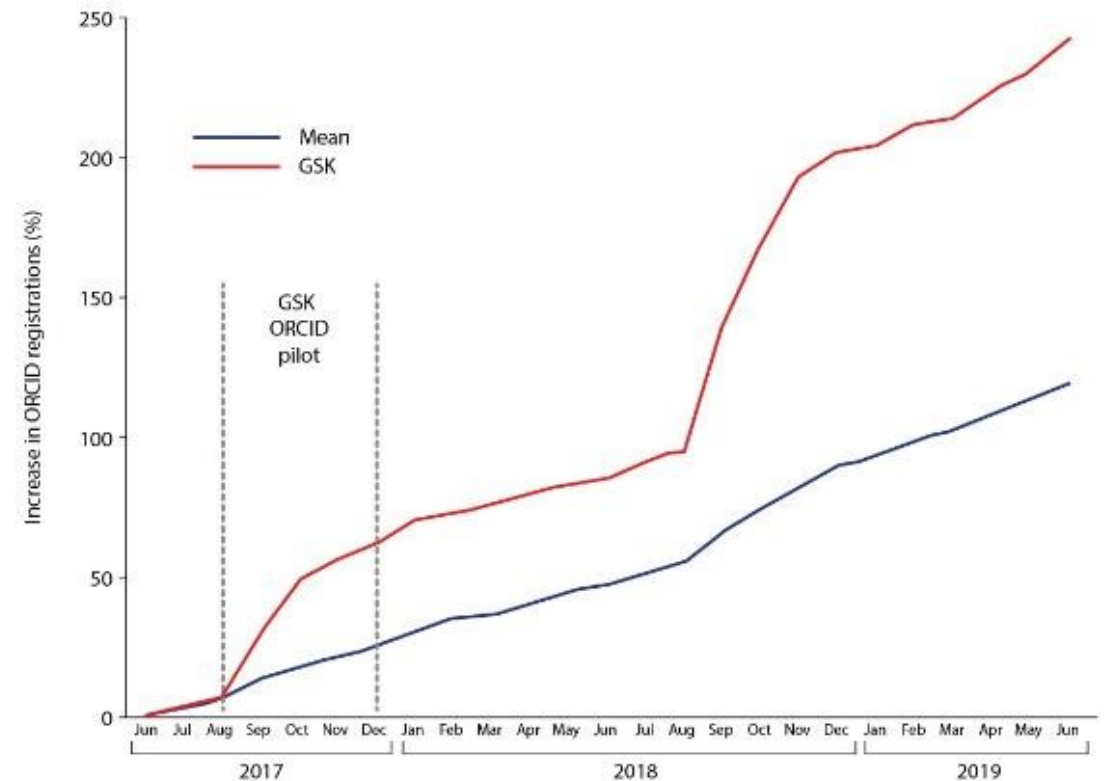


Peer review



Uptake of ORCID by pharma employees

- ORCID registration by internal employees increased by **120%** across the **six companies** studied from **June 2017** to **June 2019**
- **GSK**, one of the companies studied, showed a **higher than average** uptake of ORCID with an increase in registrations of **242%**



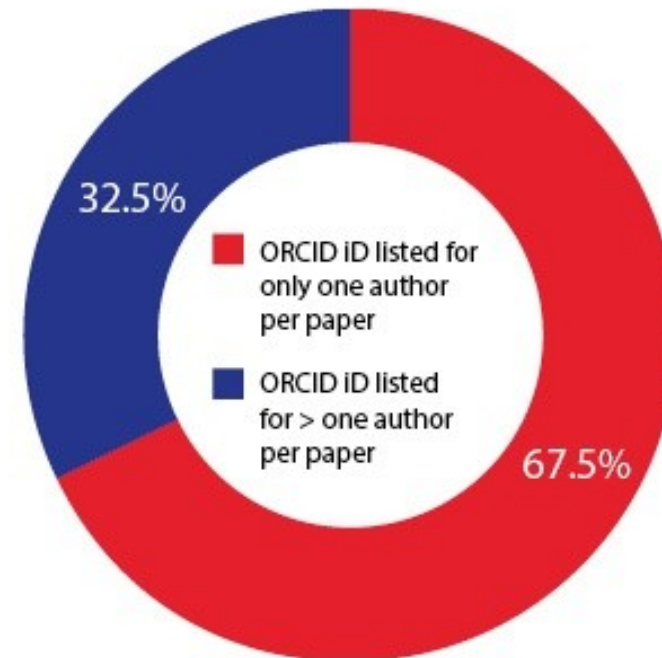
Use of ORCID in publications

- PubMed data were extracted for **843** papers from **346** journals, listing **10 091** internal employees and external collaborators



28% of
papers listed at
least one ORCID iD
(**234** out of **843**)

Papers that listed an ORCID iD mostly did
so for only one author only

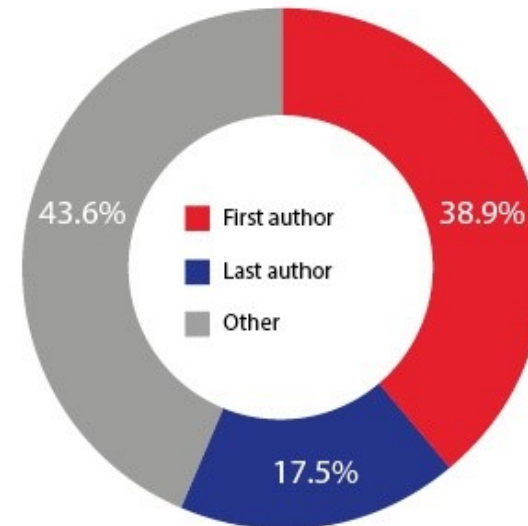


Use of ORCID in publications

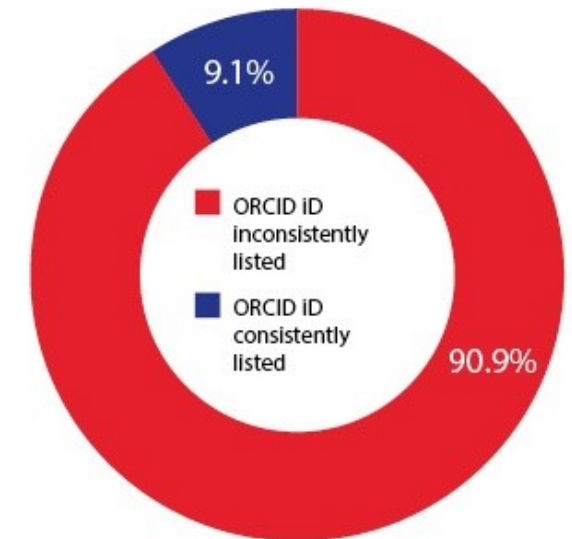


4% of
authors were listed
with an ORCID iD
(**388** out of **10 091**)

ORCID iDs were often provided for
the first author^a



For authors listed with an ORCID
iD and who authored multiple
publications, ORCID iDs were
mainly inconsistently listed^b



Stages at which an ORCID iD may have been captured during the manuscript publication process

- The data extracted from PubMed assume that ORCID iDs have been captured during the publication process in order to be entered into the metadata



Engaging with publishers to identify opportunities to improve the use of ORCID

- Incorporation of ORCID information into **author guidelines**
- Improved **visibility** of ORCID to authors during manuscript submission
- Addition of ORCID iDs to title page of **article template documents**
- Increased **visibility** and **communication** of ORCID in **emails** to authors and **additional** communication to co-authors
- Incorporation of ORCID iD **prompts** at reviewer and proof stages



Discussion

All

Accessibility



- **Publication plain language summaries** – Avishek Pal, Novartis
- **Preprints in the time of COVID-19** – Steph Macdonald, Oxford PharmaGenesis
- **Discussion** – All



Scientific Engagement &
Communications | Novartis

Publication Plain Language Summaries (PPLS)

Open Pharma Meeting – June 15, 2020

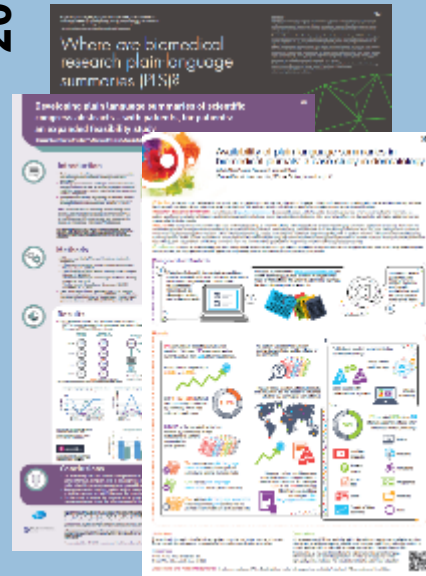
Avishek Pal

What propelled our PPLS journey?

Envision PFMD PLS
workshop 2018



ISMPP Annual Meeting
2019



Open Pharma 2020 /
ISMPP EU 2020



Virtual conferences 2020



How did we approach it?



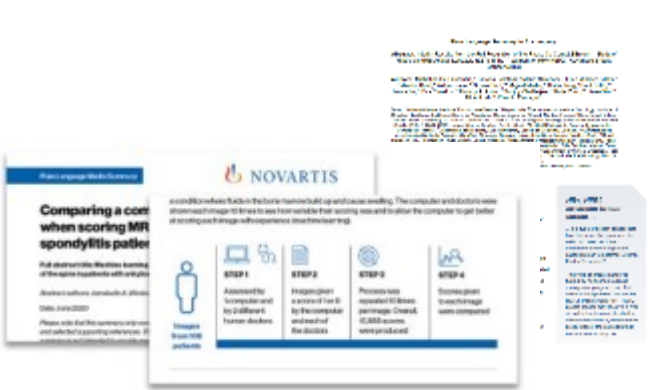
A more enabling external landscape!

The collage features several tweets and a journal article snippet. The tweets include:

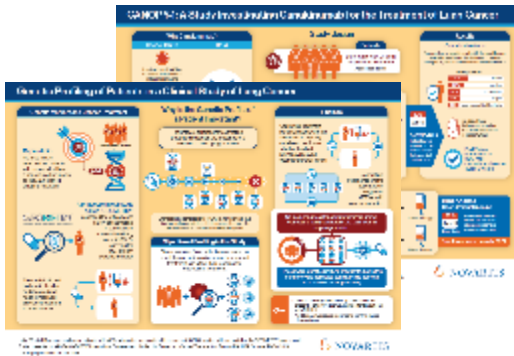
- Made WITH Patients @PFMDwithPatient · 18.05.20**
Plain Language Summaries #PLS included in @TADrugSafety - working towards better #patientengagement 🙌
Check out the article now.
journals.sagepub.com/doi/full/10.11...
@SAGEClinMed @AarhusUni
- Jason Gardner @DrJDGar... · 22.01.20**
Great discussions during the PLS panel! Super moderating from @eDawnlobban and provoking questions from the audience. Thanks to everyone involved #ISMPPEU20
- Therapeutic Advances in... · 06.05.20**
Introducing our first article with a Plain Language Summary (#PLS)! We are delighted to be working towards better #patientengagement 🙌
The full #OpenAccess article by @charp_s et al. can be accessed here: bit.ly/2YIOSxt
- Therapeutic Advances in... · 20.02.20**
We are delighted to announce that Plain Language Summaries (#PLS) are now a submission requirement in @TADrugSafety to support #patientengagement in scientific publishing ✅
This was done in collaboration with @PFMDwithPatient 🙌
- laura mckeaveney @Laura... · 19.05.20**
If we truly want to include the patient community in our decision making processes, we need to make the process of engagement transparent, simple and less burdensome. Novartis is proud to roll out the legal agreements. Thanks WECAN/MPE/PFMD for a great collaboration.
- Made WITH Patients · 14.05.20**
'The reference agreements will have a connection with @imi_paradigm & @EFPIA Patient Think Tank, an example of how this project can link to other initiatives & expand,' says F...

The journal article snippet is from **Leukemia**, published 26 May 2020, titled **Immunotherapy-free remission in chronic myeloid leukemia: the patient perspective and areas of unmet needs**. The authors listed are Harf, Celia Marin, Jennifer A. Bradley, Zack Pemberton-Whiteley, Felice S, Rita I. O. Christensen, Bahija Gouini, Nigel B. Deekes, Mina Daban & Jan.

What have we dabbled in?



Conference abstract summaries

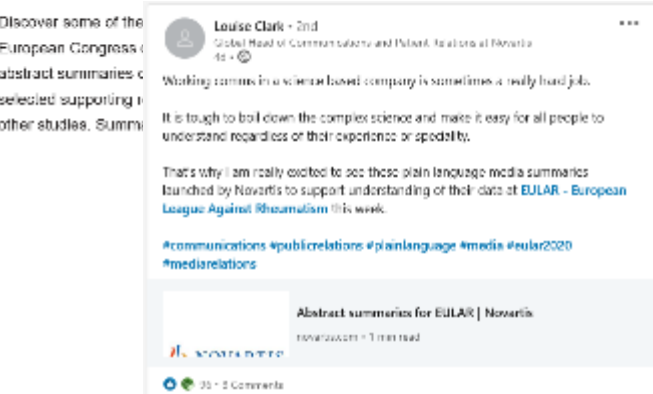


Plain language conference posters

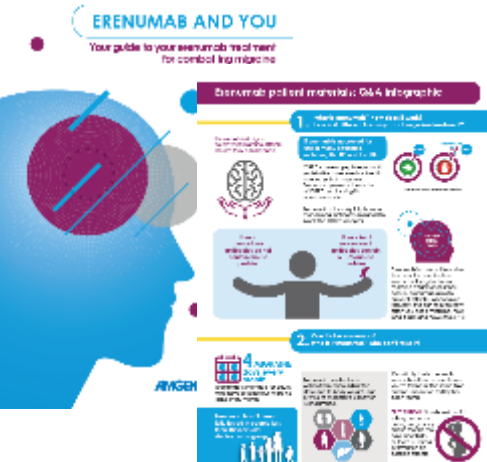


Classic PPLS

Abstract summaries for EULAR



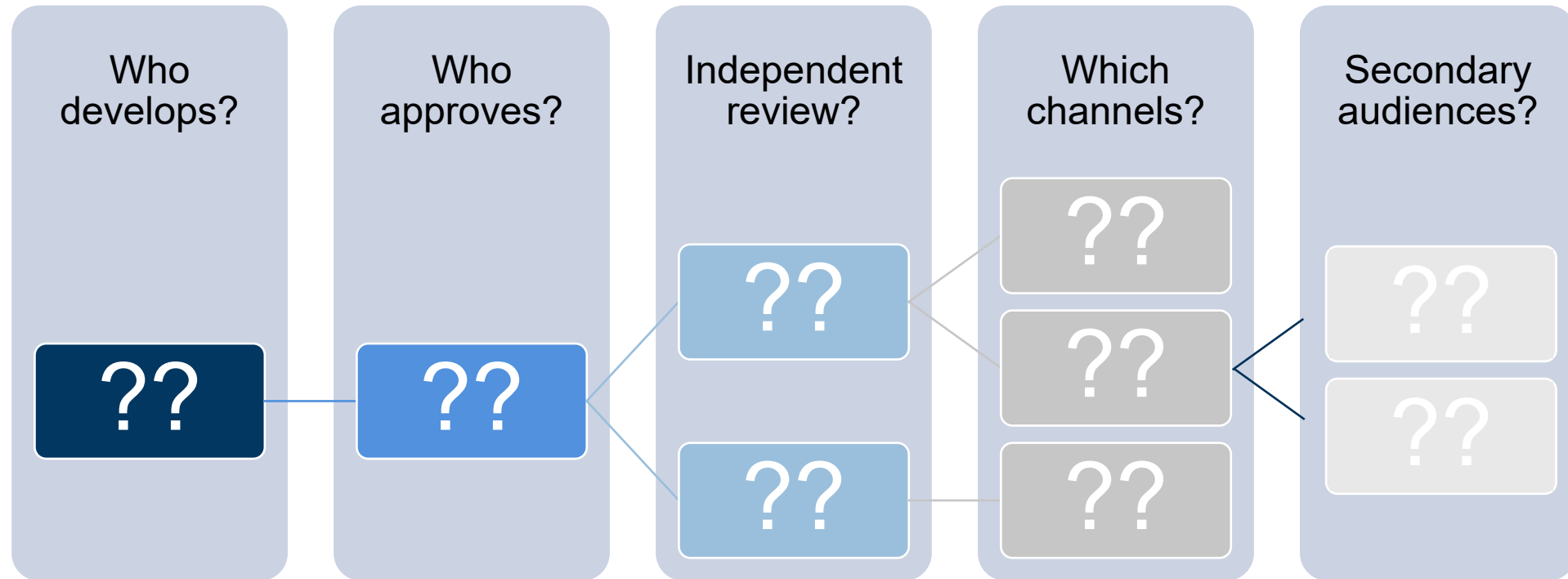
External comms about
Conference abstract summaries



Plain language FAQs

Where are we headed?

- ❑ Expanding dissemination channels
- ❑ Exploring secondary use of PPLS





Thank you

Preprints in the time of COVID-19

Steph Macdonald, Oxford PharmaGenesis



A preprint is a version of a scientific manuscript posted on a public server prior to formal peer review.



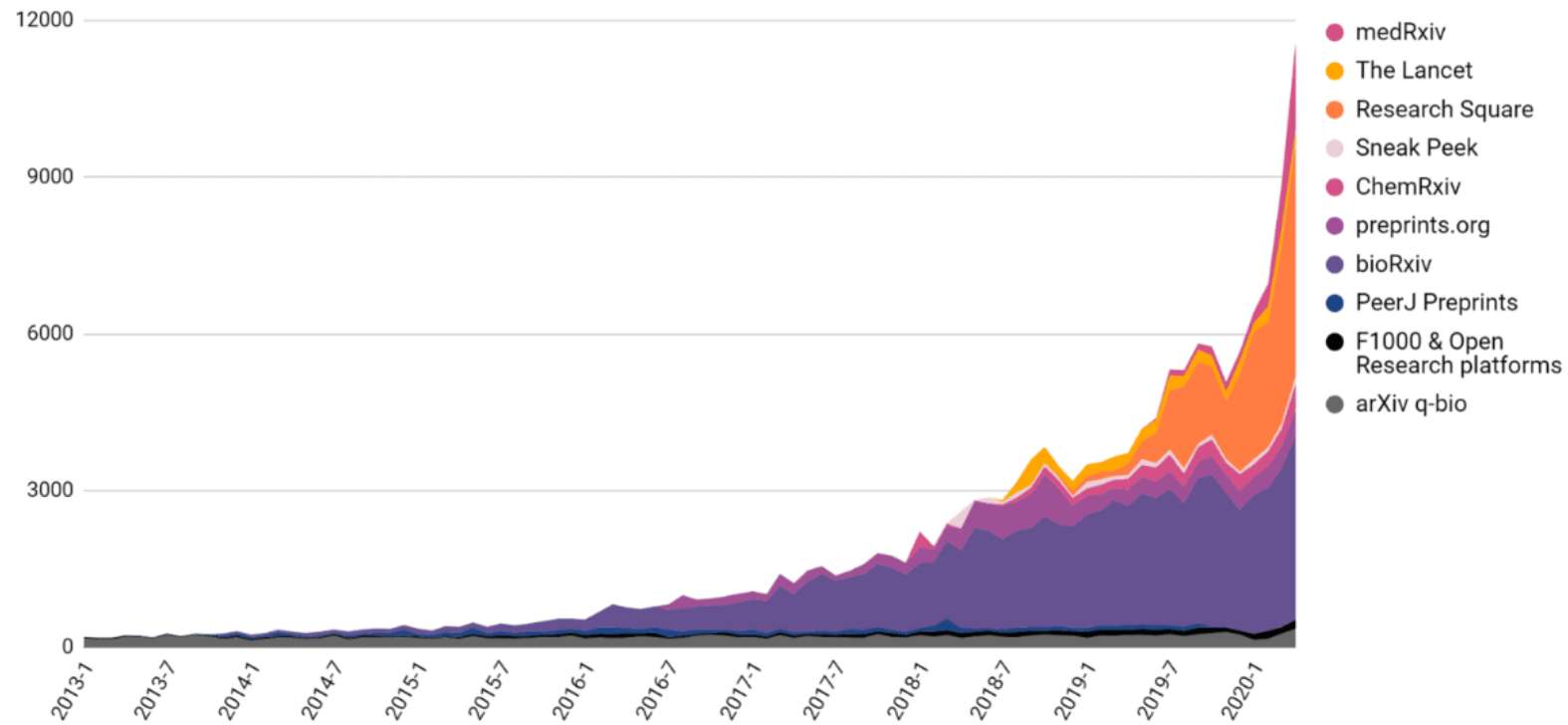
PLOS¹

- Free of charge
- Fast speed of dissemination
- Citable, findable and discoverable
 - Associated with a unique DOI allowing for version control
 - Can be cited in research/grants/proposals
- Feedback enablement before publication

The rise of biomedical preprints^a

Biomedical preprints per month through 2020-04

Sources: Jordan Anaya (PrePubMed), Naomi Penfold, EuropePMC, arXiv, Crossref, SSRN



^adoes not include 6000 preprints on relevant OSF platforms

Available from <https://asapbio.org/preprint-info/biology-preprints-over-time>. Accessed 13 May 2020

What constitutes a preprint server?

1991

arXiv.org

1994

SSRN
Tomorrow's Research Today

2013

bioRxiv
THE PREPRINT SERVER FOR BIOLOGY

PeerJ
Preprints

2019

medRxiv
THE PREPRINT SERVER FOR HEALTH SCIENCES

figshare

zenodo

Assign DOIs and take all types of data

Expose some or all of the peer-review process

CellPress

Sneak Peek
A PREVIEW OF PAPERS UNDER REVIEW

F1000Research
Open for Science

Praise for preprints

Covid-19 is reshaping the world of bioscience publishing

By JEFFREY S. FLIER / MARCH 23, 2020



The Covid-19 outbreak highlights the potential of preprints

A recent posting on bioRxiv may have been erroneous, but the mistakes THE LANCET picked up within hours, notes Kristen Sadler

March 2, 2020

By [Kristen Sadler](#)

Twitter: [@KristenSadler18](#)

The emergence of Covid-19 is testing the limits of many global systems, and not the least among them is the quality control

FEATURES / ISSUE: APR/MAY20 / GROWING SHARE FOR...

Growing share for preprints

2 April 2020

Issue: [APRIL/MAY 2020](#)

Topic tags: [PREPRINTS](#), [COVID-19](#)

Five organisations define, describe, and share their thoughts on a subject that has become something of a hot topic in recent times



THE LANCET
Global Health

COMMENT | ONLINE FIRST



PDF [192 KB]

Early in the epidemic: impact of preprints on global discourse about COVID-19 transmissibility

[Maimuna S Majumder](#) • [Kenneth D Mandl](#)

Open Access • Published: March 24, 2020 • DOI: [https://doi.org/10.1016/S2214-109X\(20\)30113-3](https://doi.org/10.1016/S2214-109X(20)30113-3)



Supplementary Material

Since it was first reported by WHO in Jan 5, 2020, over 80 000 cases of a novel coronavirus disease (COVID-19) have been diagnosed in China, with exportation events to nearly 90 countries, as of March 6,

27 January 2020
medRxiv

Full-genome evolutionary analysis of the novel corona virus (2019-nCoV) rejects the hypothesis of emergence as a result of a recent recombination event

D. Paraskevis, E.G. Kostaki, G. Magiorkinis, G. Panayiotakopoulos, S. Tsiodras

doi: <https://doi.org/10.1101/2020.01.26.920249>

Now published in *Infection, Genetics and Evolution* doi: [10.1016/j.meegid.2020.104212](https://doi.org/10.1016/j.meegid.2020.104212)

Posted January 27, 2020.

 **Download PDF**

 Data/Code



April 1 2020

Infection, Genetics and Evolution

Journal of Molecular Epidemiology and Evolutionary Genetics of Infectious Diseases (MEEGID)



Infection, Genetics and Evolution

Volume 79, April 2020, 104212

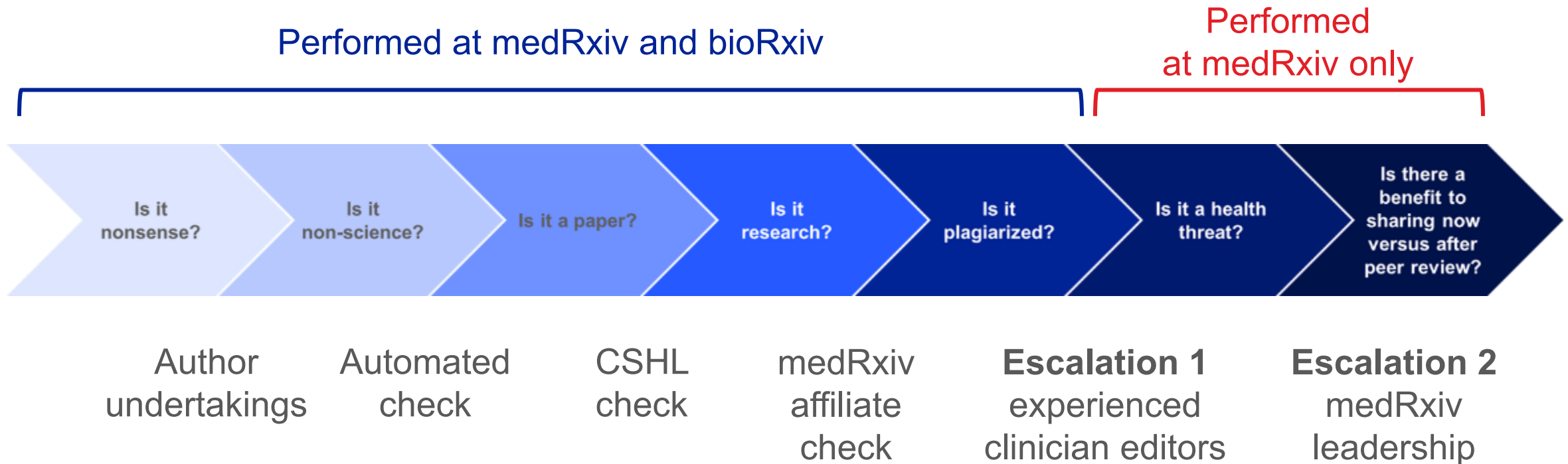


Short communication

Full-genome evolutionary analysis of the novel corona virus (2019-nCoV) rejects the hypothesis of emergence as a result of a recent recombination event

Risk mitigation at medRxiv

Launched in June 2019, medRxiv is a HealthScience-specific preprint server



Withdrawn

This article has been withdrawn. Click here for details

 Previous

Uncanny similarity of unique inserts in the 2019-nCoV spike protein to HIV-1 gp120 and Gag

126 comments

Posted January 31, 2020.

Prashant Pradhan, Ashutosh Kumar Pandey, Akhilesh Mishra, Parul Gupta, Praveen Kumar Tripathi, Manoj Balakrishnan Menon, James Gomes, Perumal Vivekanandan, Bishwajit Kundu

doi: <https://doi.org/10.1101/2020.01.30.927871>

This article is a preprint and has not been certified by peer review [what does this mean?].

Abstract

This paper has been withdrawn by its authors. They intend to revise it in response to comments received from the research community on their technical approach and their interpretation of the results. If you have any questions, please contact the corresponding author.

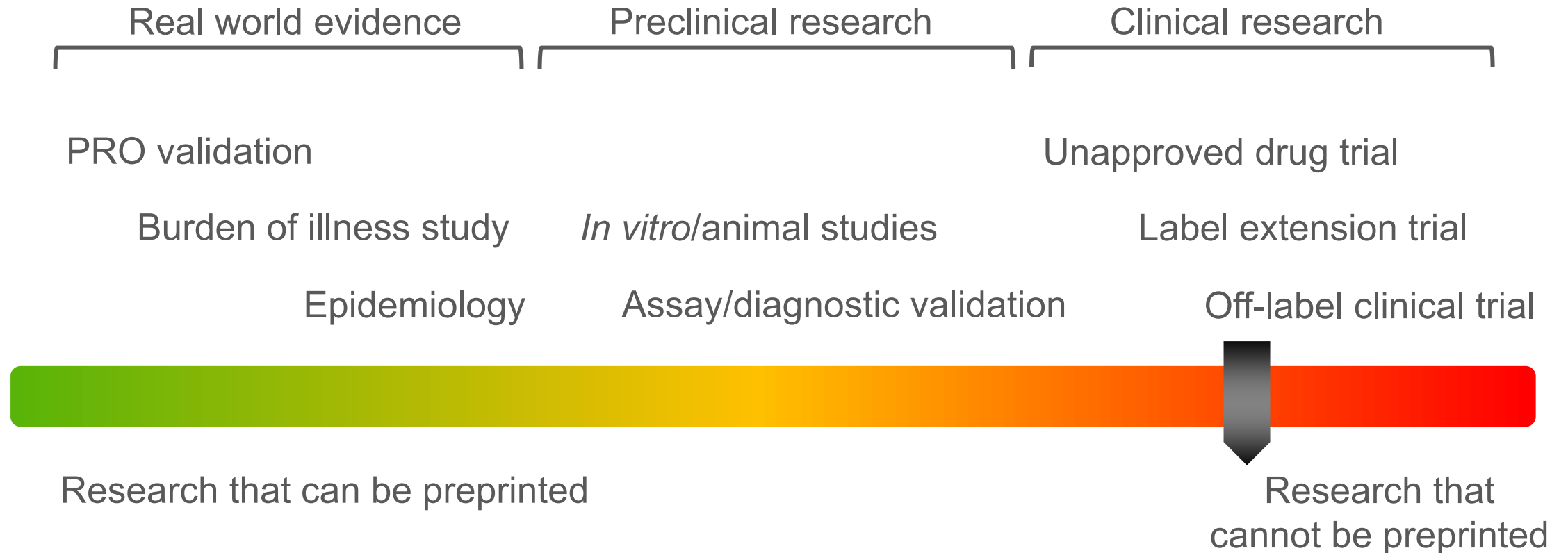
THE WATCHDOGS

Quick retraction of a faulty coronavirus paper was a good moment for science

By IVAN ORANSKY and ADAM MARCUS / FEBRUARY 3, 2020








What research should be shared as a preprint?



Over 90% of research can be made available as a preprint

Summary of journal policies

Journal	Accepts articles published as preprints
 The NEW ENGLAND JOURNAL of MEDICINE	✓
 JAMA Network™	<u>Posting as a preprint will necessitate the decision as to whether publication will bring new/meaningful insight</u>
 Journal of Clinical Oncology® An American Society of Clinical Oncology Journal	✓
 Annals of Internal Medicine®	<u>No mention of preprints</u>
 THE LANCET	✓

Why preprints, why now?



- Many conferences have been cancelled or postponed owing to COVID-19
- However, we need to make sure that data and clinical expertise are shared with the public as soon as possible
- COVID-19 has changed perceptions on open science and preprints
- We now have medRxiv, a preprint server specifically dedicated to health sciences and our needs

Do you think that the submission of preprints by pharma will increase after COVID-19?

- Yes, preprints are important for the rapid dissemination of research
- Yes, but it will be a while yet
- Yes, in some research areas, but not all
- No, clinical trial research should be peer-reviewed before publication
- I don't know



Discussion

All

Summary and close



Thank you!