Letter to authors and readers regarding the new NIH policy on public access

On February 3, 2005, the National Institutes of Health issued a policy that affects all NIH grantees and the journals in which they publish. The policy requests that authors with NIH funding deposit the full text of their research report, as soon as it is accepted for publication by a peer-reviewed journal, in the US government’s PubMed Central (PMC) database. These (non-copyedited and non-formatted) manuscripts will then be made available for public access no later than 1 year after their publication in the journal. The full text of the NIH policy can be found online. After the policy was announced, NIH Director Dr Elias Zerhouni sent a letter to grantees urging them to comply with the policy and to negotiate the shortest possible release date with the journal, preferably shorter than 1 year. The policy statement and the subsequent letter have led to considerable confusion among scientists.

To alleviate the confusion, we have summarized the key points of the NIH policy and described our response.

1. The NIH policy is a request, not a requirement. It is a policy, not a rule, and because NIH does not own the intellectual property of its grantees, it cannot enforce compliance. Further, NIH has clearly stated that it will honor the copyright agreements authors enter into with publishers and will not monitor whether grantees have deposited their manuscripts with PMC.

2. The policy takes effect May 2, 2005; it does not apply to articles accepted before that date.

3. Authors are requested to deposit the peer-reviewed, revised, and accepted author version of the manuscript, not the paper that has been copyedited, proofread, and formatted for the journal. (Also see item 7 below.)

4. Because changes often occur during the journal’s editing processes, there will be 2 versions of your paper available online: the final article version on the journal’s website (the official published version) and the manuscript version on PMC.

5. PMC requires that you meet their technical requirements when you deposit any of your manuscripts on their site. Their requirements are different from those for Blood. Please be aware that ASH and Blood will not play any role in depositing manuscripts on the PMC site.

6. The ASH copyright transfer agreement will be modified to allow authors to deposit their accepted manuscripts in the PMC database if they choose to do so.

7. Authors submitting their accepted manuscript to PMC must specify that the manuscript can be made public no sooner than 1 year after final publication in Blood.

8. ASH will require that authors submit to PMC the best available accepted version, which is the version submitted for online prepublication as a First Edition Paper.

9. ASH will further require that authors add the following disclaimer to the manuscript before sending it to PMC:

This author-produced electronic version of a manuscript accepted for publication in Blood has not yet been subjected to final copyediting, fact checking, and proofreading and is not the definitive publisher-authenticated version that will be published in Blood in print and online. The American Society of Hematology (ASH) and the Editors of Blood disclaim any responsibility or liability for any errors or omissions in this early author-produced electronic version of the manuscript or in any other version derived from it by the National Institutes of Health or any other third party. The final publisher-authenticated version of the manuscript will be made publicly available on the Blood website (http://www.bloodjournal.org) 12 months after its publication in Blood.

Some final thoughts

Given the wealth of sophisticated resources available online—with HighWire Press, Blood’s online publisher, being one excellent example—and given the steep reductions in funding of the NIH extramural program, we question the wisdom of using public funds to create a new central Government repository. It will contain only about one-third of the scientific literature (the papers that have some NIH funding), and it will present the preliminary version (the non-copyedited and non-formatted manuscript) rather than the final published version of the article. We would certainly prefer it if the funds that go into establishing this repository were used to increase research support for biomedicine.

One of the myths promulgated by Public Access advocates is that online publishing does not cost any money. Publishing does cost money. The flagship publication of the Open Access proponents, PLoS Biology, is free (for now) not because it collects author charges but because it is underwritten by a $9 million grant from the Gordon and Betty Moore Foundation. Using foundation money to finance a journal publication is not a tenable solution for all societies. We feel that our approach of using a combination of revenue streams—library subscription income, a big part of the membership dues, advertising revenue, and author fees—constitutes a more reliable approach to publishing.

We trust you are aware that Blood has been at the forefront of electronic publishing since 1997, when the journal first went online. Earlier full-text content currently reaches back to 1990, with plans to create, later this year, a full archive all the way back to the first issue published in 1946. It is important to understand that the entire back content of Blood is freely accessible to users worldwide: everything that is 1 year old or older has public access. Moreover, some of the most relevant content in Blood is open to the public at the moment of publication: the interpretive commentaries published in Inside Blood and 5 of the research articles discussed in Inside Blood. This content can be “free to the public” only because journal revenue from subscriptions and advertising supports these features. We try to keep a delicate balance between optimum free access and responsible management of limited financial resources.

The society and the Editor-in-Chief of Blood will continue to support Blood in its role as the preeminent hematology journal worldwide.

James N. George, MD
President, The American Society of Hematology

Sanford J. Shattil, MD
Editor-in-Chief, Blood

ASH and the American Association for Cancer Research (AACR) are members of a larger coalition addressing issues surrounding open access. Parts of this letter have been drafted collaboratively, and both ASH and AACR are sending similar communications to their members.

Reference

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