

# How Far Goes the Un-ethic of the Authors Who Submit the Articles to the Journals, Or, Better to Say, Their “Scientific Insolence”?

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## 1. BACKGROUND

The author of this text is a long-time editor of several indexed journals and is well versed in the problems of journal editing in all phases of publication processing: from the submission of the articles on the official journal’s website, their text editing, reviewing, formatting to the final stage, or sending the PDF formatting of articles for authors review, and correction of errors in the text and return of such corrected article to the Editorial Board and final processing (proofreading) until publication on the website and in the [www.bibliomned.org](http://www.bibliomned.org) system.

Even so far, it has happened that some of the authors create a problem when the authors withhold the return of the article or send it to the Editor and requesting the retraction of the article, thereby withholding the final processing of the article for its publication (printing) and sending it to index databases (PMC, Scopus, etc.). This significantly produces different consequences (of technical, material, stressful nature, etc.).

The culmination of the above has just reached its acmes because even the June issue of the journal *Acta Informatica Medica*, with 14 formatted articles, by 4 authors (attached below), has delayed the implementation of the procedures mentioned above and caused indescribable problems for the Editorial Board, which was the reason for disclosing in this way unethically, and even rudeness, of the authors of these 4 articles. The communication with them lasted about 20 days. It went so far that, in the end, it was reduced to insults unworthy of the rating of highly educated and ac-

ademically high-ranking professionals in biomedical sciences holding essential positions in the academic community and these authors’ roles in the educational or scientific process.

The author of this article pointed out similar problems in several of his publications, guided by editorial experience and trials and vicissitudes of a different nature, and defined such actions as unethical and unbecoming of those who research and make scientific contributions in their fields and question the veracity and intentions of what they do and want to contribute to the scientific and academic community with their research results. Earlier, I introduced the terms False Science and Money Science into scientific practice and scientific editing because publishing articles, even books, and monographs, became just a dry need to satisfy the wishes and intentions of advancing in a scientific or academic career.

## 2. THE MOST COMMON REASONS FOR THIS BEHAVIOR OF THE AUTHOR WHO SUBMITTED PAPERS TO THE JOURNALS

The most common reasons for this behavior of the author are:

a) In more than 95 percent of articles submitted by the DBMS system, the authors did not follow the Instructions for authors, BOMRAD Form for article preparation, COPE IJCME, and other guidelines;

b) In more than 97 percent of the articles, the authors did not correctly cite references, even those authors whose works were previously published in our journals;

c) Not a single article, out of the thou-

he Correlation Between Cyp2r1 Rs10741657 and Cyp27b1 Rs10877012 Gene Polymorphism With the Incidence of Latent Tuberculosis Infection

ORIGINAL PAPER

### The Correlation Between Cyp2r1 Rs10741657 and Cyp27b1 Rs10877012 Gene Polymorphism With the Incidence of Latent Tuberculosis Infection on Pregnant Mothers With Vitamin D Deficiency in Medan, North Sumatera

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**ABSTRACT** Coronavirus disease 2019 (COVID-19) can cause a wide clinical spectrum, ranging from asymptomatic to severe disease with a high mortality rate. In view of the current pandemic and the increasing influx of patients in healthcare facilities, there is a need to identify simple and reliable tools for stratification. **Objective:** Study aimed to analyze whether hemogram-derived ratios (HDRs) can be used to identify patients with a risk of developing a severe clinical condition and admission to hospital. **Methods:** This cross-sectional and observational study included 500 pregnant women with a confirmed diagnosis of COVID-19. Data on clinical features and laboratory parameters were collected from medical records and 132 HDRs were calculated and analyzed. Descriptive and inferential statistics were used for data analysis. **Results:** Of the 500 patients, 43.8% had a severe form of the disease. Hematocrit, thrombocytopenia, higher C-reactive protein (CRP), and erythrocyte sedimentation rate (ESR) were found in severe patients ( $p < 0.05$ ). Significantly higher neutrophil-to-lymphocyte ratio (NLR), derived NLR (dNLR), neutrophil to platelet ratio (NPR), mean platelet to lymphocyte-to-platelet ratio (NPR) and CRP to lymphocyte ratio (CRP/L) ratios were found in severe patients ( $p < 0.001$ ). In addition, they had statistically significant prognostic potential ( $p < 0.001$ ). The area under the curve (AUC) for CRP, dNLR, NLR, NPR, and NPR were 0.683, 0.619, 0.619, 0.619, and 0.603, respectively. The sensitivity and specificity were 65.7% and 65.6% for CRP, 61.9% and 57.3% for NLR, 40.6% and 40.4% for dNLR, 45.5% and 49.1% for NPR, and 45.5% and 49.1% for NPR. **Conclusion:** The results of the study suggest that CRP, dNLR, NLR, NPR, and NPR can be considered as potentially useful markers for identifying patients with a severe form of the disease. HDRs derived from routine blood analysis should be included in common laboratory practice since they are readily available, easy to calculate, and inexpensive.

**Keywords:** COVID-19, pandemic, hemogram-derived ratios, severity, stratification.

**1. BACKGROUND**  
Latent TB infection occurs in around 900 million worldwide (1) of which there is an estimated 216,500 cases per year (2). Latent TB infection in pregnancy has a high risk of developing into active TB which depends on the body's immunity (3) which can be affected by vitamin D levels. Vitamin D levels found in children infected with M. tuberculosis compared to healthy ones (4) and associated with the progression of LTBI to TB (5). Meanwhile, vitamin D deficiency is found in around 1 billion people in the world and in Indonesia as much as 95% of 148 adult women experience deficiency of vitamin D insufficiency (6, 7). Genetic variations in the genes involved in vitamin D metabolism will affect vitamin D levels in the body. A decrease in serum vitamin D levels can occur even though gene mutations occur in only one base (7, 8). In a Genome-wide Association Studies (GWAS) study, GC, CYP24A1, CYP2R1, DHCR7, and VDR were associated with low vitamin D levels (9) and genetic variations in vitamin metabolism genes. D can play a role in the risk of a chronic infectious disease to malignancy. In a systematic review, the

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Serum Periostin Levels in Acute Myocardial Infarction Patients: a 3-month Follow-up Study

ORIGINAL PAPER

### Serum Periostin Levels in Acute Myocardial Infarction Patients: a 3-month Follow-up Study

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**ABSTRACT** Heart attack, Acute myocardial infarction, are a major cause of morbidity and mortality in Western countries and are rapidly pandemic in developing and underdeveloped countries. Periostin concentration increases in the blood of patients after acute myocardial infarction and affects the process of cardiac remodeling leading to myocardial fibrosis. **Objective:** To evaluate the correlation between serum periostin levels and cardiac function in acute myocardial infarction patients' short-term prognosis three months after onset. **Methods:** Fifty acute myocardial infarction patients were prospectively enrolled in the study. Blood samples and controls were established. The levels of periostin of acute myocardial infarction patients 3 months after the onset were measured using enzyme-linked immunosorbent assay. Good tests and echocardiography were performed during the patients' follow-up. The correlation between periostin and TIMI, GRACE scores, body mass index, and left ventricular end-diastolic diameter were investigated. **Results:** Serum periostin levels increased significantly in acute myocardial infarction patients compared to normal controls. There was an association between serum periostin at diagnosis and left ventricular end-diastolic diameter three months after acute myocardial infarction: serum periostin was in negative correlation with left ventricular end-diastolic diameter ( $r = -0.38, p = 0.006$ ). **Conclusions:** Serum periostin levels increase in acute myocardial infarction, and serum periostin levels predict cardiac function three months after acute myocardial infarction.

**Keywords:** periostin, acute myocardial infarction, cardiac function.

**1. BACKGROUND**  
Cardiovascular disease including acute myocardial infarction (AMI), are a major cause of morbidity and mortality in Western countries and are rapidly pandemic in developing and underdeveloped countries (1). AMI is a dangerous and rather common disease, affecting 2 million people suffer from AMI every year in the world. This pathology tends to lead to heart failure due to excessive remodeling, increasing cardiac fibrosis. Cardiovascular activation is a key step in the pathogenesis of heart failure, and periostin is likely to contribute to the increased endurance of these cells in heart failure, particularly by increasing the scar tissue healing process (8). Heart failure is a common complica-

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Reliability, Validity, and Responsiveness of the Arabic Version of the Upper Limb Functional Index

ORIGINAL PAPER

### Reliability, Validity, and Responsiveness of the Arabic Version of the Upper Limb Functional Index

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**ABSTRACT** The upper limb functional index (ULFI) is not always self-report outcome measure questionnaire with robust psychometric properties to assess the upper limb musculoskeletal disorders (UL-MSDs). **Objective:** This study aimed to investigate the psychometric properties of the Arabic version of ULFI (ULFI-Ar). **Methods:** In this observational study, 139 patients (87 male, 52 females with mean age of 38.67 ± 13.04 years) with various UL-MSDs, completed the ULFI-Ar. Descriptive statistics, Cronbach's alpha questionnaire (Cronbach's alpha), and numeric pain scale (NPS) Arabic. All participants determined the factor structure, and the test-retest reliability of the participants determined test-retest reliability (ICC) = 0.96 and internal consistency (Cronbach's alpha) = 0.95. **Results:** The ULFI-Ar construct validity obtained by principal factor analysis as one-factor structure, demonstrated an excellent internal consistency (Cronbach's correlation coefficient (CC) = 0.95), measurement error (intraclass correlation of measurement (SEM) = 4.43%, minimal detectable change (MDC) = 10.34%, medium internal responsiveness (Cohen's d) = 1.62 and standard response of mean (SRM) = 0.67), and strong test-retest reliability (Cronbach's alpha = 0.96, p < 0.001). **Conclusion:** The ULFI-Ar is a valid, reliable, and responsive self-report questionnaire to assess UL-MSDs in Arabic-speaking patients.

**Keywords:** psychometric properties, reliability, validity, responsiveness, outcome measure.

**1. BACKGROUND**  
Musculoskeletal disorders (MSDs) are a common occupational problem encountered by workers performing physical therapy in the upper limb MSDs (UL-MSDs). These affect both health care resources and quality of life (1-3). In Saudi Arabia, the prevalence of UL-MSDs in general population reaches up to 45.6% (2, 3). One of the evaluation tools is self-reported outcome measures, which are designed to detect a patient's health status, function level, and health-related quality of life (4, 5). Furthermore, they measure people's emotions, thoughts, behaviors, and circumstances associated with disability or impairment (6). Several self-reported outcome measures have been developed for UL-MSDs including the Neck and Upper Limb Index (NULI) (7), Upper

Extremity Functional Scale (UEFS) (8), Upper Extremity Functional Index (UEFI) (9), Disabilities of the Arm, Shoulder, and Hand (DASH) (10), QuickDASH (11), and QuickDASH-9 (12). Most of these tools have limitations such as comprehensiveness, adequacy of the items towards the instrument domains, and generalization from a specific to general population (3, 14). Other limitations are related to practical characteristics or interpretability (9, 15). The upper limb functional index (ULFI), on the other hand, has overcome the aforementioned limitations successfully. The ULFI has been used in several countries and translated and validated in many languages. Recently, we translated and cross-culturally adapted the ULFI to Arabic language

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Atypical Case Twin-to-Twin Transfusion Syndrome Managed by Fetoscopic Laser Photocoagulation and Amniopatch, Single-Center Experience in Indonesia: a Case Report

CASE REPORT

### Atypical Case Twin-to-Twin Transfusion Syndrome Managed by Fetoscopic Laser Photocoagulation and Amniopatch, Single-Center Experience in Indonesia: a Case Report

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**ABSTRACT** The Quintero's Staging Twin-to-Twin Transfusion Syndrome (TTTS) diagnostic criteria does not always fulfill in cases of TTTS, there is no oligohydramnios in donor sac and sometimes overlap with other monochorionic twin complications, like selective intrauterine growth restriction (sIUGR). **Objective:** The aim of this article was to present pregnant woman with a diagnosis of TTTS and diagnosed by the sonography findings, where the placenta is anterior right side of the patient's abdomen. **Case presentation:** A 24-year-old woman, 22-24 weeks of pregnancy, diagnose with TTTS, normal amniotic fluid, normal bladder filling, persistent absent end diastolic flow Doppler velocity in umbilical artery in the donor. Polyhydramnios in the recipient sac, fetal death and miscarriage of 39% more than 25%, was not met traditional diagnostic criteria of TTTS stage 2. The patient was overlapped with diagnostic criteria sIUGR type 2. After two weeks of treatment, we performed fetoscopic laser photocoagulation and successfully resolved placental anastomoses and amnioreduction 2.5 liters. The donor developed transient oligohydramnios and became normal until delivery. **Conclusion:** Some TTTS does not meet the traditional diagnostic criteria and overlaps with other monochorionic twins complications.

**Key words:** Atypical TTTS, Fetoscopic laser photocoagulation, Amnioreduction, Amniopatch.

**BACKGROUND**  
The twin pregnancy is a high risk pregnancy, being associated with a series of fetal and neonatal complications when compared to singleton pregnancies. Monochorionic diamniotic twin gestation is associated with a 10-15% risk of twin-to-twin transfusion syndrome (TTTS). The main reason for this condition is the presence of vascular anastomoses connecting the two fetal circulations, which are nearly always present and account for a range of pregnancy complications, and damage to the surviving twin in the event of the intrauterine demise of its co-twin. Some monochorionic twins share a single placenta that is not always equally shared between the twins, which may lead to severe birthweight discordance (1). Traditional diagnosis of TTTS requires the ultrasound demonstration of the polyhydramnios and oligohydramnios sequence. However, up to 7% of

TTTS cases may show ultrasound signs of fetal deterioration even in the absence of amniotic fluid discordance that usually meets established diagnostic criteria. A different clinical scenario in which TTTS may overlap with other monochorionic twins complications such as selective intrauterine growth restriction (sIUGR). However, any case of TTTS failing to meet established diagnostic criteria of TTTS is classified as "Atypical TTTS" (2, 3).

**OBJECTIVE**  
The aim of this article was to present pregnant woman, with a diagnosis suspect of TTTS and diagnosed by the sonography findings, where the placenta is anterior right side of the patient's abdomen.

**3. CASE PRESENTATION**  
25-year-old, G1P0A0, 20-22 weeks pregnant woman, with a diagnosis sus-

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Figure 1-4. Screenshot of the 4 first pages of formatted papers from the issue of Acta Informatica Medica sent to authors for confirmation

Manuscript No:	AIM-2023-02-020
Status:	New Submission
Title:	Reliability, Validity, and Responsiveness of the Arabic Version of the Upper Limb Functional Index
Article Type:	Original Article
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Plagiarism Check:	
Receiving Date:	Feb 28, 2023 04:58
Patient informed consent:	A written consent form was completed by each participant.
Conflict of interest:	This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors. The authors have no conflict of interest to report.
<b>Article (doc/docx/pdf)</b>	
Initial Version: Original WORD document (docx) 115.3 KB - [Change This File] Initial Version (PDF): Original PDF Full Text (pdf) (442.3 KB) - [Change This File] <a href="#">Convert to PDF again</a>	
See Answers to Revision Letters on the right side of page	

Manuscript No:	AIM-2023-04-032
Status:	New Submission
Title:	Optical Case-Termis-Twin Transfusion Syndrome Managed by Fetaloscopic Laser Photocoagulation and Amniocentesis: Single-Center Experience in Indonesia: A Case Report
Article Type:	Case Report
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Plagiarism Check:	
Receiving Date:	Apr 20, 2023 03:52
Patient informed consent:	Written informed consent was obtained from the patient for publication of this case report in accordance with the CARE (Case Report) guideline. A copy of informed consent is available for review upon request.
Conflict of interest:	No conflict of interest.
<b>Article (doc/docx/pdf)</b>	
Initial Version: Original WORD document (docx) 613.9 KB - [Change This File] Initial Version (PDF): Original PDF Full Text (pdf) (136.3 KB) - [Change This File] <a href="#">Convert to PDF again</a>	

Figure 5 and 6. Screenshot of two submitted papers of the authors who asked its withdraw from the formatted issue of Acta Informatica Medica journal

sands that I have edited, has been proofread and linguistically edited; many of them are almost semi-literate and required serious language revisions during final processing;

d) Listing co-authors in articles has become a severe nuisance. Over 80 percent of authors write co-authors who have no professional or scientific connection with the article's content, nor do they work in the institutions where the research was conducted and its results presented. A particular problem is the addition of family members as co-authors, even though they have no or minimal technical relations with the submitted article. Authors defend themselves as they are forced to because they cover material costs to cover the requested publication fees;

e) In more than 95 percent of articles, authors do not fulfill the APC (Article Processing Charge) obligations that publishers require to guarantee that papers will not be withdrawn because it is an established practice that some authors submit the same article to several journals. However, the COPE Guidelines indicate that authors are not allowed to do so and cannot submit the article to other journals until they receive a written rejection (retraction letter) that their paper will not be published in the primarily submitted journal. COPE considers such a procedure unethical and places authors and co-authors on a "blacklist".

### 3. THE INFLUENCE FOR OTHER REASONS FOR UN-ETHICAL AUTHOR'S BEHAVIOR

One of the key reasons for the "earmarking" of certain publishers and the journals they publish, calling them "predators", was the way of taking APC in the so-called clean in advance amount, which crippled many, mostly small publishers, in every way, because many authors ran away from such publishers (who are not only publishers of the journals but also have other services that they provide and thus their other work activities were impaired and thus produced significant financial difficulties. Because of the above, many publishers resented and asked Geoffrey Beall to withdraw their names from his so-called "Bell's list of predators". Many authors abused this by referring to Beall and his unofficial list accepted by what kind of scientific institutions as an obligation and standard that is scientifically unfounded.

The Bologna concept (model) of education significantly helped to intensify what was described above – "scientific stormtroopers and fake scientists" used the Bologna concept of education to a great extent and produced articles from projects and research, which is over 60 percent are just waste

studies and socially useless, which is one of the key reasons why article authors behave this way. Someone has to deal with this problem seriously.

The editor has introduced the practice of sending PDF formatted articles in the form of Contents as a GROUP to all authors and asking for their consent for correction and permission for publication. In this way, transparency is achieved, but also the possibility to have in the argumentation how it went on and how the articles were processed before publication.

Attached are several texts from 55 e-mails exchanged with the authors, proof of the above facts. From the correspondence, I extracted several exciting views and opinions of authors and co-authors about their decisions to withdraw articles from the formatted journal issue. They are very illustrative and do not need a comment. One thing is sure: the behavior of the authors and co-authors of the articles is not only unethical but also rude. It is reprehensible - even of a criminal-legal nature because the associates who work on editing the journal's issues are financially damaged or stolen. They can be asked a question: can they go to the store and get necessary necessities and items without paying for them, whether it is food, clothing, medicine in the pharmacy, or any other thing that has its price-for-use value? And the helpful value for the authors is that by publishing the article, they can apply for some academic or scientific requirements - applications for master's degrees, doctorates, elections to academic and scientific positions, etc. And that is paid.

Nowhere does it say you get free article publication in a journal? Beall's categorization of APC does not make sense. I believe he has edited a single indexed journal in his life and does not know or know very little about the problems apostrophized here..

### 4. TITLES OF FORMATTED PAPERS IN THE CURRENT ISSUE OF ACTA INFORMATICA MEDICA WHICH TO BE RETRACTED (WITH AUTHOR'S STATEMENTS)

What are the 4 articles whose authors are the subject of this title and the text related to its title:

\* **The Correlation Between Cyp2r1 Rs10741657 and Cyp27b1 Rs10877012 Gene Polymorphism with the Incidence of Latent Tuberculosis Infection on Pregnant Mothers with Vitamin D Deficiency in Medan, North Sumatera**

Fathia Meirina

\* **Serum Periostin Levels in Acute Myocardial Infarction Patients: a 3-month Follow-up Study**

Nguyen Trung Tin, Huynh Van Minh, Doan Chi Thang, Phan Thi Minh Phuong

**\* Reliability, Validity, and Responsiveness of the Arabic Version of the Upper Limb Functional Index**

Yousef Abdulkarim Albahrani, Ali Muteb Alshami

**\* Atypical Case Twin-to-Twin Transfusion Syndrome Managed by Fetoscopic Laser Photocoagulation and Amniopatch, Single-Center Experience in Indonesia: a Case Report**

Dudy Aldiansyah, Binarwan Halim, Edwin Martin Asroel, Mohammad Fahdy, Hanudse Hartono, Thomson

**D.A.** I submitted an article by title Atypical Case Twin-to-Twin Transfusion Syndrome Managed by Fetoscopic Laser Photocoagulation and Amniopatch, Single-Center Experience in Indonesia; a Case Report in your journal, but there was no news and no update from you. Therefore, I decided to submit it to another journal, and now it is already reviewed and will publish as soon as possible. Still, at the same time, my article will be published in your journal, too; I'm so sorry, but I want to withdraw my article to prevent plagiarism. Please don't publish my article. It was already submitted and reviewed elsewhere; please remove my article and replace it with another person's article.

**Y.A.M.A.** I doubled recheck myself, and it shows as follows. I was confused between your valued journal and the other "Acta Biomedica" journal in the rejection decision. On the other hand, I checked my account in your journal and have received no response from you, neither an acceptance nor rejection. Up to this moment, the manuscript status is "waiting for Editor's first view". A screenshot is attached on Aug 4, 2023. In addition, I sent an email requesting to withdraw my paper more than three months after the submission. The submission date was on Feb 20, 2023, followed by a reminder on March 29, 2023, and a withdrawing email on May 5, 2023, but I have no response. This request was because your valued journal does not accept current articles, as stated in the platform. All the emails were attached. Please accept my appreciation for your valued decision, and I request you to take the full picture of the situation described above.

**N.T.T.** Thank you for your email. We have not received any email since June 17, 2023, when I sent you the manuscript. Could you please send the PDF again? We will pay the APC immediately.

**F.M.** Why is no status change for an editorial manager on your Acta Medica Informatica official website? The status of my article is still 'waiting for the editor's view.

## 5. CONCLUSION

Finally, there is the key unethically of the author in various variants of plagiarism, and I have written and published many articles about this that are cited in scientific databases and platforms. Still, these aspects of unethically I have mentioned here have not been openly described and disclosed in this way in written form. Many people know this but don't have the courage to face it openly and help reduce their frequency as much as possible. As a European Association of Science Editing member in 2013 at the General Assembly in Tallinn, I hinted at what I have described now. Still, nothing, in particular, has gone further in terms of any of the working groups taking steps to resolve them. I proposed to the EASE

members to establish variables and criteria for evaluating and recognizing types and levels of plagiarism and other unethical behaviors and establish a Body responsible for avoiding and punishing authors with appropriate measures besides COPE and its Guidelines.

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