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# CORRESPONDENCE

## Handling Egregious Plagiarism

*To the Editor:*

In their editorial “Egregious Plagiarism: More than Misconduct,” Drs. Fred and Scheid warned that “. . . we can’t stop it; we can only hope to contain it.”<sup>1</sup> We think it is necessary to stop it, regardless of what form it takes.

Plagiarism can be blatant. The conceptual theft cited by Drs. Fred and Scheid is a good example. Plagiarism can be more subtle, such as translating original papers from one language into another, or modifying and publishing a figure without crediting its creator or source.<sup>2</sup> A well-known Thai professor did just that in republishing a figure from a Singapore journal in a local Thai journal.<sup>3</sup> The plagiarist can be anyone from a junior fellow to an established scientist. Action in all cases is necessary, but action is not always taken, especially when the plagiarist holds a senior position or has academic power or influence.<sup>4</sup>

How can we in the medical community hope to stop plagiarism? We should promote and develop solid solutions for getting rid of it. We should continue to remind each other that it is unethical. We should treat plagiarism as a disease to be eradicated from our own work and from the medical literature. In the past, managing plagiarism and its consequences fell mainly to journals and publishers. Now, every one of us should be vigilant. Sharing data on instances of plagiarism and reinforcing its professional sanction is a good model for managing the problem.

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2. Wiwanitkit V. Plagiarism and copyright violation: two things in common. *Prehosp Disaster Med* 2013;28(1):79.
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