

level of care. Building a cadre of doctors and allied practitioners capable of stabilising patients and preventing avoidable deaths in resource-limited settings must become our shared national priority.

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Editorial bias, nepotism, and the “club culture” in Indian medical journals

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We are compelled to address a persistent and troubling issue in Indian medical publishing: the widespread favouritism in editorial decisions. Many Indian journals, rather than serving as impartial scientific platforms, frequently operate in ways that benefit their editorial board members and close associates [1]. As a result, well-researched manuscripts from those outside these circles often encounter unexplained desk rejections or prolonged delays, while submissions from close associates are expedited for publication [2].

This “club culture” is no longer a secret among the research community. Budding young and mid-career faculty are quietly advised that unless they “know someone on the board,” the odds of acceptance are thin. The unfavourable result is not just the demoralisation of sincere contributors but also the corrosion of the scientific integrity that journals are supposed to be upholding. The compromised credibility of peer review does harm to the reputation of the Indian research community as a whole [1,2].

When editorial board members repeatedly publish in their own journals without transparent external review, it creates a glaring conflict of interest—a practice that continues largely unchecked. While international standards provide clear guidelines to prevent such exploitation, some Indian journals still function as echo chambers where a handful of individuals dominate published content, stifling true diversity of perspective [3].

Nepotism in publication is not a trivial administrative flaw but an ethical failing. It shuts the door for deserving researchers, often from less privileged or upcoming institutions, for disseminating their work. Making things worse, it degrades the quality of our medical evidence-based research, since subjective editorial preferences, rather than scientific merit, dictate what reaches print. Such practices also explain why high-quality Indian research is increasingly published in international journals, leaving local publications struggling for visibility and impact [4].

Reform in publication standards is overdue for the restoration of trust. Measures are needed like enforcing double-blind peer review as the default for all submissions and an explicit policy that reviewers with conflicts of interest must recuse themselves, especially for submissions from editors. There should be independent handling editors when board members submit articles. There should be a robust review system, where reviewers’ comments are published alongside published papers, and when a manuscript is rejected, the reviewers’ comments are shared with the

authors. To enhance confidence amongst the research community, journals should also publish an annual transparency report that includes detailed acceptance rates and should place limits on the number of submissions editorial team members may present to their own journals [3,4,5].

Indian medicine prides itself on its global contributions to science. Our journals, however, cannot claim that stature while mired in favouritism and opaque practices. If editors continue to place personal networks above professional duty, they risk alienating the very community they claim to serve. It is time for our editorial leadership to rise above the “friends and acquaintances” culture and reclaim integrity as the true hallmark of Indian medical publishing. They should publish editors' conflicts of interest, limit editorial terms, cap the number of publications from the editorial team, and have ethical audits conducted by external agencies. These steps will enhance the credibility of Indian medical publishing.

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