

Editor:

Kindly permit me to confess my personal failings as reflectively mirrored through Dr. Simon's eloquent piece on authorship.¹ Despite my never-ending admiration of authors, I have viewed the authorship process with some trepidation. One of the perpetual myths that has hindered authorship in my case is the perception that to be a good author, one's writings must flow flawlessly like a village stream. They must be decorated with flowery expressions. In fact, I used to believe it difficult to generate papers in psychiatry, especially in forensic psychiatry.

Moving to the United States was personally enabling, and as described by Dr. Simon, once I got here, the urge to write became almost addictive. However, my plans to write did not yield precious newborn babies after months of pregnancies. Instead, my plans ended up in Sylvia Plath's "stinking pile of unpublished writings."² I would start writing a paper with the Olympian burst of Carl Lewis, only to slow down to the almost snail-like finish of an inexperienced marathoner. For me, collaborative effort was facilitative, and I am writing this addendum to show residents and young doctors, that despite the perceived diffi-

culty, the barriers to productive authorship can be overcome.

To make a legacy of Dr. Simon's piece, we should heed Dr. Bloom's recommendation that the basic elements of authorship, beyond psychiatric reports, should be incorporated in the training curriculum.³ Such training would help aspiring authors to avoid viewing the process as akin to preparing an exotic soup, full of sophisticated experimental designs, sprinkled with statistical condiments like *p* values and confidence intervals. Trainees should be taught that authorship may be needed in many settings, from case reports, to simple letters to the editor (offering critical perspectives on a publication), to more complex endeavors like books and in-depth review articles.

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References

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