

# Fair access to trauma research

*«Any man's death diminishes me,  
because I am involved in Mankind»*

John Donne (1572–1631)

The words of the poet John Donne appear as relevant today as when they were written 400 years ago (1). More than five million people perish annually as a consequence of trauma, while innumerable others remain afflicted by permanent or temporary disabilities. Trauma constitutes a serious and increasing health problem that causes untold suffering for individuals, families and societies. The global trauma burden is heaviest in low-income countries, where primary preventive measures are often absent and the scale of the healthcare system is insufficient to cope with the challenges (2). Well organized emergency medical systems and high-quality trauma care increase the rate of survival (3), and many of the deaths occurring in low-income countries could have been avoided. There are many hard-working colleagues of ours who defy demanding conditions and provide excellent trauma care. Even though their dedicated efforts in local projects improve the trauma care provided (4), studies have shown that post-accident mortality in low-income countries is higher than in high-income countries (5). The negative socio-economic impact is reinforced by the low degree of development of rehabilitation services and welfare schemes.

## Access to trauma research is threatened

Cost-effective and field-friendly measures must be identified to counteract the consequences of this lack of access to emergency

income countries have had open access to many scientific publications through the «Health InterNetwork for Access to Research Initiative», which is an agreement that was established with the aid of the World Health Organization. It is regrettable that many publishers are now withdrawing from the agreement (7), and worrisome that our colleagues may no longer enjoy this free access.

## Open access to trauma research

Open access to electronic journals provides the user with free access to peer-reviewed publications. As a rule the cost of publishing is covered by the author paying a publishing fee. The author keeps his copyright to the article, but allows the reader to download and distribute the full text at no cost. The access requires no password or assistance from a librarian, and is an Internet-based, user-friendly source of updated research results. An increasing number of publishers follow this practice, and a number of openly available journals have succeeded in achieving recognition in their respective fields (8, 9).

The Norwegian authorities have given their support to open-access publication channels (9), and their goal is to make all government-funded research openly available (10). In Scandinavia, Sweden is at the forefront in requiring that all research funded by the Swedish Research Council must be published with open access (11).

Internationally, there are several openly available journals in the field of emergency medicine. *Critical Care*, *Emergency Medicine Journal*, *Scandinavian Journal of Trauma, Resuscitation and Emergency Medicine* and *Archives of Orthopaedic and Trauma Surgery* are all examples of

trauma care in high-income countries ought to be made freely available on a global scale as a matter of collegial solidarity. Open access to updated science can contribute to improvements in the quality of trauma care, and thereby even out the difference in mortality rates between the rich and poor.

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*Stated conflicts of interest: None*

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*Received 3 February 2011, approved 17 February 2011. Medical editor: Lars Frich.*

healthcare resources. One example of such measures was recently identified in a randomized controlled study published in *The Lancet*. The study concluded that the relatively cheap preparation tranexamic acid reduces mortality among haemorrhaging trauma patients (6). Health institutions in low-income countries have limited opportunity to subscribe to costly journals, even though user-friendly access to research is a precondition for being able to provide up-to-date trauma care. Until now, low-

journals in the field of emergency medicine that have a European orientation and open access. Furthermore, The Journal of the Norwegian Medical Association practises open access (12) and regularly publishes articles in English. In parallel, several of the subscription-based journals offer open access to selected articles. Researchers and clinicians with an interest in traumatology thus have sufficient opportunities to publish openly available articles, and the advantages are obvious. Professional advances in