Role of finance officers

This is further to what Lavakare1 has said on the role of finance officers in grant-funding agencies.

In my role (pre-retirement) as head of Extra-Mural Research at DRDO at the turn of this century, I must have approved and arranged for the disbursement of several tens-of-crores in research grants, overwhelmingly to PIs in educational institutions. Not once was I hamstrung, much less thwarted, by the pertinent financial adviser in DRDO.

The crux is to make an operational distinction between ‘sanction’ of expenditure, and ‘incurring’ expenditure by officers of the granting department under that sanction – this is an arcane, but essential, distinction that is central to the smooth administration of research grants by departments. The authority to ‘incur’ grant-expenditure under the relevant budget head of a department can be designated – as it so was in DRDO – in a single ‘sanction’ (PIs and institutions are familiar with these as a Letter of Sanction whose text usually begins with ‘The President is pleased...’) issued at the beginning of the financial year, for the entire amount of the pertinent grant-budget of the department for that financial year. Designated technical officers of the department can be authorized – as they so were in DRDO – to ‘incur’ (not ‘sanction’) expenditure under that single sanction for disbursement to PIs/institutions, following technical approval of their proposals. The point is that while a ‘sanction’ requires financial concurrence, an incurring of expenditure under that sanction need not, if the covering ‘sanction’ does not require it.

The second issue that irks PIs concerns utilization certificates. Here the boot is on the leg of the grantee institutions – particularly the richer ones. With IISc and the older IITs which are not short of buffer monies, I tried (and failed) to arrange for their respective finance offices to provide a ‘single consolidated’ utilization certificate across all project monies disbursed to them from the same budget head of DRDO in the previous financial year; the administrative ‘burden’ (almost nil now with e-accounting) and responsibility of doing so being then on the finance offices of the grantee institutions and not on their PIs.


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Indian Journal of Medical Research enters its centenary year

In the beginning of the 20th century, in pre-independent India when many communicable, infectious and other diseases and disorders like malaria, plague, kala-azar, cholera, tuberculosis, leprosy and nutritional problems were rampant on a large scale affecting a wider section of the society, there was limited organizational and research support to deal with these problems. A beginning was made with the establishment of the Indian Medical Services (IMS) in 1896. The very next year in 1897, while working in Secunderabad, Ronald Ross demonstrated the role of female Anopheles mosquitoes in transmitting malaria, resulting in the creation of an environment for systematic studies of various disease conditions and their control. Thus institutes and laboratories of high repute were established in quick succession, which included the Central Research Institute (CRI), Kasauli; The Bombay Bacteriological Laboratory (now Haffkine Institute), Mumbai; The King Institute of Preventive Medicine at Guindy for the Madras Presidency, and the Pasteur Institutes at Kasauli, Coonoor, Shillong and Rangoon1. Among these landmarks, the establishment of the Indian Research Fund Association (IRFA) in 1911, later renamed as the Indian Council of Medical Research (ICMR) in 1949, was perhaps the most significant development. IRFA started with primary objectives of undertaking research and propagation of knowledge and experimental measures generally in connection with the causation, mode of spread and prevention of communicable diseases as well as to support the Medical Research Department of the Government of India and providing grants to specific enquiries2-6. It is remarkable to note that ICMR has recently completed 100 years of its existence on 15 November 2011.

Though research activities picked up in early part of the twentieth century and systematic control of different diseases prevalent in those times had begun, there was no specific periodical devoted to the publication of research work connected with sanitation and the prevention of diseases in India. Most of the papers on this very wide range of subjects therefore, either remained buried in the files or found their way into general medical or surgical papers or scattered over a variety of specialized journals in England and Europe2,3. Keeping in view of this felt need in the Second Governing Body meeting of IRFA held in Delhi on 12 March 1913, a proposal for starting of a journal on Indian research was sanctioned. The journal was intended to absorb the half-yearly publication, Paludism being brought out by the Central Malaria Bureau at Kasauli started in 1910 and several other monographs known as Scientific Memoirs by Officers of the Medical and Sanitary Departments of the Government of India being published since 1885 and thus the Indian Journal of Medical Research (IJMR) came into existence in 1913. The first issue of the journal was brought out in July 1913 containing 16 articles published by the Thacker, Spink & Co, Calcutta (now Kolkata) with a nominal cost of Rs 2 per issue. Harcourt Butler wrote its foreword and stated that time has come that IRFA should have its own official organ and IJMR should be a worthy record of what is being done in India for the advancement of sanitary science. Pardey Lukis, the then Director General of IMS was the first Editor of IJMR.2
CORRESPONDENCE

Though IJMR was initially started as a quarterly publication with four issues in a year from 1913 to 1957, with effect from 1958 it was made bimonthly and from 1964 it became monthly and has been continuing with the same periodicity. During the period 18 supplements on topics ranging from toxemias, hepatitis and Kyasanur Forest Disease to 100 years of malaria research and streptococcal research to HPV were brought out between 1954 and 2006 and 22 special issues on topics like plague, malaria (quine, including cinchona derivatives), kala-azar, tuberculosis, dysentery as also nutritional disorders. A large number of papers published in IJMR during the initial few decades were based on various surveys, epidemic investigations and studies on nutritional deficiencies as well as entomological investigations and work related to snake bite, anti-venomous serum, ankylostomiasis, goitre, beri-beri, rabies, medicinal plants, cholera, etc. In recent years, keeping pace with the changing times, the research has been focused on microbiology, molecular biology, biotechnology, HIV/AIDS and newer diagnostics and devices, which is also reflected in the type of research published in IJMR.

With the advancement in information and communication technology and to harness its benefits all the articles published in IJMR since its inception have been digitized and made available in a searchable interface with web-based manuscript management and processing system and with the addition of many new sections such as editorials, commentaries, correspondences, clinical images, etc.

The IJMR continues to be among the frontline journals in the medical and biomedical fraternity and has made rapid strides as is evident in the consistent rise of its impact factor from 0.383 in 2000 to 1.837 in 2011, and continued growth in its global outreach and indexing by all major global secondary services. It is expected that IJMR will continue to benefit the vast global community and attain new heights in the coming years. The centenary year is a time to look into the path it has travelled and plan future strategies for raising the bar to newer levels.


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Journals of plagiarism

A few months ago, one of us (Foster) stared at a paper that had been sent to him by a colleague. Half of it was his—copied verbatim from his 2005 encyclopaedia article on health effects of radio-frequency fields into a paper by a different author and published in an obscure online journal1. Within weeks, two other articles on a similar topic crossed his path. One had been published in 2012 in a different and equally obscure online journal2. The second had appeared in the Journal of Computer Assisted Tomography, a distinguished medical journal3. The authors of all three papers were from Indian institutes not known for research in the area, and the papers consisted largely or entirely of copy-and-paste from other sources without attribution.

Foster e-mailed the editors of the journals to complain about the problems. The editor of the International Journal of Scientific Research Publications (IJSRP), was apologetic and removed the offending paper from the online table of contents – but it remains in the ‘online print volume’ (a pdf file with the collected papers for the month). A second editor, of Archives of Applied Science Research (AASR) never responded to Foster’s e-mail of complaint. The editor of the third, the Journal of Computer Assisted Tomography, launched an investigation but has taken no further action apart from complaining to the institute of the offending author.

Meanwhile, all the plagiarized papers remain online and some have been taken