

EDITORIAL

Keeping the thesis in the library or publishing it in a scientific journal: Is there an ethical concern?



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A postgraduate thesis ends its life as a bound volume on a library shelf. The degree is awarded, the supervisor signs off, and the work is administratively complete. Whether it is ethically complete is another matter. When research has been conducted on patients, using their time and body tissue, does depositing the report in a library discharge the obligation created when they agreed to take part?

The scale is easily overlooked. At Bangladesh Medical University (BMU), some 1,500 postgraduate students undertake a supervised thesis each year. We traced the publication status of all 362 theses (excluding those from affiliated institutes) deposited at the BMU Central Library in 2023 through March 2025 (Table 1). Fifty-seven (15.7%) produced at least one journal article, but only 14 (3.9%) reached an indexed journal and 16 (4.4%) appeared in journals with little evidence of independent peer review. Nearly two-thirds involved study participants' body tissue and fluid (e.g., blood, urine, specimens), and one in five involved an experimental procedure. Only 11 (3%) cited an earlier BMU thesis. With follow-up of 15 to 27 months, these are lower bounds; in a comparable Indian cohort, thesis-derived articles appeared 8 to 74 months after submission [1].

Informed consent is the natural starting point. Participants do not volunteer merely to fulfil an academic requirement; they consent expecting the knowledge generated to enter the scientific record and benefit others. Nothing in that expectation is satisfied by a document that is examined and then

shelved. Paragraph 36 of the Declaration of Helsinki requires the results of research involving human participants, whether positive, negative, or inconclusive, to be published or otherwise made publicly available [2]. Guideline 24 of the CIOMS (Council for International Organisations of Medical Sciences) similarly treats public accountability as essential to the value of research [3]. A thesis accessible only to its examiners satisfies neither. Leaving it inaccessible is avoidable waste for ethical, economic, and scientific reasons: the participants have contributed, and the costs are paid [4].

That only 3% cited an earlier BMU thesis is a further concern. When institutional research remains invisible, similar studies risk repetition: new participants are recruited, further samples are collected, and fresh consent is obtained for questions already addressed. We did not assess topic overlap, so duplication remains unquantified; the low citation rate establishes its preconditions rather than its occurrence. Such duplication wastes scarce resources and burdens participants, contrary to paragraph 21, which requires research to produce reliable, valid knowledge and avoid waste [2].

The opposing view deserves hearing. A thesis in a library is not hidden: it has been examined, catalogued, and may in principle be consulted. Yet a hard copy in one building is not indexed, searchable, retrievable at a distance, or externally peer reviewed. That 97% cited no prior institutional thesis is consistent with these works not informing

Key messages

Research participants contribute time and biological samples, expecting findings to enter the scientific record. Ethical guidelines require research results to be publicly accessible. Undiscoverable theses encourage duplication, unnecessary participant exposure, and research waste. Library copies alone are inadequate for dissemination. All theses should enter searchable repositories, while scientifically sound work should pursue journal submission without creating pressure to publish in predatory journals.

Table 1 Publication status of theses submitted to the Bangladesh Medical University Central Library in 2023 (n=362)

Journal category	Number (%)
A. Not published	305 (84.3)
B. Published	57 (15.7)
1. International indexed journals ^a	10 (2.7)
2. Regional indexed journal (BanglaJOL)	4 (1.1)
3. Non-indexed journals, not meeting predatory criteria	27 (7.5)
4. Journals not meeting peer-reviewed criteria ^b	16 (4.4)

^aPubMed (7), Scopus (8) and Web of Science (4). Categories are not mutually exclusive because a single journal may be indexed in more than one database.

^bJournals absent from PubMed, Scopus, Web of Science, BanglaJOL, and the Directory of Open Access Journals.

subsequent research, though grey-literature citation practices may contribute.

A second objection should be conceded: not every thesis merits publication, some being underpowered or methodologically weak. This does not diminish the obligation to make findings publicly accessible. Both the Declaration of Helsinki and CIOMS use the formulation “or otherwise made publicly available”, distinguishing two responsibilities. Every thesis should be deposited in an open, indexed institutional repository, as Sweden’s DiVA [5] and India’s Shodhganga [6] demonstrate at scale. Sound theses should additionally be submitted to journals for independent appraisal.

None of this implies indifference among our graduates. Comparable settings point to structural barriers: limited time, competing clinical duties, unfamiliarity with publishing, fear of rejection, and the belief that negative findings are unpublishable [7]. In Syria, research activity among postgraduate students was associated with mentor support and English-language writing skills [8]. Low publication rates are not inevitable in resource-constrained settings; an Indian medical college reported nearly one-third of master’s theses reaching MEDLINE-indexed journals [1]. The difference lies not in individual commitment but in whether institutions regard dissemination as integral to research.

BMU should embed this obligation in its research governance. First, ethical approval should require a dissemination plan, with the ethics committee recording publication status; paragraph 23 of the Declaration already requires a final report to the approving committee [2]. Second, consent forms should state how results will be made available, consistent with paragraph 26, which offers participants the option of learning the outcome [2]. Third, every thesis should be deposited electronically in an open repository with a persistent identifier. Fourth, candidates should demonstrate submission, rather than acceptance, of at least one thesis-derived manuscript to an indexed journal; requiring acceptance would intensify the pressure driving inexperienced authors towards predatory outlets. Comparable requirements exist in thesis-by-publication models, though these are largely doctoral and need adaptation to clinical master’s programmes [9]. All this requires investment in supervision, scientific writing, and editorial capacity, where our institution has been assessed as performing below potential [10].

Our observations have limitations. A single deposit year at one university with 15 to 27 months of follow-up underestimates the publication rate. We traced publications through bibliographic databases and self-reports from telephone calls to those who kept their theses unpublished. Despite these efforts, we may have missed articles in journals not indexed in any of the sources we searched.

The title’s question has a clear answer. Keeping a thesis only in the library leaves the obligation to study participants unfulfilled, wastes public resources, and denies future researchers access to knowledge already produced. The research has been done, the risks borne, and the costs paid. What remains is the step that turns completed research into accessible knowledge, and little justifies leaving it optional.

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Conflict of interest

We do not have any conflict of interest.

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