

# Informed Consent Practices for Publication of Patient Images in Dermatology Journals: A Cross-sectional Study

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# Informed Consent Practices for Publication of Patient Images in Dermatology Journals: A Cross-sectional Study

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## Abstract

Clinical images play a crucial role in dermatology, yet standardized informed consent guidelines for publishing patient images in dermatology journals are lacking. This cross-sectional study examined informed consent practices for publication of patient images in the top 50 dermatology journals based on the 2022 Clarivate Journal Impact Factor ranking. Our assessment revealed inconsistencies in image consent practices across journals and their associated consent forms for patients. While approximately 90% of journals specified image consent requirements, there was notable variability in criteria related to image modification, safeguards for anonymity (e.g., eye bars, cropping, blurring), and the definition of identifiable features. These findings emphasize the need for more uniform consent guidelines, standardized definitions of identifiable features, and transparent communication regarding possible image dissemination avenues to protect patient privacy in medical image publication.

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## Original Manuscript

## Research Letter

### Informed Consent Practices for Publication of Patient Images in Dermatology Journals

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**References:** 6

## Introduction

Clinical images play a crucial role in dermatology, informing clinical care and education. Standardized informed consent for publishing patient images is an important ethical concern regarding patient privacy, especially given recent widespread availability of published images online, including social media [1,2]. Protecting patient privacy is a critical aim for dermatologists, as publishing images with identifying features is often necessary. This aim is particularly relevant for patients from historically marginalized backgrounds who have been disproportionately impacted by the lack of standardization and adherence to informed consent practices [3]. Establishing trust

between dermatologists and patients is critical when complete anonymity cannot be guaranteed [2]. Clear guidelines and thorough consent practices can enhance transparency and accountability, enabling patients to make informed decisions about sharing their images while ensuring that authors uphold patients' privacy. This study assesses current informed consent practices in top dermatology journals, examining patient-facing and author-facing requirements.

## Methods

In this cross-sectional study, we examined patient image submission guidelines and consent forms from the top 50 dermatology journals as defined by the 2022 Clarivate Journal Impact Factor ranking [1]. We developed a checklist of image consent requirements informed by guidelines from the Declaration of Helsinki (DH), International Committee of Medical Journal Editors (ICMJE), and Committee on Publication Ethics (COPE) [4-6] as described in the Multimedia Appendix. Between June 28 - July 24, 2023, authors TT and BCO reviewed journal websites for author requirements for informed consent to publish patient images and reviewed patient consent forms, when available. Checklist items were recorded as included or not included in an Excel spreadsheet. Criteria were met when explicitly stated in guidelines and consent forms, or when DH, ICMJE, COPE, or publisher guidelines were explicitly referenced.

## Results

Among the 50 journals, 15 (30%) were published in the United States, 45 (90%) were indexed in MEDLINE, and 35 (70%) had a social media account on Facebook, X (formerly Twitter), and/or LinkedIn. The average percentage of articles available through gold open access was  $29\% \pm 31.4$ . Results for image consent criteria from author-facing guidelines and patient consent forms are summarized in **Table 1 and 2**.

**Table 1: Image consent criteria listed in journal-specific author guidelines for the top 50 dermatology journals per 2022 Clarivate Journal Impact Factor ranking**

| Criteria for author-facing guidelines<br>n=50  | Number of Journals (% of Journals) |
|--|------------------------------------|
| Requires informed consent to publish images  | 45 (90)                            |
| Specifies how image consent must be documented (e.g., written statement on manuscript, letter of consent, and/or consent form) | 45 (90)                            |
| Requires written consent from patient for publication of images  | 44 (88)                            |
| <b>Describes when image consent is necessary</b>   | 45 (90)                            |
| All patient images   | 33 (66)                            |
| Only images that are recognizable or contain identifying features  | 12 (24)                            |
| <b>Statement about guidelines to which journal adheres</b>   | 47 (94)                            |
| Declaration of Helsinki  | 33 (66)                            |
| ICMJE  | 35 (70)                            |

|  |                                       |
|--|---------------------------------------|
| COPE<br>Publishing Group (Wiley, Elsevier, Taylor & Francis, and Springer)   | 36 (72)<br>26 (52)                    |
| Specifies who can provide consent on behalf of patient (e.g., parent/guardian if minor, next-of-kin)   | 43 (86)                               |
| <b>Provides guidelines for image modification</b><br>Eyebars or masking of eyes not permitted<br>Blurring of face/facial features not permitted<br>Cropping to exclude face/body parts permitted | 44 (84)<br>36 (82)<br>3 (7)<br>5 (11) |
| Specifies identifiable features in images (e.g., tattoos, birthmarks, jewelry, facial images)  | 7 (14)                                |
| Recommendations on authors' storage of images  | 0 (0)                                 |
| Statement about archiving/retaining patient publication consent  | 30 (60)                               |
| Patient review of manuscript required if identifiable features are present   | 10 (20)                               |
| Acknowledges possible dissemination of images on social media  | 3 (6)                                 |
| Journal or publisher-specific consent forms provided   | 26 (52)                               |

**Table 2: Image consent criteria on consent forms for the top 50 dermatology journals per 2022 Clarivate Journal Impact Factor ranking**

| <b>Criteria for journal/publisher image consent forms<br/>n=26</b>   | <b>Number of Journals (% of Journals)</b> |
|--|---|
| Requirement to upload blank copy of consent form used if no form provided by journal or publisher            | 5 (19)                                    |
| Requirement to state consenting party and relationship to patient if filled out by proxy                     | 24 (92)                                   |
| Statement about reason patient could not provide consent/have capacity if filled out by proxy                | 3 (12)                                    |
| Form asks for who has explained and administered form to patient or proxy                                    | 21 (81)                                   |
| Statement that signing form does not remove patient's right to privacy                                       | 3 (12)                                    |
| Statement about consent revocation   | 10 (39)                                   |
| Explicit mention of how images could be disseminated beyond print publication (e.g., social media, internet) | 20 (77)                                   |
| Statement that journal cannot guarantee anonymity  | 13 (50)                                   |
| Patient agreement to publication   | 25 (96)                                   |

|  |        |
|--|--------|
| Statement about possibility of financial benefit | 5 (19) |
| Form is available in multiple languages          | 4 (15) |

## Discussion

This study highlights the need for standardized patient image consent guidelines within dermatology journals. While most journals surveyed ( $\geq 90\%$ ) provide guidelines on documenting image consent, significant variability existed in requirements regarding image modification, safeguards to protect anonymity, including definitions of identifiable features, leaving patients and researchers with uncertainty. While 52% of journals offered consent forms, inclusion of other key COPE guidelines varied, emphasizing the need for more detailed consent processes to ensure patient privacy.

A significant gap was seen in the few number of journals (6%) with requirements regarding the disclosure of potential social media dissemination of published images, despite 70% of journals having a social media presence on one or more major platforms.

This study was limited to a select number of dermatology journals and potential inter-observer variability in the interpretation of published author guidelines. Whether journals enforce their stated privacy and consent requirements was not evaluated.

In conclusion, this study highlights a current lack of standardized requirements for publishing patient images. This gap threatens patient privacy especially due to the potential for secondary uses and widespread dissemination of published images through social and/or news media. These results identify important opportunities for journal editors to harmonize consent requirements among journals, including standardization of definitions of identifiable features, enhanced transparency about patient risks regarding the dissemination and secondary use of images online, and standards for obtaining patient consent. Development of safeguards for other identifiable data beyond clinical images could foster more equitable and patient-centered usage of sensitive patient data by all medical journals.

**Conflicts of interest:** None declared.

## Abbreviations:

COPE: Committee on Medical

DH: Declaration of Helsinki

ICMJE: International Committee of Medical Journal Editors



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## Supplementary Files

## Multimedia Appendixes

This document contains links to websites used in our methods and includes a list of dermatology journals examined in the study.  
URL: <http://asset.jmir.pub/assets/06760ec8f152e47e3784bcb6b6b5e241.docx>