

# Letter: Open access journals are viable alternatives



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McLennan is the biggest and busiest of all the libraries at McGill, seen here on Thursday, December 4, 2014. *PETER MCCABE / MONTREAL GAZETTE*

[Re: “Cholesterol, avocados and wishful thinking” \(Opinion, Jan. 12\)](#)

(<http://montrealgazette.com/health/diet-fitness/opinion-avocados-dont-lower-cholesterol-at-least-not-in-any-significant-way>)

In his article “Cholesterol, avocados and wishful thinking,” Christopher Labos does a good job of explaining in layman’s terms the difference between statistical significance and clinical significance, noting that even good quality results may not be meaningful.

However, Labos is mistaken when he says that the fact that a research paper was published in an open access journal means that the authors have paid to have it published. This is a common misconception. In fact not all open access journals require author fees to cover the costs of publishing; many are subsidized by universities, professional societies, or government agencies. And some journals that charge subscription fees also require authors to pay a fee.

According to Labos the fact that the authors may have paid an author fee “is not a good sign,” but author fees do not automatically call into question the quality of the research being published; the peer review process for most open access journals is just as rigorous as it is for journals you have to pay to read. In neither case are peer reviewers paid for their work.

We live in a world where science publishers, especially in medicine, charge astronomical fees to provide access to the articles they publish at relatively little cost to themselves, trusting that their readers are so desperate for access that they will pay anything: how can a library stop paying for access to important publications when patient care and safety are on the line?

Open access is not perfect, but it provides a viable alternative to an increasingly untenable and unsustainable system, at a time when libraries across the country are being closed and budgets and staff are being cut. In fact, the Canadian Institute of Health requires funded researchers to make their studies available via open access within 12 months of publication. The US National Institute of Health goes a step further by requiring all funded research to be placed in publicly available PubMed Central “immediately upon acceptance for publication.”

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