Sci-Hub and medical practice: an ethical dilemma in Peru

Sci-Hub is a pirate repository of scientific papers launched in 2011, and currently hosts more than 46 million articles. Thousands of people use this repository every day to access information, reaching more than 200 000 daily downloads of scientific articles that they would otherwise have to buy.1

We present a dilemma in the form of Dr J, a Peruvian physician who is evaluating a patient with several infectious and chronic comorbidities—an experience not uncommon to clinicians in countries, like Peru, that experience the double burden of disease. Dr J believes he needs to review recent medical literature to decide the best management of this complex patient. However, his sources are scarce: his medical books are old and outdated; the medical conferences that he has attended in his country have not delved into this subject (and have serious conflicts of interest for being largely funded by players in the pharmaceutical industry); he does not have institutional access to the scientific papers he needs; and he does not have funding to cover the cost of the subscriptions.2,3 Additionally, initiatives offering access to biomedical and health literature to low-income and middle-income countries such as HINARI currently do not consider Peru as a candidate for benefit.4

The National Council of Science and Technology (CONCYTEC)5 has been providing access to Scopus since 2014 (with approximately 18 000 titles) and the ScienceDirect Freedom Collection (consisting of 2653 journals), yet few physicians can access these databases because it is only available for selected academic institutions and researchers who have accomplished specific milestones. Given this scenario, physicians face the following dilemma: is it ethical for them to use Sci-Hub (an illegal medium) to access the information required to provide the best and most timely care for their patients?

In recent years there has been an increase in open access journals, which do not have subscription plans or payments to access their content. Additionally, Harvard University’s Global Health Delivery Online (GHDonline.org) recently started a 1-year complementary international grant subscription programme to UpToDate, an evidence-based, physician-authored clinical decision support tool. Nevertheless, there is still a long way to go before clinicians worldwide have access to the papers and information they need to care for a growing and diverse set of patients. Meanwhile, many of the world’s physicians, like Dr J, will continue to face this ethical dilemma to access information every day.

We declare no competing interests.

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