

A Novel Malignancy in the Academic Corpus: Epidemiology, Pathogenesis, and Prognosis of Parasitic Publication Entities

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Abstract

This paper presents a comprehensive epidemiological analysis of a rapidly metastasizing pathology afflicting the global academic corpus. The condition, which we term Parasitic Publication Syndrome (PPS), is characterized by the proliferation of entities that mimic the surface morphology of legitimate scholarly organs while lacking any functional peer review mechanism, editorial integrity, or diagnostic value. Using a mixed-methods approach combining case study analysis, correspondence forensics, and institutional genealogy, we trace the complete lifecycle of PPS from initial contact through terminal credibility failure. The index case involves a journal identifying itself as the *Journal of Clinical Oncology & Advanced Therapy* soliciting manuscripts from a researcher whose published work concerns AI safety, corporate harm analysis, disability rights, and psychoanalytic theory. The solicitation addressed the author as “Dr. Travis Gilly,” a title the author does not hold, praised the author’s “esteemed work and expertise in the field” without identifying which field, and imposed an artificially compressed submission deadline. The pathology displays hallmark features of aggressive malignancy, including rapid undifferentiated growth, invasion of healthy tissue, resistance to conventional treatment, evasion of the host immune response, and a pronounced capacity for metastasis through contamination of citation networks. We propose a four-grade classification system for surveillance, identify five transmission vectors, document seven diagnostic markers, and conclude that PPS represents a Stage IV threat to the integrity of scientific knowledge production. This paper is itself the manuscript the predatory journal requested.

Keywords: predatory publishing, academic integrity, parasitic publication syndrome, rectal cancer (pain in the ass), colorectal cancer (see above), cellular oncology (the author owns a Samsung Z Fold 5), tumor markers (seven diagnostic markers identified in Section 3.1), signal transduction (the email that started this), cancer prevention (what this paper attempts to be), cancer diagnosis (also what this paper attempts to be), cancer risks (publishing in this journal), surgical oncology (this paper is the excision), targeted therapy (mass email solicitation is the opposite of this)

1 Introduction

The healthy academic body depends on the regulated proliferation of peer-reviewed organs, each performing a specialized function within the broader knowledge ecosystem. Journals serve as the circulatory system of scholarship, distributing verified findings from sites of production to sites of application. Peer review functions as the immune response, identifying and neutralizing pathogenic claims before they enter general circulation. Editorial oversight provides the regulatory signaling that governs tissue differentiation, ensuring that oncology journals publish oncology research, that education journals publish education research, and that the boundaries between disciplinary organs remain functionally intact.

When this regulatory process fails, abnormal growths emerge. These growths consume resources, crowd out healthy tissue, and, if left unchecked, compromise the viability of the host organism. The medical literature has a term for this pattern. So does this paper.

The phenomenon of predatory publishing has been documented with increasing alarm since Beall's foundational identification of the practice in 2010. Beall (2012) described predatory publishers as entities that "exploit the gold open-access model for their own profit" by collecting article processing charges (APCs) without providing legitimate editorial services. The term itself has been contested. Grudniewicz et al. (2019) convened a consensus panel that defined predatory journals as those that "prioritize self-interest at the expense of scholarship," characterized by "false or misleading information, deviation from best editorial and publication practices, a lack of transparency, and/or the use of aggressive and indiscriminate solicitation practices." Shen and Bjork (2015) documented the growth trajectory, estimating that predatory journals published approximately 420,000 articles in 2014 alone, a figure that has only accelerated in the intervening decade.

The present study is not a literature review. It is a biopsy.

On April 9, 2026, the author received unsolicited correspondence from an entity identifying itself as the *Journal of Clinical Oncology & Advanced Therapy*. The correspondence addressed the author as "Dr. Travis Gilly," a title the author does not hold. It praised the author's "esteemed work and expertise in the field," a field that, upon exhaustive examination, bears no identifiable relationship to clinical oncology, advanced therapy, or any adjacent medical discipline. The author's published work spans AI safety and ethics, corporate harm analysis, disability rights and accessibility, psychoanalytic theory as applied to human-AI attachment, perceptual consent architecture, and educational technology. The closest any of this work comes to oncology is the metaphor you are currently reading.

The invitation requested submission of a "Research Article, Review Article, Manuscripts or Case Reports" by May 10, 2026. No specific topic was suggested. No evidence of familiarity with the author's work was demonstrated. The grammatical construction "Research Article, Review Article, Manuscripts or Case Reports" displayed the inconsistent pluralization characteristic of templated mass solicitation. The correspondence was, by every available diagnostic criterion, a textbook predatory solicitation.

Rather than discard the correspondence, the author recognized an opportunity for applied research. If a journal purporting to serve clinical oncology would solicit manuscripts from an AI safety researcher with no medical credentials and no doctoral degree, the journal itself had become the specimen. The pathology had presented itself for examination. This paper is the resulting analysis.

The structure proceeds as follows. Section 2 presents the epidemiology of PPS, including incidence, prevalence, transmission vectors, and risk factors. Section 3 details the pathogenesis, tracing the complete lifecycle from initial contact through terminal credibility failure. Section 4 provides a histological analysis of the index case. Section 5 addresses differential diagnosis. Section 6 examines the immunological failure that permits PPS to persist. Section 7 presents a clinical assessment of downstream harm. Section 8 proposes a classification system. Section 9 discusses implications for the academic corpus. Section 10 acknowledges limitations. Section 11 concludes.

2 Epidemiology of Parasitic Publication Syndrome

2.1 Incidence and Prevalence

The proliferation of predatory journals has been well documented, though precise estimates remain difficult to establish due to the fluid and deliberately opaque nature of the entities involved. Shen and Bjork (2015) estimated that the number of predatory journals grew from approximately 1,800 in 2010 to over 8,000 by 2014. Subsequent analyses have placed the 2023 figure at over 15,000 active predatory journals, with some estimates substantially higher. The difficulty of establishing prevalence is itself a diagnostic indicator; legitimate journals are identifiable, countable, and indexed. Predatory journals appear, metastasize, rebrand, and reappear under different names, exhibiting the phenotypic plasticity characteristic of aggressive malignancy.

The author's personal experience corroborates the macroscopic trend. At the time of initial drafting, the correspondence analyzed in this study appeared to represent the fourth such solicitation received within a period of approximately three months, yielding an estimated annualized incidence rate of approximately 16 solicitations per researcher-year. A subsequent audit of the author's email, including spam-filtered correspondence, revealed this estimate to be dramatically conservative. Over a seven-day period in April 2026, the author received a minimum of 23 predatory solicitations across both primary and junk mail folders. This yields an annualized incidence rate exceeding 1,200 solicitations per researcher-year. The solicitations targeted at least six different papers across wholly unrelated disciplines, and originated from journals purporting to cover clinical oncology, space science, architectural engineering, tourism management, chronic diseases, clinical microbiology, electrical and computer engineering, pharmacology, digital journalism, economics, and social dynamics. One solicitation addressed the author as "Dear Dr. Gilly Travis," reversing his name. Another rendered it as "Dear Dr. TravisGilly" without a space. A third contained the subject line "Submit your Article For Publicaion." One invited the author to join an editorial board for a journal of electrical and computer engineering, a field in which the author has no training, no publications, and no discernible competence. This figure is notable because the author's publication record is modest and narrowly concentrated in non-medical, non-engineering disciplines. If a researcher with fewer than 30 published works, none of them in medicine or engineering, receives over 1,200 predatory solicitations per year, the incidence rate for prolific medical researchers can be reasonably inferred to be staggering. Moher et al. (2017) reported that biomedical researchers in particular face a disproportionate burden of predatory solicitation, with some researchers receiving multiple solicitations per week. The present data suggest that "multiple per week" may itself be conservative.

2.2 Transmission Vectors

PPS propagates through five identified transmission vectors, each exploiting a different feature of the modern academic information infrastructure.

The primary vector is email-based mass solicitation, leveraging harvested metadata from open-access repositories, preprint servers (including SSRN, SocArXiv, and arXiv), academic networking platforms (including ResearchGate, Google Scholar, and ORCID), and institutional faculty directories. The pathogen does not discriminate by discipline, career stage, or geographic location. Its targeting algorithm appears to operate on a single heuristic: the presence of a retrievable email address associated with any form of academic activity.

The secondary vector is nominal parasitism, in which the predatory entity adopts a name closely resembling a legitimate and respected journal. In the index case, the *Journal of Clinical Oncology & Advanced Therapy* bears deliberate phonetic and visual similarity to the *Journal of Clinical Oncology*, a highly respected publication of the American Society of Clinical Oncology with an impact factor exceeding 40. This mimicry is not accidental. It is the publishing equivalent of Batesian mimicry, in which a harmless organism evolves to resemble a dangerous one, except in this case the directionality is reversed: the harmful organism mimics the appearance of the trustworthy one.

The tertiary vector is indexing fraud, in which predatory entities claim inclusion in databases (such as PubMed, Scopus, or Web of Science) that they do not actually appear in, or create fictitious indexing services with impressive-sounding names. The quaternary vector is fabricated editorial boards, in which real researchers' names are listed without their knowledge or consent. The quinary vector is conference-journal pipelines, in which predatory conferences feed directly into predatory journals, creating a closed loop of self-reinforcing illegitimacy.

2.3 Risk Factors

Risk factors for PPS exposure include: publishing in open-access venues, maintaining a public ORCID profile, listing any email address on any website, having a ResearchGate account, posting preprints to any server, attending academic conferences, and, based on the present evidence, existing as a person who has at any point engaged in any activity that could be loosely construed as academic. The risk factor profile is, in other words, coextensive with the population of active researchers.

Certain populations face elevated risk. Early-career researchers, who may be less familiar with the landscape of legitimate publishing, are particularly vulnerable (Richtig et al., 2019). Researchers in developing nations, where institutional subscription access is limited and open-access publishing is a practical necessity, face disproportionate exposure (El Bairi et al., 2024). Researchers under publish-or-perish pressure, which is to say researchers, constitute a high-risk group by definition.

2.4 Disparate Impact on Researchers with Disabilities

A dimension of PPS vulnerability that has received insufficient attention in the literature is its disparate impact on researchers with cognitive, learning, and developmental disabilities. Predatory solicitations are engineered, whether by design or by convergent evolution, to exploit precisely the cognitive functions that are impaired or atypical in conditions including attention-deficit/hyperactivity disorder (ADHD), autism spectrum disorder (ASD), specific learning dis-

abilities, and other neurodevelopmental conditions.

The attack surface is multidimensional. First, the high volume of solicitations (over 1,200 per year in the present case) creates a signal-to-noise problem that disproportionately burdens individuals with attentional regulation difficulties. For a neurotypical researcher, evaluating and discarding a predatory solicitation requires a brief attentional allocation followed by deletion. For a researcher with ADHD, each solicitation constitutes an interruption that may disrupt task engagement, trigger impulsive response, or consume cognitive resources that are already in constrained supply. When 23 such interruptions arrive in a single week, the cumulative attentional tax is not merely annoying; it is functionally disabling.

Second, the flattery-and-urgency structure of predatory solicitations maps directly onto known vulnerabilities in executive function. Impulsivity, rejection sensitivity, and difficulty with delayed gratification are well-documented features of ADHD. A solicitation that praises the researcher’s “esteemed work,” creates artificial urgency through compressed deadlines, and offers the dopaminergic reward of rapid publication is, in effect, an exploit targeting the executive function stack. The researcher is not being asked to evaluate a proposition; they are being subjected to a social engineering attack that leverages their neurological profile.

Third, researchers with ASD may face distinct vulnerabilities related to literal interpretation of social communication. A solicitation that states “we are pleased to extend an invitation” may be processed as a genuine expression of institutional interest rather than a templated mass communication, particularly by individuals whose social cognition operates on a more literal register. The mimicry described in Section 3.2 is more effective against individuals who allocate less processing to social subtext and more to surface content.

Fourth, the administrative complexity of evaluating a journal’s legitimacy (checking indexing databases, verifying editorial boards, assessing APCs against industry norms, cross-referencing journal names against established publications) constitutes an executive function demand that falls disproportionately on individuals for whom multi-step administrative tasks are already a site of functional impairment. The academic immune system’s current reliance on individual researchers to perform their own differential diagnosis effectively outsources a complex cognitive task to a population that includes individuals for whom that specific category of task is clinically challenging.

The author discloses that he has both ADHD and ASD. The 23 solicitations received in a single week did not arrive in a vacuum. They arrived in an inbox that also contained legitimate correspondence from publishers (Elsevier), preprint servers (SSRN), conference organizers (IDC 2026, University of Bonn), and collaborators. The task of distinguishing predatory from legitimate solicitations, performed 23 times in seven days alongside actual work, is not a trivial filter operation. It is a sustained executive function demand imposed by parasitic entities on a researcher whose neurodevelopmental profile makes that specific demand disproportionately costly. This is not an accommodation problem. This is a harm.

3 Pathogenesis

The lifecycle of PPS follows a predictable clinical course comprising four stages, each representing an escalation in pathological severity.

3.1 Stage I: Initial Contact

The host receives correspondence containing a characteristic cluster of diagnostic markers. In the present taxonomy, we identify seven such markers: (1) incorrect or inflated honorifics; (2) vague praise untethered to any specific publication; (3) absence of topical specificity; (4) artificially compressed submission deadline; (5) inconsistent grammar or formatting; (6) generic salutation formulae (“We hope this message finds you well”); and (7) a journal name that closely resembles an established legitimate publication. The index case exhibited all seven markers. A score of four or more on this seven-item diagnostic instrument should be considered presumptive evidence of PPS.

3.2 Stage II: Mimicry

The parasitic entity presents surface features designed to approximate the appearance of a legitimate scholarly organ. These features may include a professional website, claims of peer review, listed editorial board members (who may or may not be aware of their listing), ISSNs (which are trivially obtained), and formatting that follows established conventions. The mimicry is diagnostic precisely because it is imperfect. A legitimate journal does not need to convince researchers of its legitimacy through surface-level signaling; its reputation is established through the quality of its published work, the rigor of its review process, and its standing in recognized indexing services. The effort invested in mimicry is inversely proportional to the effort invested in actual editorial function.

3.3 Stage III: Extraction

Upon manuscript submission, the entity reveals its extractive mechanism, typically in the form of Article Processing Charges (APCs) that bear no relationship to any editorial, review, or production service actually rendered. Xia et al. (2015) documented APCs ranging from \$50 to \$3,000 among identified predatory journals, with an average of approximately \$178. The host is depleted of financial resources. The manuscript, meanwhile, receives no meaningful review and is published in a venue that confers no credible recognition. The transaction is complete. Value has flowed in one direction.

3.4 Stage IV: Metastasis

Published content in predatory journals enters the broader information ecosystem, where it may be cited, referenced in grant applications, listed on curricula vitae, or mistaken for peer-reviewed work by journalists, policymakers, or other researchers. This contamination represents the terminal phase of the pathology. The cancer has metastasized beyond the original site. Renner et al. (2021) identified predatory journal articles appearing in systematic reviews published in the top five oncology journals, including the legitimate *Journal of Clinical Oncology*. When predatory content infiltrates systematic reviews, the metastasis has reached the organs of evidence synthesis, and the prognosis for the affected knowledge domain becomes significantly poorer.

4 Histological Analysis of the Index Case

Close examination of the solicitation email reveals several features consistent with undifferentiated malignancy. We present these findings using standard histopathological terminology, which we note is more appropriate to this analysis than the journal's own claimed specialty would suggest.

4.1 Cellular Atypia

The greeting "Dear Dr. Travis Gilly" contains a factual error of a kind that reveals the absence of any verification process. The author holds no doctoral degree. A legitimate journal would typically verify the credentials of a prospective contributor before conferring titles upon them, if only because misattributing academic credentials in correspondence is professionally discourteous. The error suggests automated generation without human oversight, a hallmark of uncontrolled proliferation.

4.2 Loss of Tissue Specificity

The journal claims to serve clinical oncology and advanced therapy. The author's published work concerns how corporations fail to prevent foreseeable harm, how AI systems induce psychotic symptoms in vulnerable users, how children's educational data should be governed under disability law, how psychoanalytic concepts of desire and transference apply to human-chatbot relationships, and how perceptual manipulation constitutes a form of non-consensual cognitive alteration. None of these topics fall within the scope of clinical oncology by any reasonable definition. The solicitation demonstrates a complete loss of the topical specificity that characterizes healthy scholarly organs, analogous to the dedifferentiation observed in high-grade tumors where cellular identity can no longer be determined from morphology alone.

4.3 Vascular Invasion

The phrase "given your esteemed work and expertise in the field" contains no referent. Which field? Which work? Which expertise? The absence of specificity indicates that the phrase was templated and mass-distributed to a harvested contact list without any attempt to match recipients to the journal's stated scope. In pathological terms, the entity has invaded the vascular system of academic communication, using the infrastructure designed for targeted scholarly correspondence to distribute undifferentiated mass solicitation.

4.4 Resistance to Apoptosis

Despite extensive documentation of predatory publishing practices, public blacklisting by organizations including Beall's List and the Directory of Open Access Journals (DOAJ), removal from indexing services, and growing awareness among the research community, the entities persist. The index case arrived in April 2026, more than fourteen years after Beall's initial identification of the phenomenon and more than six years after the Grudniewicz et al. consensus definition. The pathology has demonstrated robust resistance to the natural regulatory mechanisms of the academic immune system. Normal cells, when subjected to persistent environmental signals indicating dysfunction, undergo programmed cell death. Predatory journals do not.

4.5 Angiogenesis

Like aggressive tumors, predatory journals establish their own supply networks. They create companion conferences, fabricated indexing services, and fake impact metrics that function as the vascular infrastructure sustaining continued growth. These structures supply the nutrients of legitimacy, allowing the entity to grow beyond the limits that would constrain an unfed parasite. The self-referential ecosystem of predatory publishing, in which predatory journals cite predatory journals, predatory conferences feed predatory journals, and predatory metrics evaluate predatory journals, constitutes a complete angiogenic network independent of the healthy scholarly vasculature.

5 Differential Diagnosis

Accurate diagnosis of PPS requires differentiation from several related but distinct conditions.

Legitimate open-access publishing involves transparent APCs, rigorous peer review, editorial boards composed of identifiable and willing researchers with relevant expertise, and verifiable indexing in recognized databases. The relationship between cost and service is proportional and transparent. PPS mimics these features without implementing them, in the same way that a stage prop mimics a functional object.

Vanity publishing involves knowing participation by the author, who pays for publication with full awareness that the venue lacks prestige or peer review. PPS differs in that it targets researchers who may not recognize the solicitation as illegitimate. The distinction between PPS and vanity publishing maps onto the distinction between fraud and consensual transaction.

Low-quality but legitimate journals exist on a spectrum. Not every journal that charges high APCs, has long review times, or publishes work of uneven quality is predatory. The diagnostic distinction rests on intent and function: does the journal conduct genuine peer review, however imperfect? Does it make a good-faith effort to match content to scope? Does it employ editors who actually read submissions? If the answers are yes, the journal may be weak, but it is not predatory. PPS is defined by the systematic absence of these functions, not by their imperfect execution.

Spam is unsolicited commercial messaging with no pretense of scholarly purpose. PPS is more insidious because it wears the costume of academic legitimacy, activating the professional identity and career aspirations of its targets in ways that generic commercial spam does not. A researcher who deletes a pharmaceutical advertisement without thought may pause over an invitation from a journal, however dubious, because the invitation speaks to needs that are real: the need for publication, recognition, and professional advancement. PPS exploits these needs with clinical precision.

6 Immunological Failure: Why the Host Cannot Clear the Infection

The persistence of PPS despite widespread awareness raises a natural question: why has the academic immune system failed to eliminate the pathology? We identify four mechanisms of immune evasion.

First, the publish-or-perish incentive structure creates immunosuppression. Researchers facing

tenure review, grant renewal, or job market competition are under systemic pressure to publish, creating vulnerability to any entity that promises rapid publication. The immune system is suppressed by the very conditions of the host environment.

Second, the decentralized and anarchic structure of scholarly publishing provides no single regulatory authority capable of mounting a coordinated immune response. No institution has the power to shut down a predatory journal. DOAJ can refuse to list it. Beall could name it. Individual researchers can warn colleagues. But the entity can simply rebrand, relocate its registration, and resume operations. The immune response is fragmented and lacks the institutional memory to track the pathogen across its phenotypic transformations.

Third, information asymmetry protects the pathogen. Researchers evaluating a solicitation may lack the expertise or time to investigate the journal's bona fides. The mimicry described in Section 3.2 is specifically designed to exploit this asymmetry. Even experienced researchers may struggle to distinguish a sophisticated predatory journal from a new but legitimate open-access venue, particularly in fields outside their primary expertise (Richtig et al., 2019).

Fourth, the global nature of the pathology exceeds the jurisdictional reach of any single legal or regulatory authority. Predatory journals typically register in jurisdictions with minimal regulatory oversight and target researchers globally. The pathogen operates across borders; the immune system does not.

7 Clinical Assessment of Downstream Harm

The harms produced by PPS are neither trivial nor confined to the researchers who fall victim to solicitation. We identify four categories of downstream harm with escalating severity.

Financial harm is the most immediate. Researchers who submit to predatory journals lose APCs ranging from tens to thousands of dollars, with no corresponding return in editorial service, peer review, or professional recognition. For researchers in developing nations, where these sums may represent a significant portion of a research budget, the financial extraction is not merely wasteful but potentially career-damaging.

Reputational harm accrues to researchers whose work appears in predatory venues. Publication in a predatory journal may be interpreted by tenure committees, grant reviewers, and colleagues as evidence of poor judgment, desperation, or complicity. The stigma persists even when the researcher was genuinely deceived.

Epistemic harm occurs when predatory publications enter the citation network and are treated as evidence. Systematic reviews that inadvertently incorporate predatory content produce contaminated syntheses. Policy decisions informed by contaminated evidence may be poorly calibrated. Clinical guidelines that rely on evidence tainted by unreviewed predatory content pose direct risks to patient safety, a concern of particular relevance given that the index case involves a journal that claims to serve clinical oncology. Renner et al. (2021) documented exactly this scenario, finding predatory publications present in systematic reviews in four of the top five oncology journals.

Systemic harm manifests as erosion of public trust in academic publishing as an institution. When media reports highlight predatory publishing scandals, the reputational damage extends beyond the predatory entities to the scholarly communication system as a whole. In an era of widespread skepticism toward expertise and evidence, the existence of a thriving parasitic

publishing industry provides ammunition to those who would dismiss academic research in its entirety.

8 Proposed Classification System

We propose the following four-grade classification system for surveillance and triage of parasitic publication entities. The system is designed to be operationally simple, diagnostically reliable, and scalable for institutional implementation.

Table 1: Proposed PPS Classification System

Grade	Designation	Diagnostic Criteria
I	Benign Nuisance	Mass solicitation with obvious errors (misspelled researcher name, wrong field, broken formatting). Easily identified and discarded. No realistic risk of successful extraction.
II	Low-Grade PPS	Plausible journal name; vague flattery; no evidence of topical targeting; correct but generic formatting. May deceive inexperienced researchers. Index case presents at this grade.
III	High-Grade PPS	Deliberately mimics specific legitimate journal (nominal parasitism); may include fabricated impact factors, claimed indexing, or listed editorial boards. Functional website with plausible content. Capable of deceiving experienced researchers outside the mimicked journal’s field.
IV	Metastatic PPS	Published content has entered citation networks and been referenced in systematic reviews, policy documents, or clinical guidelines. Contamination has spread beyond the original site. Remediation requires active retraction and decontamination.

The index case presents as Grade II with potential escalation to Grade III, given the close nominal resemblance to the *Journal of Clinical Oncology*. If this paper is published by the soliciting journal, the case would immediately escalate to Grade IV, as the paper itself documents the pathology of the journal publishing it, creating a self-referential metastasis of particular scholarly interest.

9 Implications for the Academic Corpus

The persistence and growth of PPS carries implications that extend well beyond the immediate harms documented in Section 7.

For individual researchers, PPS creates a tax on attention. Every predatory solicitation that arrives in an inbox consumes time and cognitive resources to evaluate, even if the evaluation concludes with deletion. For researchers receiving dozens of such solicitations annually, the cumulative attentional burden is non-trivial. This burden falls disproportionately on early-career researchers and researchers in developing nations, who are both more frequently targeted and less likely to have institutional support for navigating the predatory publishing landscape.

For institutions, PPS complicates the evaluation of researcher productivity. Tenure committees, hiring panels, and grant reviewers must increasingly distinguish between publications in legitimate venues and publications in predatory ones, a task that requires expertise in scholarly communication that may not be present on every evaluation committee. The proliferation of predatory venues inflates the apparent volume of published research while diluting its average quality, making quantitative metrics of productivity (such as publication counts) increasingly unreliable.

For the public, PPS erodes the already fragile distinction between verified and unverified knowledge claims. When a journalist or policymaker attempts to evaluate a scientific claim, the existence of a thriving parasitic publishing ecosystem means that the mere fact of publication in a journal is no longer a reliable signal of credibility. The informational commons is degraded.

For the predatory journal itself, the prognosis is excellent. The business model is low-cost, high-volume, geographically distributed, jurisdictionally elusive, and largely unregulated. The patient, in this case, is thriving.

10 Limitations

This study is based on a single index case supplemented by the author's personal experience with three additional predatory solicitations. The sample size is small, though the phenomenon is not. Generalization from a single case should be undertaken with appropriate caution, though the consistency of the observed features with the existing literature suggests that the index case is representative rather than anomalous.

The author is not an oncologist, epidemiologist, pathologist, or medical professional of any kind, a fact that, ironically, did not prevent the index journal from soliciting his contributions. The use of medical terminology throughout this paper is metaphorical and should not be interpreted as clinical guidance. If you are experiencing symptoms of an actual malignancy, please consult a physician rather than a journal article about predatory publishing, even one that is as thoroughly researched as this one.

The author acknowledges that writing this paper consumed time that could have been allocated to any of the approximately fifteen other projects currently in various stages of completion, a cost attributable directly to the parasitic entity under study. This resource diversion is itself a demonstration of the attentional tax documented in Section 9.

Finally, we acknowledge a potential conflict of interest: the author has a vested interest in this paper being entertaining, which may have biased the analysis toward metaphorical richness at the expense of clinical sobriety. We believe this tradeoff is justified by the subject matter.

11 Conclusion

The *Journal of Clinical Oncology & Advanced Therapy* invited an AI safety researcher with no medical credentials, no oncology experience, and no doctoral degree to submit a manuscript to a clinical cancer journal by May 10, 2026. The solicitation praised the author's "esteemed work and expertise in the field" without identifying which field, conferred a doctoral title the author does not hold, and imposed a deadline designed to create artificial urgency.

Rather than view this as an insult, we chose to view it as an invitation.

This paper is the manuscript they requested. It concerns a malignancy. The malignancy is them.

If the journal publishes this paper, it will have confirmed every diagnostic criterion we have outlined. A journal that publishes a paper identifying itself as a predatory journal has, by the act of publication, validated the analysis. If it does not publish this paper, it will have demonstrated the one quality its solicitation suggested it lacked: editorial judgment.

Either outcome advances the literature.

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The author uses speech-to-text software and AI-assisted tools (Anthropic Claude) as assistive technology for organizing and formatting written output. These tools serve as accessibility accommodations for the author's neurodevelopmental conditions. All research questions, analytical arguments, theoretical contributions, methodological decisions, and conclusions are solely the author's own. All satire, sarcasm, puns, deliberate editorializing, metaphorical overextension, and the decision to submit this paper to the journal it describes are also solely the author's own.

Initial ideation was conducted via speech-to-text transcription using Wispr Flow, which, while occasionally unreliable in transcription accuracy, has never once solicited the author's contributions to an unrelated medical journal. The author thanks Wispr Flow for this restraint, and thanks the *Journal of Clinical Oncology & Advanced Therapy* for providing the specimen.

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