

1 **Title:** Trends in Self-citation Rates in High-impact Neurology, 2 Neuroscience, and Psychiatry Journals

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21

22 *Abstract*

23

24 Citation metrics influence academic reputation and career trajectories. Recent works have
25 highlighted flaws in citation practices in the Neurosciences, such as the under-citation of
26 women. However, self-citation rates—or how much authors cite themselves—have not yet been
27 comprehensively investigated in the Neurosciences. This work characterizes self-citation rates
28 in basic, translational, and clinical Neuroscience literature by collating 100,347 articles from 63
29 journals between the years 2000-2020. In analyzing over five million citations, we demonstrate
30 four key findings: 1) increasing self-citation rates of Last Authors relative to First Authors, 2)
31 lower self-citation rates in low- and middle-income countries, 3) gender differences in self-
32 citation stemming from differences in the number of previously published papers, and 4)
33 variations in self-citation rates by field. Our characterization of self-citation provides insight into
34 citation practices that shape the perceived influence of authors in the Neurosciences, which in
35 turn may impact what type of scientific research is done and who gets the opportunity to do it.

36

37 *1. Introduction*

38

39 Citations are often used as a proxy for how well a researcher disseminates their work, which is
40 important both for spreading knowledge and establishing a scientific reputation ¹. Furthermore,
41 citation counts and other metrics like the h-index are critical for hiring and promotion in an
42 increasingly tenuous academic job market ²⁻⁴, necessitating a thorough examination of citation
43 practices across research fields. Existing investigations of citation practices have found, for
44 instance, false inflation of impact factors by specific journals ⁵. Others have demonstrated
45 under-citation of racial and ethnic minority groups ⁶ and women ⁷⁻⁹, including three studies
46 specific to the Neuroscience literature ^{6,7,9}. These examples of citation manipulations and biases
47 underscore the importance of comprehensively investigating citation practices in the broader
48 Neuroscience literature.

49 Self-citation, or how frequently authors cite themselves, remains an understudied citation
50 practice in the Neuroscience literature. Self-citation can be calculated from two different

51 perspectives: 1) as the proportion of an author's total citations that come from their own works
52 ^{10,11}, or 2) as the proportion of an author's references on which they are also an author ¹². Since
53 the former accounts for the total number of times an author cites themselves (across all papers)
54 divided by the total number of citations the author has received, it helps identify when a
55 particular author only accumulates citations from themselves ¹⁰. However, in this manuscript we
56 defined self-citation as the latter because one cannot control how much others cite their works.
57 As such, the second definition of self-citation rate may more closely reflect intention in self-citing
58 and will allow for more self-reflection about self-citation practices.
59

60 Self-citations may often be appropriate. For example, in a direct follow-up publication, a
61 researcher will need to cite their previous work. Yet, h-indices can be strategically manipulated
62 via self-citation ¹³, and some scientists may engage in extreme or unnecessary self-citation ¹⁰.
63 While certain citation metrics can be adjusted to remove self-citations, the effect of a single self-
64 citation extends beyond adding one additional citation to an author's citation count. In a
65 longitudinal study of self-citation, Fowler and Aksnes ¹⁴ found that each self-citation leads to
66 approximately three additional citations after five years. Given the potential effects of self-
67 citations on various citation metrics that influence career trajectories, a detailed analysis of self-
68 citation rates and trends in the Neuroscience literature could benefit the field.
69

70 This work summarizes self-citation rates in Neurology, Neuroscience, and Psychiatry literature
71 across the last 21 years, 63 journals, 100,347 articles, and 5,061,417 citations. We then build
72 upon these calculations by exploring trends in self-citation over time, by seniority, by country, by
73 gender, and by different subfields of research. We further develop models of the number of self-
74 citations and self-citation rate. Finally, we discuss the implications of our findings in the
75 Neuroscience publishing landscape and share a tool for authors to calculate their self-citation
76 rates: https://github.com/mattrosenblatt7/self_citation.
77

78 2. Results

79 2.1 Data

80 We downloaded citation information from 157,287 papers published between 2000 and 2020
81 from Scopus. Articles spanned 63 different journals representing the top Neurology,
82 Neuroscience, and Psychiatry journals (Table S1) based on impact factor. After applying our
83 exclusion criteria (see Methods), 100,347 articles and 5,061,417 citations remained.
84

85 2.2 Metrics

86 Using the Scopus database and Pybliometrics API ¹⁵, we calculated three metrics for each
87 individual paper: First Author self-citation rate, Last Author self-citation rate, and Any Author
88 self-citation rate, where self-citation rate is defined as the proportion of cited papers on which
89 the citing author is also an author. As an example, consider a hypothetical paper by Author A,
90 Author B, and Author C that cites 100 references.
91

- 92 • If Author A is an author on 5 of those references, then the First Author self-citation rate is
93 $5/100=5\%$.
- 94 • If Author C is an author on 10 of those references, then the Last Author self-citation rate
95 is $10/100=10\%$.
- 96 • If at least one of Author A, Author B, OR Author C is an author on 18 of the references,
97 then the Any Author self-citation rate is $18/100=18\%$.

98 We will use the above definitions of self-citation throughout the remainder of the paper.
99 Furthermore, our estimations via Python code of the above three metrics showed strong
100

102 agreement with 906 manually scored articles from a subset of Psychiatry journals (r^2 s>0.9)
103 (Figure S1).
104
105 We performed 1,000 iterations of bootstrap resampling to obtain confidence intervals for all
106 analyses. We additionally performed 10,000 iterations of permutation testing to obtain two-sided
107 P values for all significance tests. All P values are reported after applying the
108 Benjamini/Hochberg ¹⁶ false discovery rate (FDR) correction, unless otherwise specified.
109 Importantly, we accounted for the nested structure of the data in bootstrapping and permutation
110 tests by forming co-authorship exchangeability blocks.
111
112 Throughout this work, we characterized self-citation rates with descriptive, not causal, analyses.
113 Our analyses included several theoretical estimands that are descriptive ¹⁷, such as the mean
114 self-citation rates among published articles as a function of field, year, seniority, country, and
115 gender. We adopted two forms of empirical estimands. First, we showed subgroup means in
116 self-citation rates. We then developed smooth curves with generalized additive models (GAMs)
117 to describe trends in self-citation rates across several variables.
118
119 *2.3 Self-citation rates in 2016-2020*
120
121 In the last five years of our dataset (2016-2020), the overall self-citation rates were 3.98% (95%
122 CI: 3.87%, 4.07%) for First Authors, 8.15% (95% CI: 7.98%, 8.30%) for Last Authors, and
123 14.41% (95% CI: 13.99%, 14.74%) for Any Authors (Table 1). In all fields, the Last Author self-
124 citation rates were significantly higher than that of First Author self-citation rates ($P=2.9e-4$).
125 Neuroscience had a significantly lower self-citation rate than Neurology and Psychiatry for First,
126 Last, and Any Authors (P 's=2.9e-4). We found no significant difference between Neurology and
127 Psychiatry for First Author ($P=0.144$) and Last Author ($P=0.123$) self-citation rates. Any Author
128 self-citation rates were significantly higher in Neurology than Psychiatry before correction but
129 nonsignificant after correction ($P=0.010$). When determining fields by each author's publication
130 history instead of the journal of each article, we observed similar rates of self-citation (Table
131 S2). The 95% confidence intervals for each field definition overlapped in most cases, except for
132 Last Author self-citation rates in Neuroscience (7.54% defined by journal vs. 8.32% defined by
133 author) and Psychiatry (8.41% defined by journal vs. 7.92% defined by author).
134
135 Although there is no clear rule for what levels of self-citation are “acceptable,” a histogram of
136 self-citation rates (Figure 1a) and a table of self-citation percentiles (Table S3) both provide
137 insight into the self-citation levels that are typical in the Neuroscience literature.
138

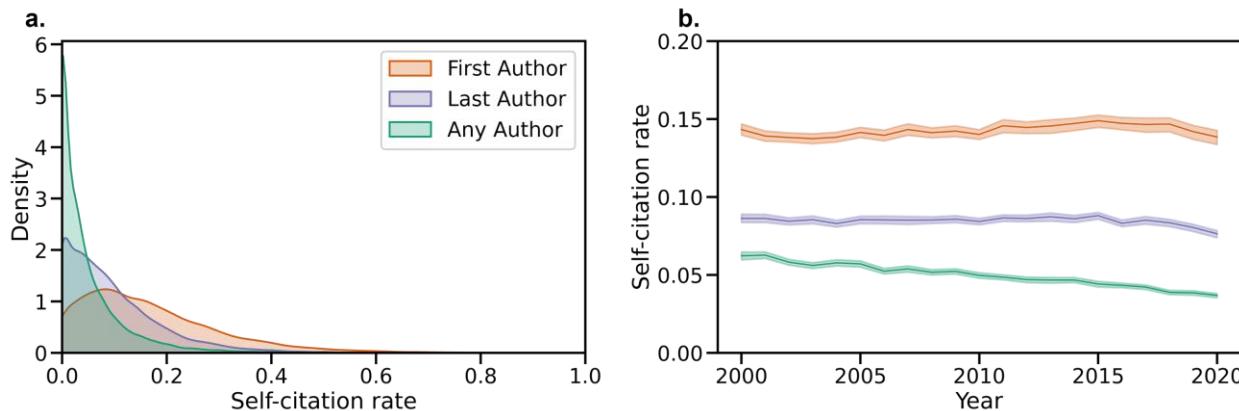
| Field | First Author | Last Author | Any Author |
|--------------|----------------------|----------------------|-------------------------|
| Overall | 3.98 (3.87, 4.07) | 8.15 (7.98, 8.30) | 14.41 (13.99, 14.74) |
| Neurology | 4.54 (4.36, 4.70) | 8.87 (8.52, 9.14) | 16.59 (15.85, 17.16) |
| Neuroscience | 3.41 (3.30, 3.51) | 7.54 (7.36, 7.73) | 12.61 (12.29, 12.91) |
| Psychiatry | 4.29 (4.11, 4.43) | 8.41 (8.16, 8.60) | 15.07 (14.48, 15.47) |

139 **Table 1.** Self-citation rates in 2016-2020 for First, Last, and Any Authors by field.

140 *2.4 Temporal trends in self-citation rates*

141
142 Furthermore, self-citation rates have changed since 2000 (Figure 1). For example, First Author
143 self-citation rates were 6.22% (95% CI: 5.97%, 6.47%) in 2000 and 3.68% (95% CI: 3.53%,
144 3.81%) in 2020. First Author self-citation rates decreased at a rate of -1.21% per decade (95%
145 CI: -1.30%, -1.12%), Last Author self-citation rates decreased at a rate of -0.18% per decade
146 (95% CI: -0.31%, -0.05%), and Any Author self-citation rates increased at a rate of 0.32% per
147 decade (95% CI: 0.05%, 0.55%). Corrected and uncorrected P values for the slopes are
148 available in Table S11. Further details about yearly trends in self-citation rate by field are
149 presented in Figure S2 and Table S4.

150



151
152 **Figure 1.** Visualizing recent self-citation rates and temporal trends. **a)** Kernel density estimate of the distribution of
153 First Author, Last Author, and Any Author self-citation rates in the last five years. **b)** Average self-citation rates over
154 every year since 2000, with 95% confidence intervals calculated by bootstrap resampling.

155

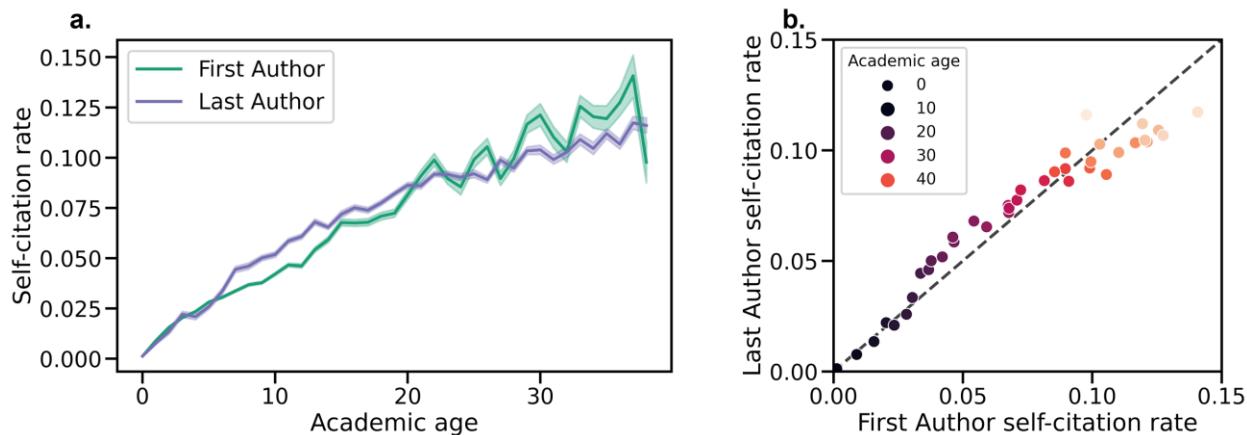
156 *2.5 Author seniority and self-citation rate*

157

158 We also considered that the self-citation rate might be related to seniority. To test this, we
159 calculated each author's "academic age" as the years between the publication of their first paper
160 (in any author position) and the current paper. For example, if the Last Author of a 2017 paper
161 published their first paper in 1995, their academic age would be 22. We averaged the self-
162 citation rates across each academic age, only including those ages with at least 50 papers in
163 the dataset, and found marked increases in self-citation rate with greater academic age (Figure
164 2a). For instance, at ten years, the self-citation rate for First Authors is about 5%, while this
165 number increases to over 10% at 30 years. Academic age appears to be a more robust
166 indicator of self-citation than authorship position; for a given academic age, First Author and
167 Last Author self-citation rates are comparable (Figure 2b). Analyzing self-citations as a fraction
168 of publication history exhibited a similar trend (Figure S3). First Authors were even more likely
169 than Last Authors to self-cite when normalized by prior publication history.

170

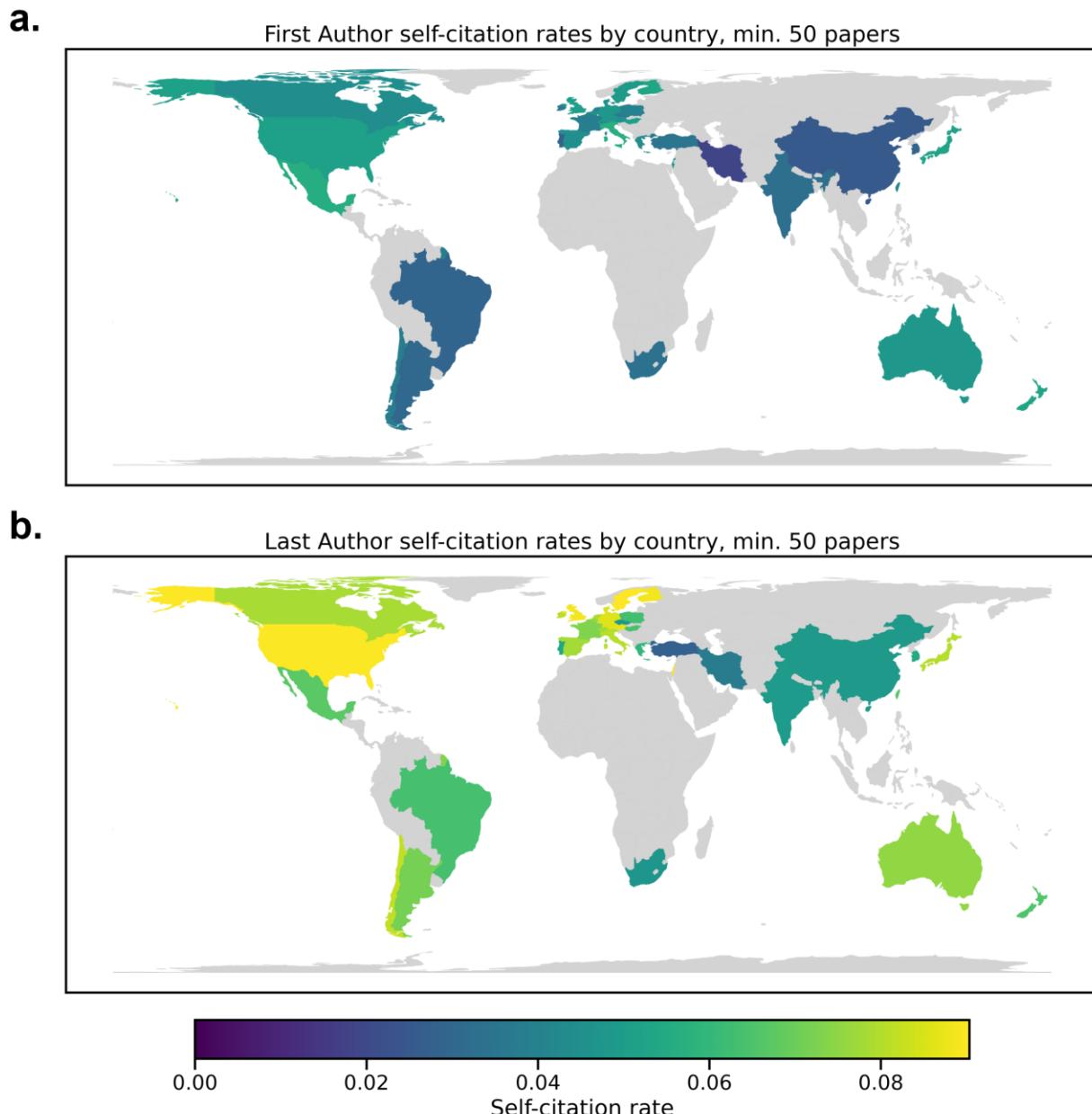
171



172
173 **Figure 2.** Average self-citation rates for each academic age in years 2016-2020. **a)** Self-citation rate vs. academic
174 age for both First and Last Authors. Shaded regions show 95% confidence intervals obtained via bootstrap
175 resampling. **b)** Comparison of self-citation rates by academic age for First and Last Authors. For a given academic
176 age, a single point is plotted as (x=First Author self-citation rate for authors of academic age a, y=Last Author self-
177 citation rate for authors of academic age a). The dashed line represents the y=x line, and the coloring of the points
178 from dark to light represents increasing academic age.

179
180 **2.6 Geographic location and self-citation rate**
181
182 In addition, we used the country of the affiliated institution of each author to determine the self-
183 citation rate by institution country over the last five years (2016-2020). We averaged First Author
184 and Last Author self-citation rates by country and only included countries with at least 50
185 papers. This analysis is distinct from country self-citation rate because we calculated self-
186 citation at the level of the author, then averaged across countries. In contrast, previous studies
187 have operationalized country self-citation rates as when authors from one country cite other
188 authors from the same country¹⁸. The results are shown on a map of the world using
189 GeoPandas¹⁹ (Figure 3) and also presented in Table S5. Self-citation rates in the highest self-
190 citing countries double that of the lowest for the First and Last Authors. For instance, the First
191 Author self-citation rate in Italy is 5.65%, while in China, it is 2.52%. We also investigated the
192 distribution of the number of previous papers and journal impact factor across countries (Figure
193 S4). Self-citation maps by country were highly correlated with maps of the number of previous
194 papers (Spearman's $r=0.576$, $P=4.1\text{e-}4$; 0.654 , $P=1.8\text{e-}5$ for First and Last Authors). They were
195 significantly correlated with maps of average impact factor for Last Authors (0.428 , $P=0.014$) but
196 not Last Authors (Spearman's $r=0.157$, $P=0.424$). Thus, further investigation is necessary with
197 these covariates in a comprehensive model.

198
199



200
201 **Figure 3.** Self-citation rates by country for First and Last Authors from 2016-2020. First Author data are presented in
202 (a), and Last Author data are shown in panel (b). Only countries with >50 papers were included in the analysis.
203 Country was determined by the affiliation of the author.

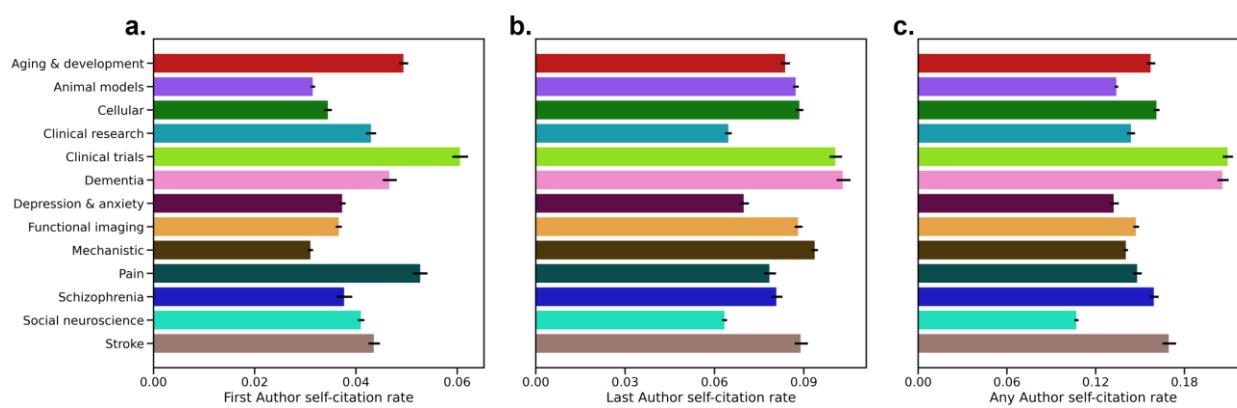
204
205 *2.7 Self-citation rates by subtopic*

206
207 We next investigated how self-citation rate varies within subfields of Neuroscience research.
208 Based on Scopus abstract data for papers from 2016-2020, we developed a topic model using
209 latent Dirichlet allocation (LDA). In LDA, each abstract is modeled as a distribution of topics, and
210 each topic contains probabilities for many different words.

211
212 We assigned each paper to the topic with the highest probability to determine “subtopics” for
213 each paper. The topic number was chosen as 13 with a parameter search (Figure S5). Based

214 on the most common words of each topic (Figure S6), we assigned 13 overall themes: 1) Aging
215 & development, 2) Animal models, 3) Cellular, 4) Clinical research, 5) Clinical trials, 6)
216 Dementia, 7) Depression & anxiety, 8) Functional imaging, 9) Mechanistic, 10) Pain, 11)
217 Schizophrenia, 12) Social Neuroscience, 13) Stroke. We then computed self-citation rates for
218 each of these topics (Figure 4) as the total number of self-citation in each topic divided by the
219 total number of references in each topic, and results with seven topics are also presented in the
220 SI (Figures S7-8).

221
222 We generally found that clinical trial research had the highest self-citation rates for First Authors
223 at 6.07% (95% CI: 5.90%, 6.22%), whereas mechanistic research had the lowest self-citation
224 rate at 3.10% (95% CI: 3.05%, 3.15%). For Last Authors, self-citation rates were highest for
225 Dementia research at 10.34% (95% CI: 10.10%, 10.57%) while Social Neuroscience had the
226 lowest self-citation rate at 6.34% (95% CI: 6.25%, 6.42%). For Any Author, Clinical trials once
227 again had the highest self-citation rate at 20.99% (95% CI: 20.59%, 21.28%), and Social
228 Neuroscience had the lowest self-citation rate at 10.71% (95% CI: 10.55%, 10.71%). For Last
229 Author and Any Author self-citation rates, a different number of authors per field may explain the
230 differences in self-citation rates (Spearman's $r=0.758$, $P=0.007$; $r=0.736$, $P=0.009$ for Last and
231 Any Authors, respectively). The same relationship did not hold for First Authors (Spearman's $r=$
232 0.033, $P=0.929$).
233



234
235 **Figure 4.** Self-citation rates by topic. Results are presented for a) First, b) Last, and c) Any Authors. Topics were
236 determined by Latent Dirichlet Allocation. Confidence intervals of the average self-citation rate are shown based on
237 1000 iterations of bootstrap resampling.
238

239 2.8 Self-citation by gender

240
241 Several previous works have explored gender differences in self-citation practices. King et al.²⁰
242 found that men self-cited 70% more than women from 1991-2011, but they did not account for
243 the number of previous papers that the authors had due to limitations of the dataset. More
244 recent works demonstrated that gender differences in self-citation largely disappear when
245 accounting for the number of possible works an author may self-cite (i.e., number of previous
246 publications)^{7,21,22}. While Dworkin et al.⁷ specifically explored citation by gender in the
247 Neuroscience literature, we expand the analysis to a wider range of journals to better represent
248 field-wide self-citation rates (63 journals versus five in the previous work).
249

250 For each paper, we assigned a probability of a particular name belonging to a woman or a man
251 using the Genderize.io API. We retained only authors with >80% probabilities. There are clear
252 limitations to these types of packages, as described by Dworkin et al.⁷, because they assume
253 genders are binary, and they do not account for authors who identify as nonbinary, transgender,

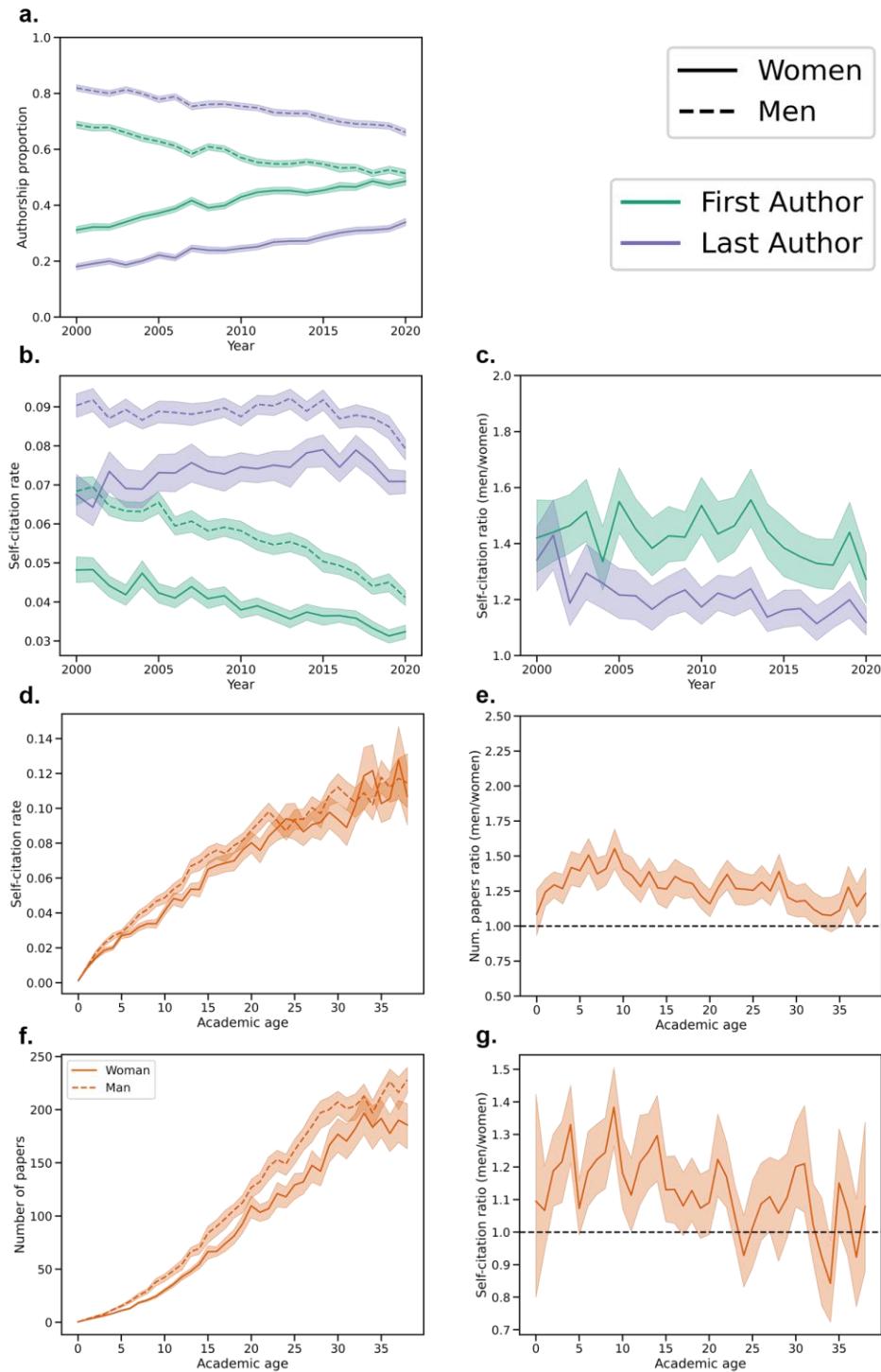
254 or intersex. As such, the terms “women” and “men” indicate the probability of names being that
255 gender as opposed to a specific author identifying as a man or woman. Despite these
256 limitations, we believe these tools can still help broadly uncover gender differences in self-
257 citation rates.

258
259 We calculated the proportion of men and women First and Last Authors since 2000 (Figure 5a).
260 Although the authorship proportions have begun to converge to be equal by gender, the gender
261 disparity among the Last Authors was more notable than among the First Authors. Men and
262 women were nearly equally represented as First Authors in 2020 (48.60% women). Based on
263 linear fits, we estimated that men and women would be equally represented as Last Authors in
264 2043 (95% CI: 2040, 2046).

265
266 In 2016-2020, there were significant differences between First Author self-citation rates of men
267 and women. First authors who were men had average self-citation rates of 4.54% (95% CI:
268 3.99%, 5.08%), while women authors had average self-citation rates of 3.39% (95%CI: 3.03%,
269 3.76%), which is significantly different ($P=2.9e-4$). Similarly, in 2020, Last Authors who were
270 men had significantly higher self-citation rates than those who were women ($P=2.9e-4$), with
271 self-citation rates of 8.53% (95% CI: 7.78%, 8.96%) and 7.42% (95% CI: 6.84%, 8.13%),
272 respectively.

273
274 In addition, men persistently had higher self-citation rates than women since 2000 (Figure 5b),
275 though the gap has slowly decreased. Linear fits were used to estimate that self-citation rates
276 for men and women would be equal for First Authors in the year 2044 (95% CI: 2036, 2056) and
277 equal for the Last Authors in 2040 (95% CI: 2030, 2061). Furthermore, we calculated the ratio of
278 men to women self-citations over the past two decades (Figure 5c). For First Authors, men have
279 consistently cited themselves more than women by 27.27-55.57% depending on the year.
280 Among Last Authors, there was a steep decrease in 2002, but since then, men have cited
281 themselves 11.41-43.00% more than women.

282
283 Seniority may account for gender differences in self-citation rate, as there are gender disparities
284 in faculty positions and ranks ²³⁻²⁶. To explore the effect of seniority, we investigated self-citation
285 rates by academic age and gender (2016-2020). Gender differences for the same academic age
286 emerged early in an academic career and were relatively persistent throughout most of the
287 career (Figure 5d-e). For instance, in the previous five years (2016-2020), there were 10,155
288 papers by early-career women authors and 10,694 by early-career men authors. Women
289 authors had 600,262 references and 13,426 self-citations (2.24% self-citation rate), while men
290 authors had 617,881 references and 18,399 self-citations (2.98% self-citation rate). This
291 equated to a 33.13% higher self-citation rate for men than women during the first ten years of
292 their careers ($P=2.9e-4$).



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Figure 5. Gender disparities in authorship and self-citation. **a)** Proportion of papers written by men and women First and Last Authors since 2000. **b)** Average self-citation rates for men and women First and Last Authors. **c)** Ratio of average self-citation rates of men to women for First and Last Authors. **d)** Self-citation rates by academic age for men and women authors, where the dashed line represents men and the solid line women. **e)** Ratio of self-citation rates of men to women by academic age. **f)** Number of papers by academic age for men and women, where the dashed line represents men and the solid line women. **g)** Ratio of average number of papers of men to women by academic age. In all subplots, 95% confidence intervals of the mean were calculated with 1000 iterations of bootstrap resampling.

302 We considered two factors that might contribute to the gender discrepancy in self-citation rate
303 by academic age: the number of papers published for authors of a given academic age, which is
304 greater for men at all career stages^{21,22,27,28}, and the self-citation rate for a given number of
305 papers. We compared the number of papers for men and women at a given academic age
306 (Figure 5f-g) and found that men had a higher number of papers. This trend started early in the
307 career (academic age<=10 years), where men had significantly more papers than women
308 (P=2.9e-4). For example, at an academic age of 10 years, men were authors on an average of
309 42.32 (s.d.: 1.76) papers, and women authored 30.09 (s.d.: 0.96) papers on average. In
310 addition, we divided the number of papers into groups (Figure S9) and computed self-citation
311 rate by gender for each group. Although the effect was small, men had significantly higher self-
312 citation rates for 0-9 papers (P=7.8e-4) and 10-19 papers (P=0.034). All other differences were
313 not statistically significant. Clearly, accounting for covariates may affect perceived differences in
314 raw self-citation rates. Thus, we further investigate the role of gender by adjusting for various
315 other covariates in Sections 2.9 and 2.10.

316
317 Furthermore, we explored topic-by-gender interactions (Figure S10). In short, men and women
318 were relatively equally represented as First Authors, but more men were Last Authors across all
319 topics. Self-citation rates were higher for men across all topics.

320
321 *2.9 Exploring effects of covariates with generalized additive models*

322
323 Investigating the raw trends and group differences in self-citation rates is important, but several
324 confounding factors may explain some of the differences reported in previous sections. For
325 instance, gender differences in self-citation were previously attributed to men having a greater
326 number of prior papers available to self-cite^{7,21,22}. As such, covarying for various author- and
327 article-level characteristics can improve the interpretability of self-citation rate trends. To allow
328 for inclusion of author-level characteristics, we only consider First Author and Last Author self-
329 citation in these models.

330
331 We used generalized additive models (GAMs) to model the number and rate of self-citations for
332 First Authors and Last Authors separately. The data were randomly subsampled so that each
333 author only appeared in one paper. The terms of the model included several article
334 characteristics (article year, average time lag between article and all cited articles, document
335 type, number of references, field, journal impact factor, and number of authors), as well as
336 author characteristics (academic age, number of previous papers, gender, and whether their
337 affiliated institution is in a low- and middle-income country). Model performance (adjusted R²)
338 and coefficients for parametric predictors are shown in Table 2. Plots of smooth predictors are
339 presented in Figure 6.

340
341 First, we considered several career and temporal variables. Consistent with prior works^{21,22},
342 self-citation rates and counts were higher for authors with a greater number of previous papers.
343 Self-citation counts and rates increased rapidly among the first 25 published papers but then
344 more gradually increased. Early in the career, increasing academic age was related to greater
345 self-citation. There was a small peak at about five years, followed by a small decrease and a
346 plateau. We found an inverted U-shaped trend for average time lag and self-citations, with self-
347 citations peaking approximately three years after initial publication. In addition, self-citations
348 have generally been decreasing since 2000. The smooth predictors showed larger decreases in
349 the First Author model relative to the Last Author model (Figure 6).

350
351 Then, we considered whether authors were affiliated with an institution in a low- and middle-
352 income country (LMIC). LMIC status was determined by the Organisation for Economic Co-

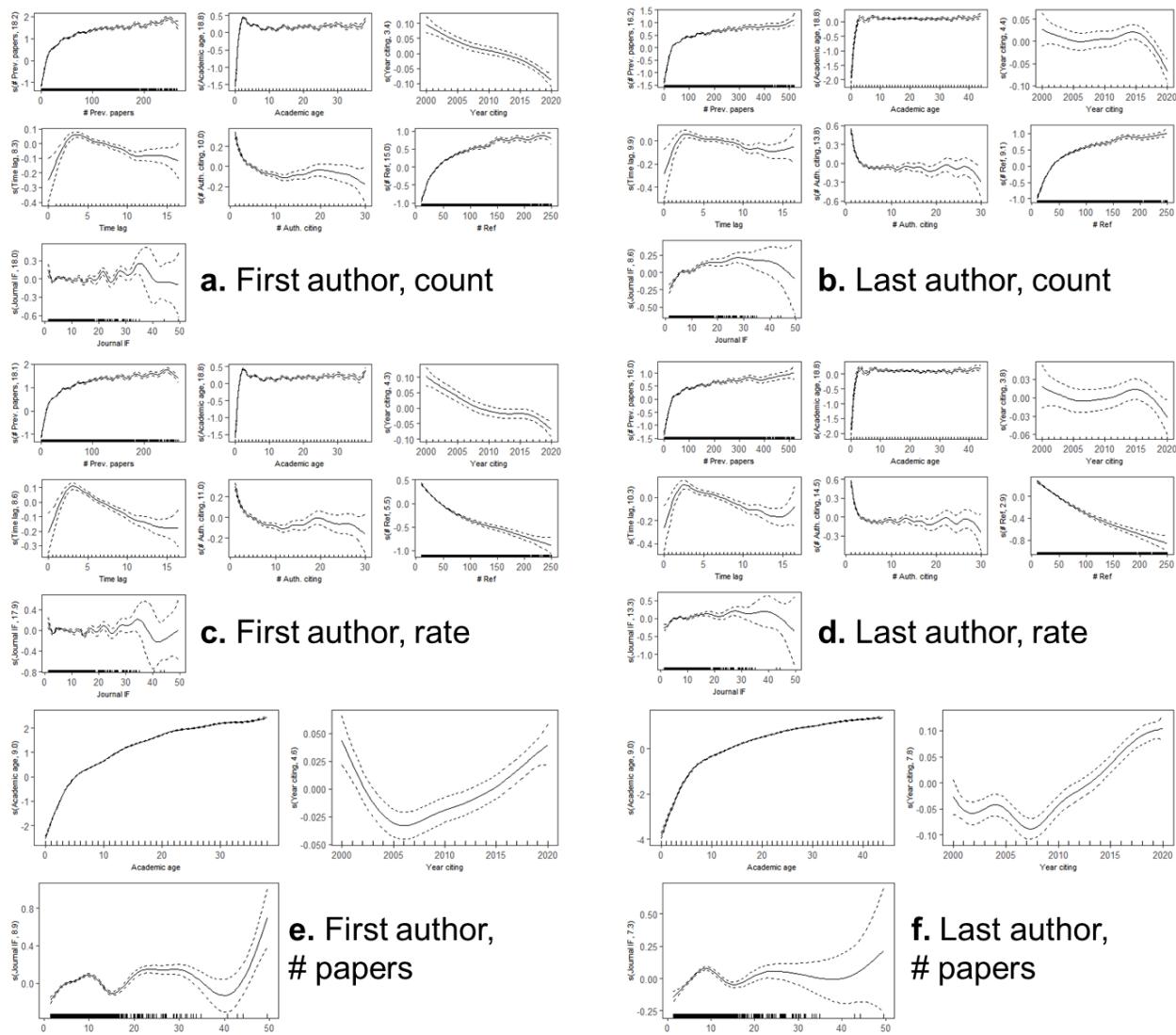
353 operation and Development. We opted to use LMIC instead of affiliation country or continent to
354 reduce the number of model terms. We found that papers from LMIC institutions had
355 significantly lower self-citation counts (-0.138 for First Authors, -0.184 for Last Authors) and
356 rates (-12.7% for First Authors, -23.7% for Last Authors) compared to non-LMIC institutions.
357 Additional results with affiliation continent are presented in Table S6. Relative to the reference
358 level of Asia, higher self-citations were associated with Africa (only three of four models), the
359 Americas, Europe, and Oceania.
360

361 Among paper characteristics, a greater number of references was associated with higher self-
362 citation counts and lower self-citation rates (Figure 6). Interestingly, self-citations were greater
363 for a small number of authors, though the effect diminished after about five authors. Review
364 articles were associated with lower self-citation counts and rates. No clear trend emerged
365 between self-citations and journal impact factor. In an analysis by field, despite the raw results
366 suggesting that self-citation rates were lower in Neuroscience, GAM-derived self-citations were
367 greater in Neuroscience than in Psychiatry or Neurology. Field-based results were comparable
368 when defining fields by each author's publication history instead of the journal of each article.
369 The most notable difference was in Neuroscience, where authors had relatively higher self-
370 citation rates using author-based rather than journal-based definitions of field (Table S7).
371

| | | Count | | Rate | | Number of papers | |
|----------------------------------|--------------|---------------------|---------------------|---------------------|---------------------|---------------------|----------------------|
| | | First Author | Last Author | First Author | Last Author | First Author | Last Author |
| Adjusted R ² | | 0.508 | 0.351 | 0.347 | 0.204 | 0.565 | 0.400 |
| Deviance explained | | 50.1% | 38.6% | 40.8% | 25.4% | 72.5% | 55.7% |
| Intercept | | 0.046** (P=1.1e-6) | 0.748*** (P<2e-16) | -3.64*** (P<2e-16) | -2.93*** (P<2e-16) | 2.296*** (P<2e-16) | 3.727*** (P<2e-16) |
| Field | Neurology | -0.093*** (P<2e-16) | -0.025* (P=0.046) | -0.131*** (P<2e-16) | -0.062** (P=1.4e-6) | 0.026* (P=3.7e-4) | 0.068*** (P=4.0e-15) |
| | Neuroscience | 0.147*** (P<2e-16) | 0.184*** (P<2e-16) | 0.112*** (P<2e-16) | 0.186*** (P<2e-16) | -0.195*** (P<2e-16) | -0.122*** (P<2e-16) |
| | Psychiatry | 0 | 0 | 0 | 0 | 0 | 0 |
| Low-middle income country status | No | 0 | 0 | 0 | 0 | 0 | 0 |
| | Yes | -0.116** (P=1.1e-7) | -0.241*** (P<2e-16) | -0.127** (P=1.0e-7) | -0.237*** (P<2e-16) | 0.071* (P=2.2e-5) | 0.010 (P=0.605) |
| Gender | Woman | 0 | 0 | 0 | 0 | 0 | 0 |
| | Man | -0.009 (P=0.253) | -0.033* (P=0.002) | -0.026* (P=0.004) | -0.047* (P=5.8e-5) | 0.246*** (P<2e-16) | 0.248*** (P<2e-16) |
| Document type | Article | 0 | 0 | 0 | 0 | 0 | 0 |
| | Review | -0.042** (P=0.001) | -0.139*** (P<2e-16) | -0.064** (P=7.8e-6) | -0.143*** (P<2e-16) | 0.152*** (P<2e-16) | -0.019* (P=0.047) |

372 **Table 2.** Coefficients and P values for parametric terms in the models. Separate models were created for First and
373 Last Authors. Models were also made for self-citation counts, self-citation rates, and the number of previously
374 published papers. Quantile-quantile plots are presented in Figure S11. Results from 100 random resamplings are
375 presented in Figure S12. Please note that model covariates were not included in the multiple comparisons correction
376 in Table S11. *P<0.05, **P<1e-5, ***P<1e-10.
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Figure 6. Smooth predictors for generalized additive models presented in Table 2. Models for **a)** First Authors and self-citation counts, **b)** Last Authors and self-citation counts, **c)** First Authors and self-citation rates, **d)** Last Authors and self-citation rates, **e)** First Authors and publication history, **f)** Last Authors and publication history. The number in parentheses on each y-axis reflects the effective degrees of freedom. All P values were $P < 2e-16$ except year citing for Last Authors for the count ($P = 5.0e-5$) and rate ($P = 0.176$) models.

Finally, our results aligned with previous findings of nearly equivalent self-citation rates for men and women after including covariates, even showing slightly higher self-citation rates in women. Since raw data showed evidence of a gender difference in self-citation that emerges early in the career but dissipates with seniority, we incorporated two interaction terms: one between gender and academic age and a second between gender and the number of previous papers. Results remained largely unchanged with the interaction terms (Table S8).

2.10 Reconciling differences between raw data and models

The raw and GAM-derived data exhibited some conflicting results, such as for gender and field of research. To further study covariates associated with this discrepancy, we modeled the publication history for each author (at the time of publication) in our dataset (Table 2). The

398 model terms included academic age, article year, journal impact factor, field, LMIC status,
399 gender, and document type. Notably, Neuroscience was associated with the fewest number of
400 papers per author. This explains how authors in Neuroscience could have the lowest raw self-
401 citation rates by highest self-citation rates after including covariates in a model. In addition,
402 being a man was associated with about 0.25 more papers. Thus, gender differences in self-
403 citation likely emerged from differences in the number of papers, not in any self-citation
404 practices.

405
406 *2.11 Self-citation code*
407

408 We provide code for authors to evaluate their own self-citation rates at the following link:
409 https://github.com/mattrosenblatt7/self_citation. Please note that this code requires access to
410 Scopus, which may be available through your institution. The code may also be adapted for
411 journal editors to evaluate the author self-citation rates of published articles in their journal.
412 Further details about the outputs of the code are described in Figure S13 and Figure S14.

413
414 *3. Discussion*
415

416 This work analyzed self-citation rates in 100,347 peer-reviewed Neurology, Neuroscience, and
417 Psychiatry papers, with over five million total citations, to dissect the factors associated with
418 self-citation practices.

419
420 *3.1 Temporal trends in self-citation rates*
421

422 Increasing collaborations and expanding author lists in recent years likely explains the increase
423 in Any Author self-citation rates. A more concerning trend is the decrease in First Author relative
424 to Last Author self-citations since 2000. In the Neurosciences, First Authors are typically early-
425 career researchers (e.g., graduate students, postdoctoral fellows) who perform the majority of
426 the experiments and analysis, whereas Last Authors are typically professors who oversee the
427 project and secure funding. As a result, these changes in citation practices could make it harder
428 for early-career scientists to advance in their academic careers, warranting further investigation
429 and monitoring. Another possible explanation is that an increasing number of early career
430 researchers are leaving academia²⁹. Thus, early-career researchers may be less incentivized to
431 self-promote (e.g., self-cite) for academic gains compared to 20 years ago. A third, more
432 optimistic explanation is that principal investigators (typically Last Authors) are increasingly self-
433 citing their lab's papers to build up their trainee's citation records for an increasingly competitive
434 job market.

435
436 Differences between early- and late-career researchers' self-citation practices is not surprising
437 because, as one continues in their career, they contribute to more papers and are more likely to
438 cite themselves. In addition, researchers may often become more specialized throughout their
439 career, which may necessitate higher self-citation rates later in the career. However, these
440 results demonstrate a "snowball effect," whereby senior authors continually accumulate a
441 disproportionate number of self-citations. For example, an author with 30 years of experience
442 cites themselves approximately twice as much as one with 10 years of experience on average.
443 Both authors have plenty of works that they can cite, and likely only a few are necessary. As
444 such, we encourage authors to be cognizant of their citations and to avoid unnecessary self-
445 citations.

446
447
448

449 3.2 *Geographic differences in self-citation rates*

450
451 There are several possible explanations for differences in self-citation by geographic region,
452 including broader cultural differences or academic culture differences. For instance, an analysis
453 of management journals previously found that self-citation rates of authors from individualist
454 cultures were higher than that of authors from collectivist cultures³⁰. In addition to broader
455 cultural norms affecting the tendency to self-cite, differences in academic norms likely play a
456 major role as well. Researchers in the United States, for example, reported feeling more
457 pressure to publish papers within their organizations compared to researchers from other
458 countries³¹. The pressure to publish stems from pressure to advance one's career. Similar
459 pressures that vary by geographic region may drive researchers to unnecessarily self-cite to
460 improve their citation metrics and make them more competitive candidates for hiring, promotion,
461 and funding.

462
463 In addition, low- and middle-income countries were associated with fewer self-citations, even
464 after considering numerous covariates. Decreased self-citations may diminish the visibility of
465 researchers from LMIC relative to their peers from non-LMIC. Thus, future research should
466 explore the mechanism behind the decreased self-citations.

467
468 While hiring and promotion almost universally depend on citation metrics to some extent, an
469 example of a recent policy in Italy demonstrates how rules regarding hiring and promotion can
470 influence self-citation behavior. This policy was introduced in 2010 and required researchers to
471 achieve certain citation metrics for the possibility of promotion, which was followed by increases
472 of self-citation rates throughout Italy³². Ideally, authors, institutions, journals, and policymakers
473 would work together to establish self-citation guidelines and discourage a "game the system"
474 mindset. However, requiring all institutions and countries to follow similar values regarding
475 citation metrics is not practical, so awareness of possible differences in metrics by geographic
476 region due to self-citation differences is the next best alternative.

477
478 3.3 *Field differences in self-citation rates*

479
480 Initially, it appeared that self-citation rates in Neuroscience are lower than Neurology and
481 Psychiatry, but after considering several covariates, the self-citation rates are higher in
482 Neuroscience. This discrepancy likely emerges because authors in Neuroscience journals in our
483 dataset tended to be more junior (fewer number of previous papers, slightly lower academic
484 age) compared to Neurology and Psychiatry, giving the illusion of lower field-wide self-citation
485 rates. The field-wide differences in self-citation rate likely depend on both necessity and
486 opportunity. In some research fields, a researcher may need to reference several of their
487 previous works to properly explain the methodology used in the present study, thus having a
488 high necessity of self-citation. Depending on the nature of the work across various fields,
489 researchers may publish more or less frequently, which will affect their number of previous
490 works and thus their opportunity to self-cite.

491
492 In addition, while not included in the model to limit the number of terms, the 13 subtopics under
493 examination had different raw self-citation rates, and "acceptable levels" of self-citation may
494 vary depending on the subfield. For example, clinical trials had the highest self-citation rate,
495 which may relate to the relatively high number of authors per paper in clinical trial research or
496 the fact that clinical trial research often builds upon previous interventions (e.g., Phase 1 or 2
497 trials). Overall, these field and subfield differences highlight the importance of editors and
498 researchers understanding common self-citation rates in their specific fields to ensure that they
499 are not unnecessarily self-citing.

500 3.4 Self-citation rates by gender

501
502 The higher self-citation rate of men compared to women, without considering other covariates,
503 aligns with the previous self-citation literature^{7,20–22}. Similar to prior works^{7,21,22}, we found that
504 the largest difference in self-citing is explained by the number of previous papers (i.e., number
505 of citable items) as opposed to differences in self-citation behavior itself. This result overall
506 points toward a more general underrepresentation of women in science, such as in publication
507 counts^{27,28}, collaboration networks^{33,34}, awards³⁵, editorial boards³⁶, and faculty positions^{37–39}.
508 We confirmed this idea by modeling the number of previous papers for each author. Women
509 had significantly fewer papers than men after considering multiple covariates, such as academic
510 age. In other words, women have a lower self-citation rate than men in the Neuroscience
511 literature because they are not given the same opportunity, such as through prior publications,
512 to self-cite. Establishing field-wide influence and scientific prominence may be most crucial in
513 early career stages, since soon thereafter decisions will be made about hiring, early-career
514 grants, and promotion. Thus, future work should further consider the downstream effects of
515 differences in the number of publications by gender.

516
517 3.5 Limitations

518
519 There were several notable limitations of this study. First, our analyses were restricted to the
520 top-ranked Neurology, Neuroscience, and Psychiatry journals, and the generalizability of these
521 findings to a wider variety of journals has yet to be determined. Citations of a journal's articles
522 directly affect the journal's impact factor. As such, it is possible that the selection of journals
523 based on high impact factor skews the results toward higher self-citation rates compared to the
524 entire field of Neuroscience. Yet, we found minimal effect of impact factor in our models.
525 Second, we calculated differences between Neurology, Neuroscience, and Psychiatry journals
526 by assigning each journal to only one field (Table S1). As some journals publish across multiple
527 fields (e.g., both Neuroscience and Psychiatry research), this categorization provides a gross
528 estimate of differences between fields. Third, we reported averages of self-citation rates across
529 various groups (e.g., academic ages), but there is a wide inter-author and inter-paper variability
530 in self-citation rate. Fourth, as described above, we evaluated gender differences with gender
531 assignment based on name, and this does not account for nonbinary, transgender, or intersex
532 authors. Fifth, selecting subtopics using LDA was subjective because we assigned each
533 subtopic name based on the most common words. Sixth, our modeling techniques are not
534 useful for prediction due to the inherently large variability in self-citation rates across authors
535 and papers, but they instead provide insight into broader trends. In addition, these models do
536 not account for whether a specific citation is appropriate, as some situations may necessitate
537 higher self-citation rates. Seventh, the analysis presented in this work is not causal. Association
538 studies are advantageous for increasing sample size, but future work could investigate causality
539 in curated datasets. Similarly, this study falls short in several potential mechanistic insights,
540 such as by investigating citation appropriateness via text similarity or international dynamics in
541 authors who move between countries. Yet, this study may lay the groundwork for future works
542 to explore causal estimands¹⁷. Eighth, authors included in this work may not be neurologists,
543 neuroscientists, or psychiatrists. However, they still publish in journals from these fields. Ninth,
544 data were differentially missing (Table S10) due to Scopus coverage and gender estimation.
545 Differential missingness could bias certain results in the paper, but we hope that the dataset is
546 large enough to reduce any potential biases. Tenth, while we considered academic age, we did
547 not consider cohort effects. Cohort effects would depend on the year in which the individual
548 started their career. Finally, our analysis does not account for other possible forms of excessive
549 self-citation practices, such as coercive induced self-citation from reviewers⁴⁰. Despite these
550 limitations, we found significant differences in self-citation rates for various groups, and thus we

551 encourage authors to explore their trends in self-citation rates. Self-citation rates that are higher
552 than average are not necessarily wrong, but suggest that authors should further reflect on their
553 current self-citation practices.

554

555 *3.6 Self-citation policies*

556

557 According to The Committee on Publication Ethics (COPE), “citations where the motivations are
558 merely self promotional...violates publication ethics and is unethical”⁴¹. Excessive and
559 unnecessary self-citations can possibly be limited by using appropriate citation metrics that
560 cannot be easily “gamed”^{32,40}. Furthermore, while COPE suggests that journals and editors
561 should make policies about acceptable levels of self-citation⁴¹, many journals have no such
562 policy. For example, only 24.71% of General Surgery⁴² and 14.29% of Critical Care⁴³ journals
563 had policies regarding self-citation, most of which were policies discouraging “excessive” or
564 “inappropriate” self-citations. Although the self-citation policies in the investigated journals had
565 no significant effect on self-citation rate^{42,43}, a more appropriate consideration might be whether
566 these policies significantly reduce excessive self-citations. Self-citation practices are not
567 typically problematic, but excessive self-citations may falsely establish community-wide
568 influence⁴⁴. As such, we believe that the self-citation summary statistics presented in this work
569 could serve as a useful guide in identifying potential cases of excessive self-citation. In practice,
570 there should be more nuance than a binary threshold of acceptable/unacceptable levels of self-
571 citation, as some fields may have atypical self-citation patterns⁴⁴ or specific articles may require
572 high levels of self-citation.

573

574 *3.7 Conclusions*

575

576 Overall, we identified trends in self-citation rates by time, geographic region, gender, and field,
577 though the extent to which this reflects an underlying problem that needs to be addressed
578 remains an open question. We do not intend to argue against the practice of self-citation, which
579 is not inherently bad and in fact can be beneficial to authors and useful scientifically^{14,40}. Yet,
580 self-citation practices become problematic when they are different across groups or are used to
581 “game the system.” Future work should investigate the downstream effects of self-citation
582 differences to see whether they impact the career trajectories of certain groups. We hope that
583 this work will help to raise awareness about factors influencing self-citation practices to better
584 inform authors, editors, funding agencies, and institutions in Neurology, Neuroscience, and
585 Psychiatry.

586

587 *4. Methods*

588

589 We collected data from the 25 journals with the highest impact factors, based on Web of
590 Science impact factors, in each of Neurology, Neuroscience, and Psychiatry. Some journals
591 appeared in the top 25 list of multiple fields (e.g., both Neurology and Neuroscience), so 63
592 journals were ultimately included in our analysis. We recognize that limiting the journals to the
593 top 25 in each field also limits the generalizability of the results. However, there are tradeoffs
594 between breadth of journals and depth of information. For example, by limiting the journals to
595 these 63, we were able to look at 21 years of data (2000-2020). In addition, the definition of
596 fields are somewhat arbitrary. By restricting the journals to a set of 63 well-known journals, we
597 ensured that the journals belonged to Neurology, Neuroscience, or Psychiatry research. It is
598 also important to note that the impact factor of these journals has not necessarily always been
599 high. For example, *Acta Neuropathologica* had an impact factor of 17.09 in 2020 but 2.45 in
600 2000. To further recognize the effects of impact factor, we decided to include an impact factor
601 term in our models.

602 *4.1 Dataset collection*

603
604 The data were downloaded from the Scopus API in 2021-2022 via <http://api.elsevier.com> and
605 <http://www.scopus.com>. We obtained information about research and review articles in the 63
606 journals from 2000-2020. We downloaded two sets of .csv files: 1) an article database and 2) a
607 reference database. For each year/journal, the article database contains last names and first
608 initials of the authors, title, year, and article EID (a unique identifier assigned by Scopus) of all
609 research and review articles. The reference database contains the same information for all
610 articles referenced by any article in the article database.

611
612 *4.2 Python code using Pybliometrics API*

613
614 We used the Pybliometrics API ¹⁵ to access citation information for each entry in the article
615 database. First, we used the article EID to retrieve a detailed author list, which included full
616 names and Scopus Author IDs, and a list of references for each article. For each reference, we
617 extracted the list of Scopus Author IDs. To count as a self-citation, we required that the Scopus
618 Author IDs matched exactly.

619
620 Our self-citation metrics included First Author, Last Author, and Any Author self-citation rates.
621 For First (Last) Author self-citation rates, we computed the proportion of reference papers on
622 which the citing First (Last) author is also an author. We considered papers with only a single
623 author as both First Author and Last Author self-citations. For Any Author self-citation rates, we
624 found the proportion of papers for which at least one of the citing authors (any authorship
625 position) was also an author. For the analyses in this paper, we reported total (or weighted
626 average) self-citation rates for different groups. For example, in Figure 1, the reported self-
627 citation rate for the year 2000 is the total number of self-citations in 2000 across all papers
628 divided by the total number of references in 2000 across all papers.

629
630 Other data we collected from Scopus and Pybliometrics included the affiliation of the authors,
631 the number of papers published by the First and Last Authors before the current paper, and
632 academic age of the First and Last Authors, which we defined as the time between the author's
633 first publication and their current publication.

634
635 *4.3 Data exclusions and missingness*

636
637 Data were excluded across several criteria: missing covariates, missing citation data, out-of-
638 range values at the citation pair level, and out-of-range values at the article level (Table 3). After
639 downloading the data, our dataset included 157,287 articles and 8,438,733 citations. We
640 excluded any articles with missing covariates (document type, field, year, number of authors,
641 number of references, academic age, number of previous papers, affiliation country, gender,
642 and journal). Of the remaining articles, we dropped any for missing citation data (e.g., cannot
643 identify whether a self-citation is present due to lack of data). Then, we removed citations with
644 unrealistic or extreme values. These included an academic age of less than zero or above 38/44
645 for First/Last Authors (99th percentile); greater than 266/522 papers for First/Last Authors (99th
646 percentile); and a cited year before 1500 or after 2023. Subsequently, we dropped articles with
647 extreme values that could contribute to poor model stability. These included greater than 30
648 authors; fewer than 10 references or greater than 250 references; and a time lag of greater than
649 17 years. These values were selected to ensure that GAMs were stable and not influenced by a
650 small number of extreme values.

651

652 In addition, we evaluated whether the data were not missing at random (Table S10). Data were
653 more likely to be missing for reviews relative to articles, for Neurology relative to Neuroscience
654 or Psychiatry, in works from Africa relative to the other continents, and for men relative to
655 women. Scopus ID coverage contributed in part to differential missingness. However, our
656 exclusion criteria also contribute. For example, Last Authors with more than 522 papers were
657 excluded to help stabilize our GAMs. More men fit this exclusion criteria than women.
658

| | First Author | | Last Author | |
|--|---------------------------------------|--------------------|------------------|--------------------|
| | # Articles | # Citations | # Articles | # Citations |
| Prior to exclusions | 157,287 | 8,438,733 | 157,287 | 8,438,733 |
| Missing covariates: remaining (% dropped) | 133,403 (15.18%) | 7,392,638 (12.40%) | 132,806 (15.56%) | 7,379,581 (12.55%) |
| Missing citation data: remaining (% dropped) | 133,256 (0.11%) | 6,773,293 (8.38%) | 132,667 (0.10%) | 6,769,081 (8.27%) |
| Extreme values (citation level): remaining (% dropped) | 126,938 (4.74%) | 6,390,129 (5.66%) | 126,168 (4.90%) | 6,396,015 (5.51%) |
| Extreme values (article level): remaining (% dropped) | 115,205 (9.24%) | 5,794,926 (9.31%) | 114,622 (9.15%) | 5,801,367 (9.30%) |
| Data available for First and Last Authors | 100,347 Articles; 5,061,417 citations | | | |

659 **Table 3.** Data exclusions. Each cell shows the number of articles or citations remaining after exclusion, as well as the
660 percentage that were dropped by the exclusion criteria.
661

662 *4.4 Country affiliation*

663
664 For both First and Last Authors, we found the country of their institutional affiliation listed on the
665 publication. In the case of multiple affiliations, the first one listed in Scopus was used. We then
666 calculated the total First Author and Last Author self-citation rate by country, only including
667 countries that had at least 50 First Author or Last Author papers in these select journals from
668 2016-2020. We then projected the self-citation rates onto a map using Geopandas ¹⁹,
669 specifically using the map with coordinate systems EPSG:6933 (<https://epsg.io/6933>). We
670 determined whether a country was considered a low- and middle-income country based on the
671 Organisation for Economic Co-operation and Development's list (<https://wellcome.org/grant-funding/guidance/low-and-middle-income-countries>).
672

673 *4.5 Topic modeling*

674

675 Latent Dirichlet Allocation (LDA)^{45,46} was implemented with the Gensim package⁴⁷ in Python.
676 LDA is a generative probabilistic model that is commonly used in natural language processing to
677 discover topics in a large set of documents. In LDA, each document is modeled as a distribution
678 of latent topics, and each topic is represented as a distribution of words. Based on the data
679 provided, in this case abstracts from all articles in our dataset from 2016-2020, the model finds
680 distributions of topics and words to maximize the log likelihood of the documents. Further details
681 about LDA are available in⁴⁵⁻⁴⁷.

682

683 For our implementation, we first removed all special characters and numbers from the abstract
684 data. Then, we lemmatized the words using the Natural Language Toolkit⁴⁸. We excluded
685 words that appeared in less than 20 documents, words that appeared in over 50% of the
686 documents, common stop words (e.g., “the”, “you”, etc.), and some additional words that we felt
687 would not meaningfully contribute to the topic model (e.g., “associated”, “analysis”, “effect”,
688 etc.). In addition, we allowed for bigrams (two consecutive words) and trigrams (three
689 consecutive words) in the model, as long as they appeared at least 20 times in the dataset.

690

691 Our total corpus included 41,434 documents with 16,895 unique tokens (words + bigrams +
692 trigrams). We used 90% of the corpus to train our LDA model, and left out 10% to evaluate the
693 perplexity, where a lower perplexity demonstrates better performance, as described in⁴⁵. For
694 the a-priori belief on document-topic distribution, we used Gensim’s “auto” option. We trained
695 models with a number of topics ranging from 2-20, passing through the entire train corpus 30
696 times for each number of topics we evaluated. The number of topics was picked based on two
697 evaluation metrics. First, we selected 13 topics as the topics that seemed most meaningful, as
698 assessed qualitatively by word clouds for each topic. Second, we selected seven topics as the
699 number of topics with the lowest validation perplexity.

700

701 Finally, we assigned each paper a discrete topic by choosing the topic with highest probability.
702 Since we do not necessarily care about the generalization of this model and are instead using it
703 to determine topics of a specific set of papers, we determined topics on the same data on which
704 the model was trained.

705

706 *4.6 Name gender probability estimation*

707

708 To compute gender probabilities, we submitted given names of all First and Last Authors to the
709 Genderize.io API. Each name was assigned a probability of a name belonging to a woman or
710 man, and we only used names for which Genderize.io assigned at least an 80% probability.
711 Details about the Genderize.io database used to calculate probabilities is available at this link:
712 <https://genderize.io/our-data>.

713

714 There are clear limitations to probabilistically assigning genders to names with packages such
715 as Genderize.io, as described in⁷, because they assume genders are binary and do not
716 account for authors who identify as nonbinary, transgender, or intersex. As such, the terms
717 “women” and “men” indicate the probability of a name being that gender and not that a specific
718 author identifies as a man or woman. However, these tools are still useful to explore broad
719 trends in self-citation rates for women and men.

720

721

722

723

724 *4.7 Self-citation rate for a particular author*

725

726 We also calculated the self-citation rate for a particular author, in this case Dr. Dustin Scheinost,
727 in Figure S9. Here, we defined Scheinost-Scheinost self-citation rates as the proportion of
728 references with Dr. Scheinost as one of the authors. Notably, Dr. Scheinost can be in any
729 author position on the citing or cited article. In Figure S9c, we calculated the Any Author self-
730 citation rate for all of Dr. Scheinost's papers.

731

732 *4.8 Confidence Intervals*

733

734 Confidence intervals were computed with 1000 iterations of bootstrap resampling at the article
735 level. For example, of the 100,347 articles in the dataset, we resampled articles with
736 replacement and recomputed all results. The 95% confidence interval was reported as the 2.5
737 and 97.5 percentiles of the bootstrapped values.

738

739 We grouped data into exchangeability blocks to avoid overly narrow confidence intervals or
740 overly optimistic statistical inference. Each exchangeability block comprised any authors who
741 published together as a First Author / Last Author pairing in our dataset. We only considered
742 shared First/Last Author publications because we believe that these authors primarily control
743 self-citations, and otherwise exchangeability blocks would grow too large due to the highly
744 collaborative nature of the field. Furthermore, the exchangeability blocks do not account for co-
745 authorship in other journals or prior to 2000. A distribution of the sizes of exchangeability blocks
746 is presented in Figure S15.

747

748 *4.9 P values*

749

750 P values were computed with permutation testing using 10,000 permutations, with the exception
751 of regression P values and P values from model coefficients. For comparing different fields
752 (e.g., Neuroscience and Psychiatry) and comparing self-citation rates of men and women, the
753 labels were randomly permuted by exchangeability block to obtain null distributions. For
754 comparing self-citation rates between First and Last Authors, the first and last authorship was
755 swapped in 50% of exchangeability blocks.

756

757 In total, we made 40 comparisons (not including the models of self-citation). All P values
758 described in the main text were corrected with the Benjamini/Hochberg¹⁶ false discovery rate
759 (FDR) correction. With 10,000 permutations, the lowest P value after applying FDR correction is
760 P=2.9e-4, which indicates that the true point would be the most extreme in the simulated null
761 distribution. Further details about each comparison and P values can be found in Table S9.

762

763 *4.10 Exploring effects of covariates with generalized additive models*

764

765 For these analyses, we used the full dataset size separately for First and Last Authors (Table
766 S3). This included 115,205 articles and 5,794,926 citations for First Authors, and 114,622
767 articles and 5,801,367 citations for Last Authors. We modeled self-citation counts, self-citation
768 rates, and number of previous papers for First Authors and Last Authors separately, resulting in
769 six total models.

770

771 We found that models could be computationally intensive and unstable when including author-
772 level random effects because in many cases there was only one author per group. Instead, to
773 avoid inappropriately narrow confidence bands, we resampled the dataset such that each
774 author was only represented once. For example, if Author A had five papers in this dataset, then

775 one of their five papers was randomly selected. The random resampling was repeated 100
776 times as a sensitivity analysis (Figure S12).

777
778 For our models, we used generalized additive models from mgcv's "gam" function in R ⁴⁹. The
779 smooth terms included all the continuous variables: number of previous papers, academic age,
780 year, time lag, number of authors, number of references, and journal impact factor. The linear
781 terms included all the categorical variables: field, gender affiliation country LMIC status, and
782 document type. We empirically selected a Tweedie distribution ⁵⁰ with a log link function and
783 p=1.2. The p parameter indicates that the variance is proportional to the mean to the p power ⁴⁹.
784 The p parameter ranges from 1-2, with p=1 equivalent to the Poisson distribution and p=2
785 equivalent to the gamma distribution. For all fitted models, we simulated the residuals with the
786 DHARMA package, as standard residual plots may not be appropriate for GAMs ⁵¹. DHARMA
787 scales the residuals between 0 and 1 with a simulation-based approach ⁵¹. We also tested for
788 deviation from uniformity, dispersion, outliers, and zero inflation with DHARMA. Non-uniformity,
789 dispersion, outliers, and zero inflation were significant due to the large sample size, but small in
790 effect size in most cases. The simulated quantile-quantile plots from DHARMA suggested that
791 the observed and simulated distributions were generally aligned, with the exception of slight
792 misalignment in the models for the number of previous papers. These analyses are presented in
793 Figure S11 and Table S9.

794
795 In addition, we tested for inadequate basis functions using mgcv's "gam.check()" function ⁴⁹.
796 Across all smooth predictors and models, we ultimately selected between 10-20 basis functions
797 depending on the variable and outcome measure (counts, rates, papers). We further checked
798 the concavity of the models and ensured that the worst-case concavity for all smooth
799 predictors was less than 0.8.

800
801 *4.11 Journal-based vs. author-based field sensitivity analyses*

802
803 We refined our field-based analysis to focus only on authors who could be considered
804 neuroscientists, neurologists, and psychiatrists. For each author, we examined the number of
805 articles they had in each subfield, as defined by Scopus. We considered 12 subfields that fell
806 within Neurology, Neuroscience, and Psychiatry, which are presented in Table S12. For both
807 First Authors and Last Authors, we excluded them if any of their three most frequently published
808 subfields did not include one of the 12 subfields of interest. If an author's top three subfields
809 included multiple broader fields (e.g., both Neuroscience and Psychiatry), then that author was
810 categorized according to the field in which they published the most articles. Among First
811 Authors, there were 86,220 remaining papers, split between 33,054 (38.33%) in Neurology,
812 23,216 (26.93%) in Neuroscience, and 29,950 (34.73%) in Psychiatry. Among Last Authors,
813 there were 85,954 remaining papers, split between 31,793 (36.98%) in Neurology, 25,438
814 (29.59%) in Neuroscience, and 28,723 (33.42%) in Psychiatry.

815
816 *4.12 Code and Data Availability*

817
818 The data and code are available via GitHub: https://github.com/mattrosenblatt7/self_citation.
819 The data were downloaded from the Scopus API in 2021-2022 via <http://api.elsevier.com> and
820 <http://www.scopus.com>. The shared dataset has been anonymized such that specific articles
821 cannot be identified. In addition, the GitHub repository includes code to gather self-citation data
822 about yourself, with appropriate access to Scopus.

823

824 4.13 Citation Diversity Statement

825
826 Recent work in several fields of science has identified a bias in citation practices such that
827 papers from women and other minority scholars are under-cited relative to the number of such
828 papers in the field^{6-9,52-56}. Here we sought to proactively consider choosing references that
829 reflect the diversity of the field in thought, form of contribution, gender, race, ethnicity, and other
830 factors. First, we obtained the predicted gender of the First and Last Author of each reference
831 by using databases that store the probability of a first name being carried by a woman^{7,57}. By
832 this measure (and excluding self-citations to the First and Last Authors of our current paper),
833 our references contain 12.53% woman(first)/woman(last), 19.27% man/woman, 13.17%
834 woman/man, and 55.03% man/man. This method is limited in that a) names, pronouns, and
835 social media profiles used to construct the databases may not, in every case, be indicative of
836 gender identity and b) it cannot account for intersex, non-binary, or transgender people.
837 Second, we obtained predicted racial/ethnic category of the First and Last Author of each
838 reference by databases that store the probability of a first and last name being carried by an
839 author of color^{58,59}. By this measure (and excluding self-citations), our references contain
840 7.46% author of color (first)/author of color(last), 17.45% white author/author of color, 14.81%
841 author of color/white author, and 60.29% white author/white author. This method is limited in
842 that a) names, Census entries, and Wikipedia profiles used to make the predictions may not be
843 indicative of racial/ethnic identity, and b) it cannot account for Indigenous and mixed-race
844 authors, or those who may face differential biases due to the ambiguous racialization or
845 ethnicization of their names. We look forward to future work that could help us to better
846 understand how to support equitable practices in science.

847

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979 *Supplementary Information*

980
981 *S1. All journals included in these analyses*

982
983 Table S1 shows all 63 journals included in our dataset. We categorized each journal as
984 belonging to Neurology, Neuroscience, or Psychiatry. While we recognize that some journals
985 belong to overlapping fields (e.g., Neurology and Neuroscience), we attempted to select the
986 most relevant field for each journal.

987

| Field | Journals (2020 Impact Factor) |
|--------------|--|
| Neurology | Acta Neuropathologica (17.09); Alzheimer's and Dementia (21.57); Alzheimer's Research and Therapy (6.98); Annals of Neurology (10.42); Brain (13.50); Brain Stimulation (8.96); Epilepsy Currents (7.5); JAMA Neurology (18.30); JNNP (10.28); Journal of Headache and Pain (7.28); Journal of Stroke (6.97); Lancet Neurology (44.18); Molecular Neurodegeneration (14.20); Movement Disorders (10.34); Nature Reviews Neurology (42.94); Neuro-Oncology (12.30); Neurology (9.91); Neurology: Neuroimmunology and NeuroInflammation (8.49); Neuropathology and Applied Neurobiology (8.09); Neurotherapeutics (7.62); npj Parkinson's Disease (8.65); Pain (6.96); Sleep Medicine Reviews (11.61); Stroke (7.91); Translational Stroke Research (6.83) |
| Neuroscience | Annual Review of Neuroscience (12.45); Behavioral and Brain Sciences (12.58); Brain, Behavior, and Immunity (7.22); Frontiers in Neuroendocrinology (8.61); Journal of Neuroinflammation (8.32); Journal of Pineal Research (13.01); Nature Human Behaviour (13.66); Nature Neuroscience (24.88); Nature Reviews Neuroscience (34.87); Neuron (17.17); Neuroscience and Biobehavioral Reviews (8.99); Neuroscientist (7.52); Progress in Neurobiology (11.69); Trends in Cognitive Sciences (20.23); Trends in Neurosciences (13.84) |
| Psychiatry | Acta Psychiatrica Scandinavica (6.39); Addiction (6.53); American Journal of Psychiatry (18.11); Biological Psychiatry (13.38); Bipolar Disorders (6.74); Body Image (6.41); British Journal of Psychiatry (9.32); Clinical Psychological Science (7.17); Depression and Anxiety (6.51); Epidemiology and Psychiatric Sciences (6.89); Evidence-Based Mental Health (8.54); JAACAP (8.83) JAMA Psychiatry (21.60); JCPP (8.98); Journal of Abnormal Psychology (6.67); Journal of Behavioral Addictions (6.76); Molecular Psychiatry (15.99); Neuropsychopharmacology (7.86); Psychological Medicine (7.72); Psychotherapy and Psychosomatics (17.66); Schizophrenia Bulletin (9.31); The Lancet Psychiatry (26.48); World Psychiatry (49.55) |

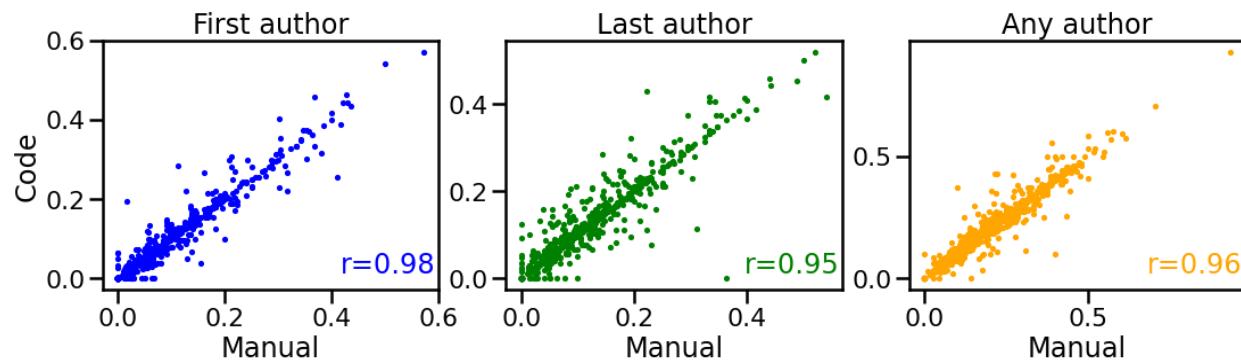
988 **Table S1.** All journals included in this analysis by field, sorted alphabetically.

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990 *S2. Manual scoring, field-based sensitivity analyses, and self-citation percentiles*

991

992 We manually scored the self-citation rates of 906 articles and compared them to the output of
993 our code.



994
995 **Figure S1.** Comparison between manual scoring of self-citation rates and self-citation rates estimated from Python
996 scripts in 5 Psychiatry journals: American Journal of Psychiatry, Biological Psychiatry, JAMA Psychiatry, Lancet
997 Psychiatry, and Molecular Psychiatry. 906 articles in total were manually evaluated (10 articles per journal per year
998 from 2000-2020, four articles excluded for very large author list lengths and thus high difficulty of manual scoring).
999 For manual scoring, we downloaded information about all references for a given article and searched for matching
1000 author names.

1001
1002 In addition, we computed self-citation rates by field using only authors considers neurologists,
1003 neuroscientists, and psychiatrists.

| Field | Field definition | First Author | Last Author |
|--------------|------------------|----------------------|----------------------|
| Neurology | By journal | 4.54 (4.36, 4.70) | 8.87 (8.52, 9.14) |
| | By author | 4.33 (4.14, 4.47) | 9.07 (8.71, 9.36) |
| Neuroscience | By journal | 3.41 (3.30, 3.51) | 7.54 (7.36, 7.73) |
| | By author | 3.62 (3.47, 3.74) | 8.32 (8.13, 8.51) |
| Psychiatry | By journal | 4.29 (4.11, 4.43) | 8.41 (8.16, 8.60) |
| | By author | 4.45 (4.24, 4.60) | 7.92 (7.58, 8.16) |

1004 **Table S2.** Comparisons of self-citation rates whether defining field by paper or by author.
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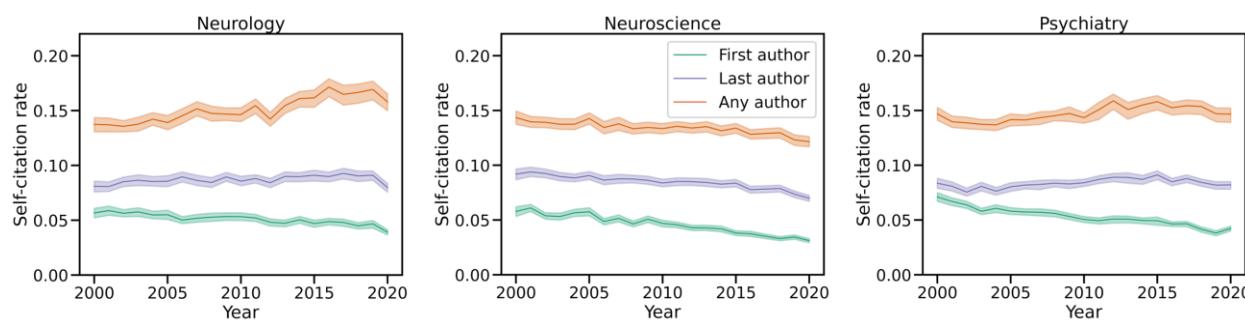
1017 Also, amongst all papers in the dataset from 2016-2020, we computed percentiles of self-
1018 citation rates.

| Percentile | First Author self-citation rate (%) | Last Author self-citation rate (%) | Any Author self-citation rate (%) |
|------------|-------------------------------------|------------------------------------|-----------------------------------|
| 1% | 0.00 | 0.00 | 0.00 |
| 5% | 0.00 | 0.00 | 0.00 |
| 10% | 0.00 | 0.00 | 2.38 |
| 25% | 0.00 | 2.44 | 6.67 |
| 50% | 2.86 | 7.14 | 13.51 |
| 75% | 7.69 | 13.79 | 22.72 |
| 90% | 15.00 | 21.95 | 33.33 |
| 95% | 20.83 | 28.21 | 41.18 |
| 99% | 35.71 | 41.94 | 58.33 |

1019 **Table S3.** Percentiles of self-citation rates in articles from 2016-2020.
1020

1021 *S3. Temporal trends in self-citation rate by field*

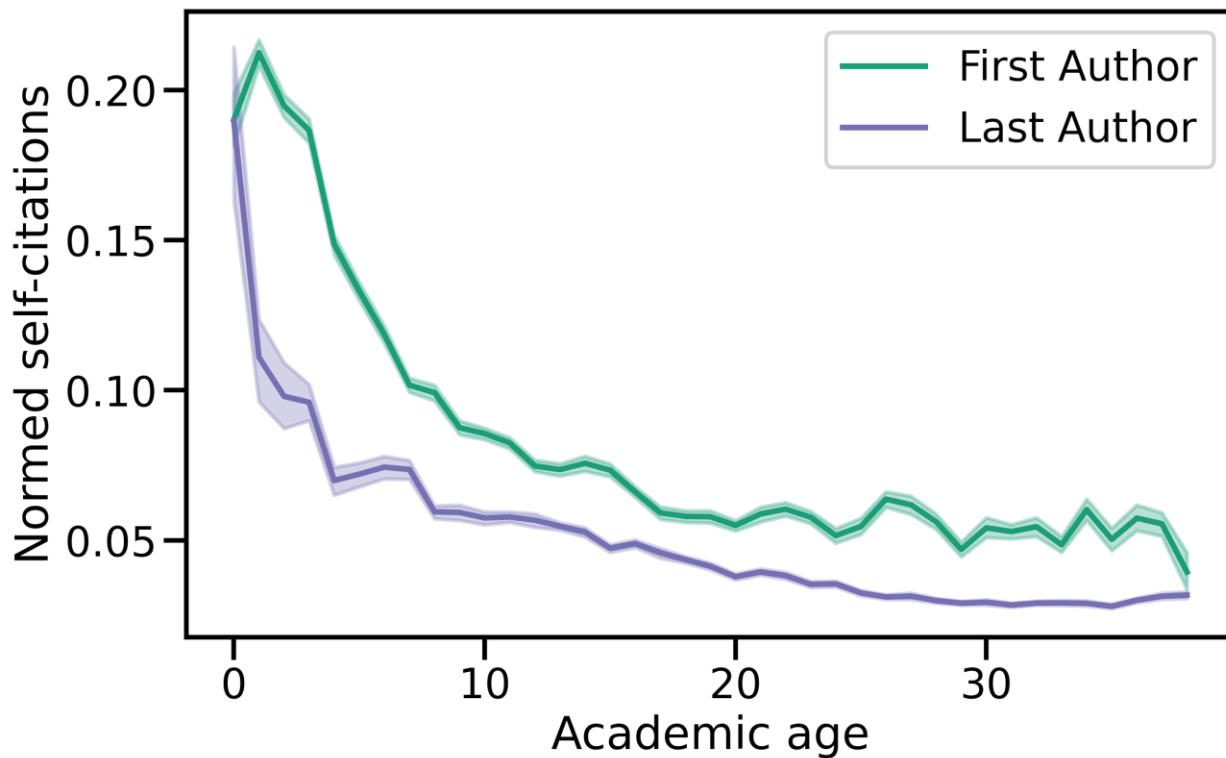
1022
1023 We repeated the analysis in Figure 1b after separating the papers into Neurology,
1024 Neuroscience, and Psychiatry. In addition, correlations and slopes between year and self-
1025 citation rate are reported in Table S4. Notably, Last Author and Any Author self-citation rates
1026 are increasing in Neurology and Psychiatry but decreasing in Neuroscience.
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1028



1029
1030 **Figure S2.** Temporal trends in First Author, Last Author, and Any Author self-citation rates from 2000-2020 in
1031 Neuroscience, and Psychiatry papers. Shaded regions show 95% confidence intervals calculated with
1032 bootstrap resampling.
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| | | Correlation | Slope (% per decade) |
|--------------|---------------------|----------------------|----------------------|
| Neurology | First Author | -0.86 (-0.92, -0.77) | -0.71 (-0.87, -0.54) |
| | Last Author | 0.43 (0.09, 0.67) | 0.30 (0.05, 0.53) |
| | Any Author | 0.87 (0.80, 0.93) | 1.68 (1.19, 2.08) |
| Neuroscience | First Author | -0.96 (-0.98, -0.94) | -1.40 (-1.51, -1.28) |
| | Last Author | -0.90 (-0.95, -0.85) | -0.94 (-1.10, -0.77) |
| | Any Author | -0.82 (-0.91, -0.70) | -0.80 (-1.06, -0.56) |
| Psychiatry | First Author | -0.95 (-0.97, -0.92) | -1.30 (-1.48, -1.15) |
| | Last Author | 0.51 (0.28, 0.68) | 0.36 (0.17, 0.53) |
| | Any Author | 0.66 (0.41, 0.80) | 0.76 (0.36, 1.06) |

1037 **Table S4.** Correlations between year and self-citation rate and corresponding slopes by field.
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1042 **Figure S3.** Average of normalized self-citation counts for each academic age in years 2016-2020. For the normed
1043 self-citation counts, the number of self-citations were divided by the number of previously published papers by the
1044 author.
1045

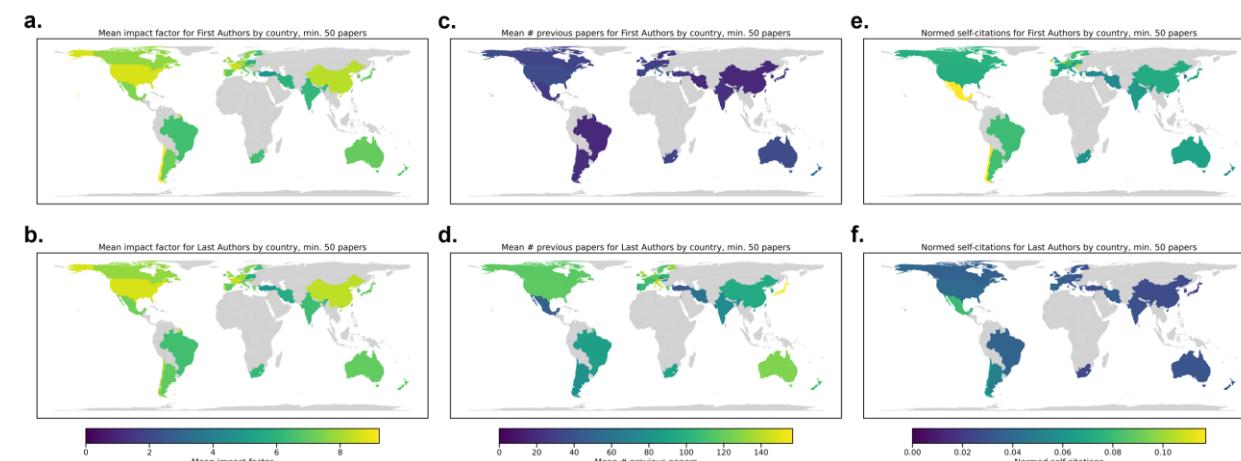
1046 S4. *Self-citation rates by country*
1047

| Country | First Author Self-citation Rate | Last Author Self-citation Rate |
|----------------|---------------------------------|--------------------------------|
| Argentina | 3.04 (2.59, 3.42) | 7.11 (5.72, 8.35) |
| Australia | 4.82 (4.51, 5.07) | 7.54 (6.96, 7.93) |
| Austria | 4.62 (3.68, 5.20) | 8.73 (7.24, 9.62) |
| Belgium | 4.61 (4.10, 5.04) | 7.58 (6.58, 8.21) |
| Brazil | 2.92 (2.60, 3.21) | 6.37 (5.54, 6.98) |
| Canada | 4.43 (4.23, 4.61) | 7.85 (7.55, 8.13) |
| Chile | 3.79 (2.87, 4.67) | 8.37 (5.37, 9.57) |
| China | 2.52 (2.31, 2.74) | 4.84 (4.51, 5.20) |
| Czech Republic | 3.84 (2.64, 4.93) | 4.85 (3.67, 6.16) |
| Denmark | 4.45 (4.07, 4.76) | 8.51 (7.69, 9.09) |
| Finland | 5.34 (4.82, 5.79) | 8.86 (8.08, 9.56) |
| France | 3.83 (3.63, 4.01) | 7.32 (6.97, 7.62) |
| Germany | 4.79 (4.63, 4.95) | 8.61 (8.37, 8.83) |
| Greece | 4.36 (3.63, 5.05) | 5.91 (4.56, 6.99) |
| Hong Kong | 4.72 (3.32, 5.87) | 6.83 (5.74, 8.15) |
| Hungary | 5.10 (4.03, 5.98) | 6.44 (5.31, 7.55) |
| India | 3.29 (2.50, 3.96) | 5.00 (3.77, 5.89) |
| Ireland | 3.67 (3.20, 4.11) | 8.12 (6.93, 8.96) |
| Iran | 1.87 (1.24, 2.42) | 3.78 (2.40, 4.90) |
| Israel | 4.68 (4.20, 5.11) | 9.00 (8.16, 9.70) |
| Italy | 5.65 (5.35, 5.90) | 8.08 (7.57, 8.46) |
| Japan | 5.25 (4.87, 5.55) | 8.05 (7.59, 8.43) |
| South Korea | 2.93 (2.50, 3.28) | 5.47 (4.92, 5.95) |
| Mexico | 5.92 (3.56, 7.21) | 7.01 (4.76, 8.11) |

| | | |
|----------------|-------------------|-------------------|
| Netherlands | 3.97 (3.81, 4.16) | 7.92 (7.41, 8.29) |
| New Zealand | 5.34 (4.44, 6.11) | 6.52 (5.60, 7.31) |
| Norway | 4.90 (4.23, 5.39) | 8.83 (7.43, 9.88) |
| Poland | 3.98 (3.27, 4.63) | 6.31 (5.21, 7.36) |
| Portugal | 2.85 (2.31, 3.26) | 5.42 (4.39, 6.27) |
| Singapore | 3.80 (2.60, 4.77) | 7.54 (4.23, 9.13) |
| South Africa | 3.44 (2.47, 4.40) | 4.77 (3.79, 5.89) |
| Spain | 4.47 (4.20, 4.72) | 7.83 (7.35, 8.25) |
| Sweden | 4.89 (4.53, 5.24) | 9.03 (8.66, 9.42) |
| Switzerland | 4.55 (4.26, 4.85) | 7.72 (7.31, 8.18) |
| Taiwan | 4.17 (3.07, 5.01) | 6.66 (4.62, 8.02) |
| Turkey | 3.51 (2.72, 4.18) | 2.79 (2.20, 3.38) |
| United Kingdom | 5.02 (4.84, 5.18) | 8.88 (8.57, 9.10) |
| United States | 5.09 (4.99, 5.17) | 8.97 (8.84, 9.08) |

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Table S5. First Author and Last Author self-citation rates by affiliation country of the author for papers from 2016-2020. 95% confidence intervals obtained via bootstrap resampling are included in parentheses. Only countries with at least 50 papers were included in the analysis.

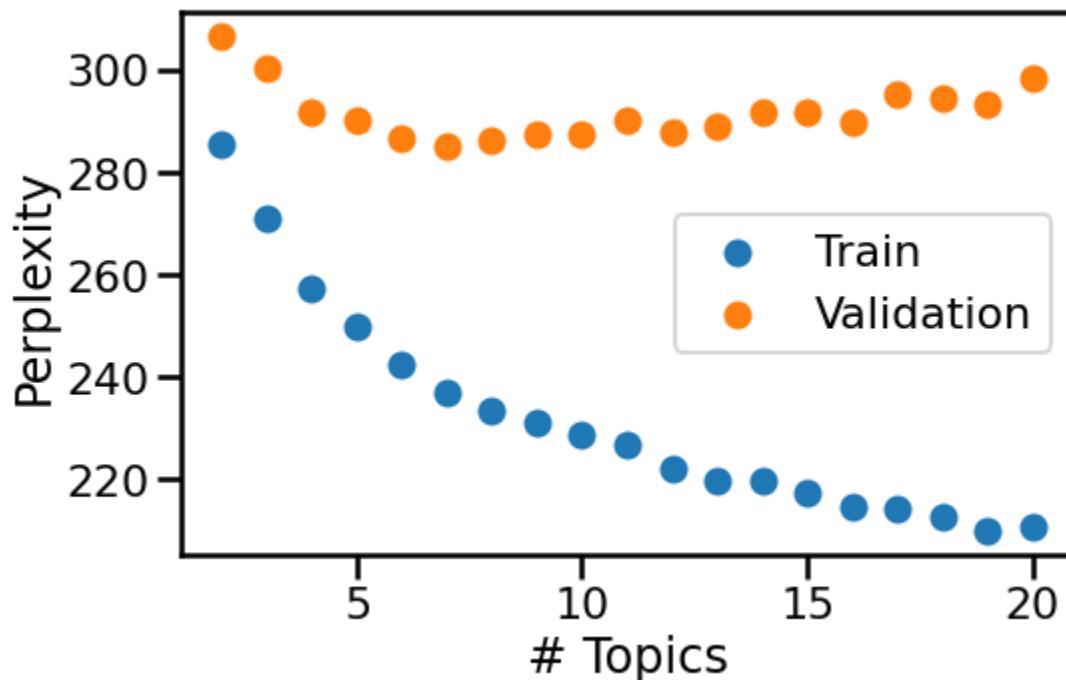


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Figure S4. Mean impact factor by country for **a)** First Authors and **b)** Last Authors. Mean number of previous papers by country for **c)** First Authors and **d)** Last Authors. Normed number of self-citations for **e)** First Authors and **f)** Last Authors. The normed self-citation rate was computed as the number of self-citations divided by the number of previously published papers.

1060 S5. Latent dirichlet allocation

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Figure S5. LDA perplexity on training and validation data for a different number of topics. The lowest validation perplexity was for seven topics.

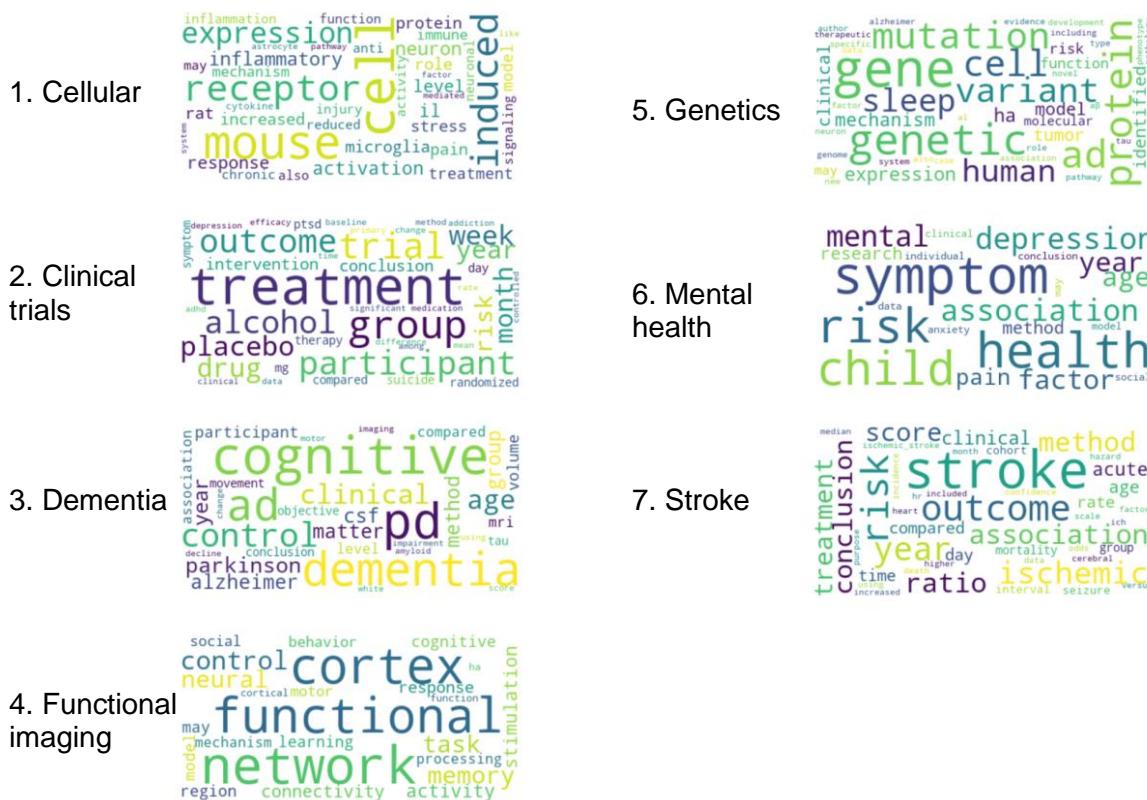
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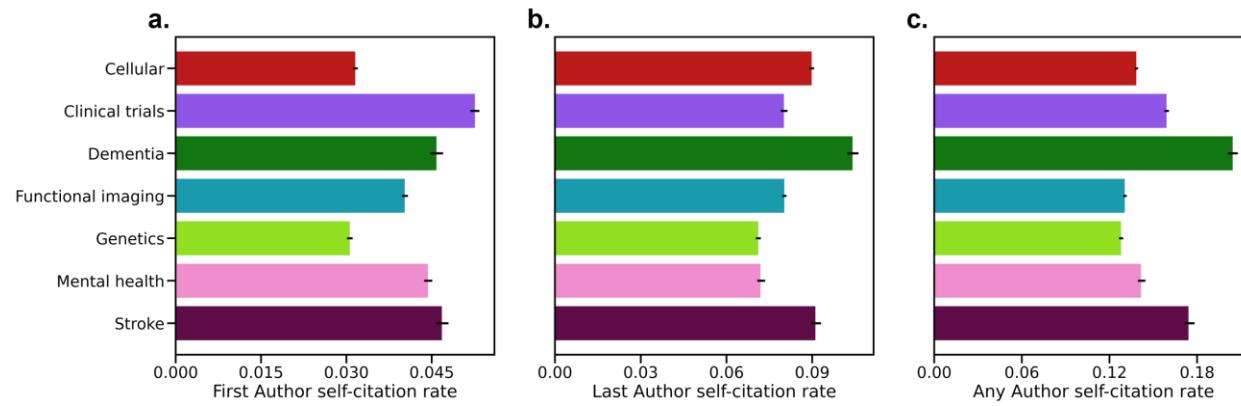
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Figure S6. Topic word clouds for 13 topics. These are the most common words appearing in each of our LDA model topics. Based on the word clouds, we assigned overall themes, or topic names.



1075
1076 **Figure S7.** Topic word clouds for seven topics. These are the most common words appearing in each of our LDA
1077 model topics. Based on the word clouds, we assigned overall themes, or topic names.
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The results for self-citation rates with seven topics show similar trends as the results for 13 topics. For example, both Clinical trials and Dementia have high self-citation rates whether using seven or 13 topics.



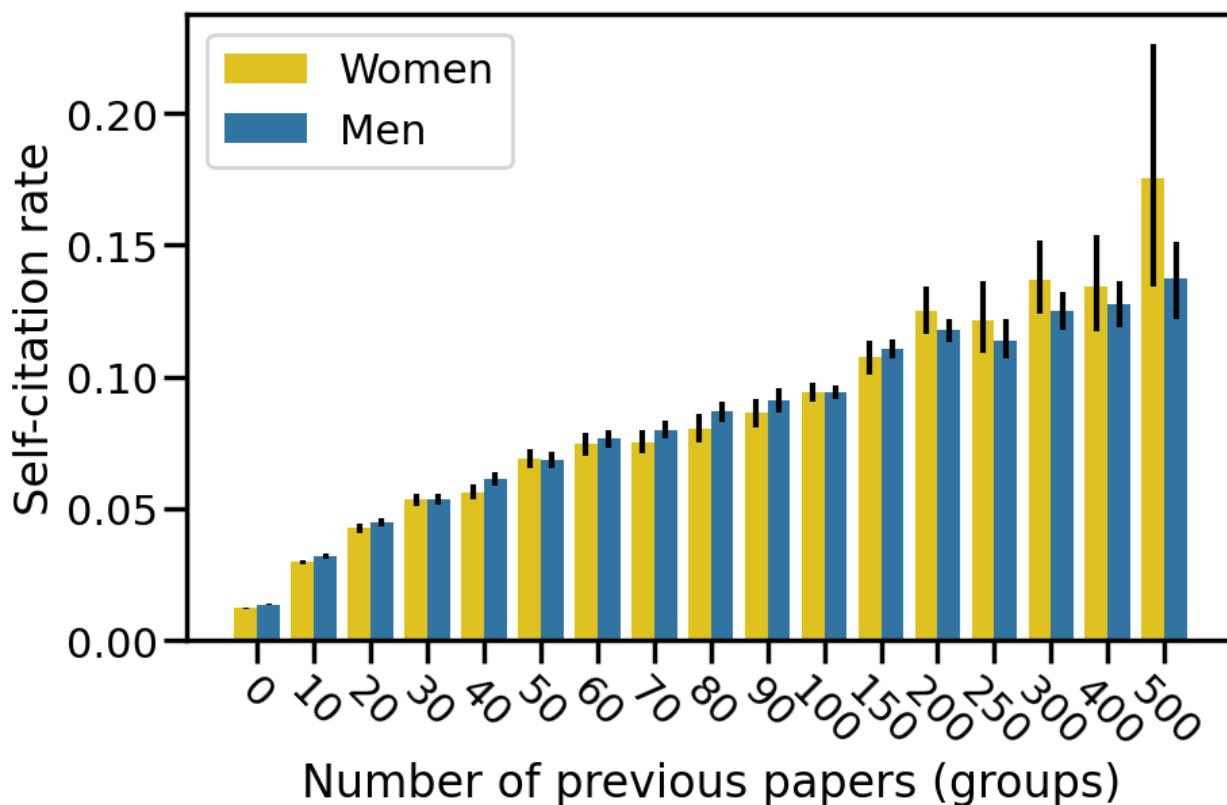
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1084 **Figure S8. a)** First Author, **b)** Last Author, and **c)** Any Author self-citation rates for seven topics.
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1093 S6. Comparison of self-citation rates by gender for a given number of papers

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1095 We categorized authors based on the number of previous papers they had at the time of
1096 publication. We then evaluated the self-citation rates by the number of papers for women and
1097 men. This included a binned evaluation (Figure S7a) and an evaluation using a moving average
1098 window (Figure S7b).

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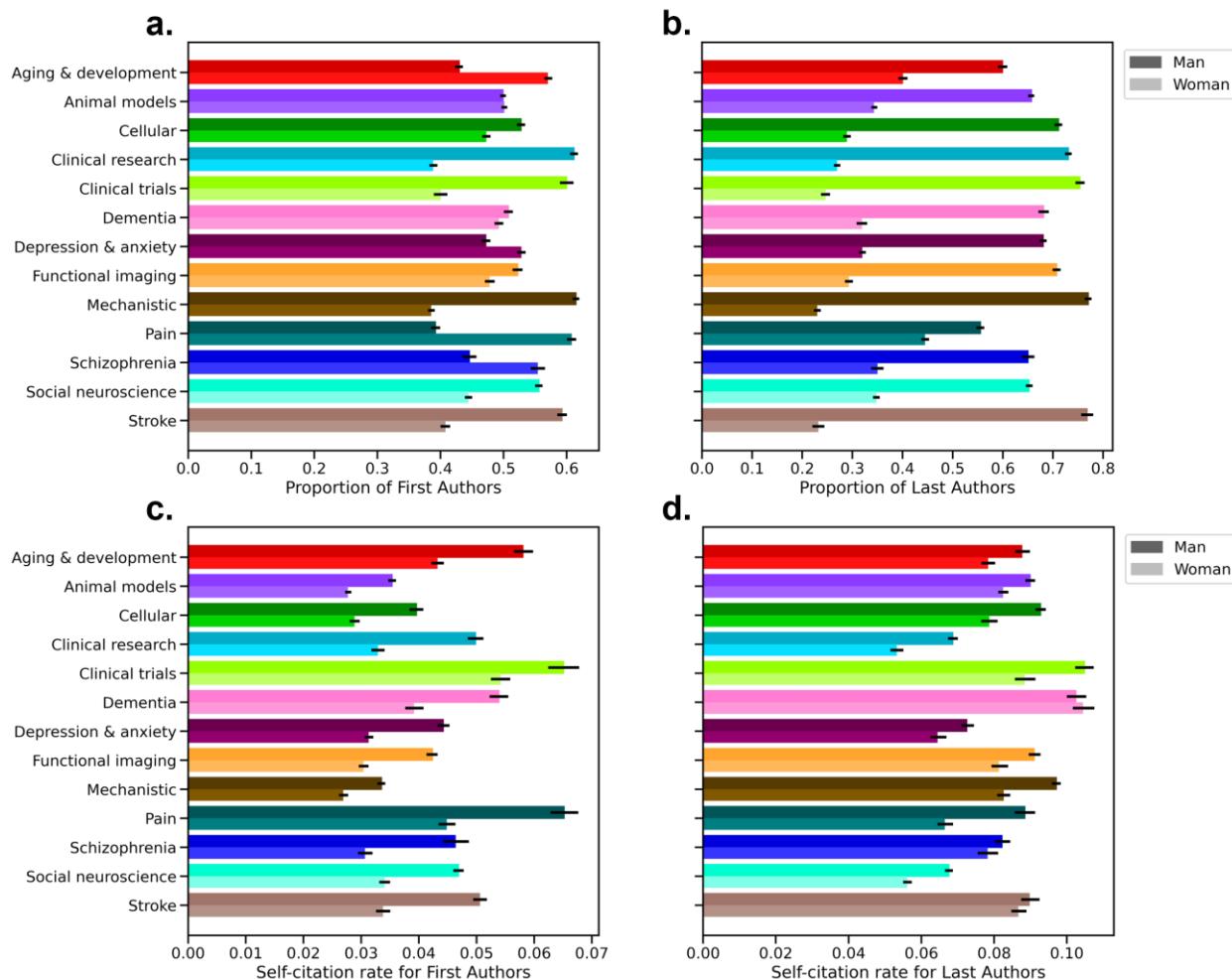
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Figure S9. Self-citation rates by number of papers for women and men. Self-citation rates were grouped in bins by number of previous papers: 0-9, 10-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70-79, 80-89, 90-99, 100-149, 150-199, 200-249, 250-299, 300-399, 400-499, >500. Error bars reflect 95% confidence intervals obtained with bootstrap resampling.



1106
1107 **Figure S10.** Topic and gender interactions. Proportion of men and women authors by each topic for **a)** First Authors
1108 and **b)** Last Authors. Average self-citation rates for men and women authors by each topic for **c)** First Authors and
1109 **d)** Last Authors. Darker shades (top bar in each pair) are aggregated across men, and lighter shades (bottom bar in
1110 each pair) are aggregated across women.

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1129 S7. Self-citation rates models

| | | Count | | Rate | |
|-------------------------|--------------|----------------------|---------------------|---------------------|-----------------------|
| | | First Author | Last Author | First Author | Last Author |
| Adjusted R ² | | 0.507 | 0.354 | 0.347 | 0.208 |
| Deviance explained | | 50.1% | 38.9% | 40.9% | 25.7% |
| Intercept | | -0.096** (P=4.3e-8) | 0.467*** (P<2e-16) | -3.817*** (P<2e-16) | -3.222*** (P<2e-16) |
| Field | Neurology | -0.089*** (P<2e-16) | -0.021 (P=0.098) | -0.124*** (P<2e-16) | -0.058** (P=6.4e-6) |
| | Neuroscience | 0.150*** (P<2e-16) | 0.200*** (P<2e-16) | 0.120*** (P<2e-16) | 0.204*** (P<2e-16) |
| | Psychiatry | 0 | 0 | 0 | 0 |
| Continent | Africa | 0.162 (P=0.069) | 0.211* (P=0.027) | 0.290* (P=0.001) | 0.357* (P=2.1e-4) |
| | Americas | 0.125*** (P=3.1e-15) | 0.309*** (P<2e-16) | 0.162*** (P<2e-16) | 0.320*** (P<2e-16) |
| | Asia | 0 | 0 | 0 | 0 |
| | Europe | 0.162*** (P<2e-16) | 0.256*** (P<2e-16) | 0.198*** (P<2e-16) | 0.270*** (P<2e-16) |
| | Oceania | 0.170*** (P=4.7e-12) | 0.187** (P=1.7e-10) | 0.231*** (P<2e-16) | -0.234*** (P=5.0e-14) |
| Gender | Woman | 0 | 0 | 0 | 0 |
| | Man | -0.003 (P=0.703) | -0.024* (P=0.026) | -0.017 (P=0.059) | -0.036* (P=0.002) |
| Document type | Article | 0 | 0 | 0 | 0 |
| | Review | -0.047** (P=1e-4) | -0.139*** (P<2e-16) | -0.073** (P=9.7e-7) | -0.146*** (P<2e-16) |

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Table S6. Models with affiliation continent instead of low- and middle-income country terms. *P<0.05, **P<1e-5,

1131 ***P<1e-10.

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| Field | Count | | Rate | | Number of papers | |
|---------------------------|-----------------------|--------------------|---------------------|---------------------|---------------------|----------------------|
| | First Author | Last Author | First Author | Last Author | First Author | Last Author |
| Neurology (by journal) | -0.093*** (P<2e-16) | -0.025* (P=0.046) | -0.131*** (P<2e-16) | -0.062** (P=1.4e-6) | 0.026* (P=3.7e-4) | 0.068*** (P=4.0e-15) |
| Neurology (by author) | -0.091*** (P=2.9e-16) | -0.002 (P=0.85) | -0.154*** (P<2e-16) | -0.054* (P=2.2e-4) | -0.016* (P=0.034) | 0.042* (P=1.7e-5) |
| Neuroscience (by journal) | 0.147*** (P<2e-16) | 0.184*** (P<2e-16) | 0.112*** (P<2e-16) | 0.186*** (P<2e-16) | -0.195*** (P<2e-16) | -0.122*** (P<2e-16) |
| Neuroscience (by author) | 0.248*** (P<2e-16) | 0.357*** (P<2e-16) | 0.191*** (P<2e-16) | 0.312*** (P<2e-16) | -0.340*** (P<2e-16) | -0.253*** (P<2e-16) |
| Psychiatry (by journal) | 0 | 0 | 0 | 0 | 0 | 0 |
| Psychiatry (by author) | 0 | 0 | 0 | 0 | 0 | 0 |

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Table S7. Coefficients for field when defining fields based on the publication history of authors rather than the journal.

1134 *P<0.05, **P<1e-5, ***P<1e-10.

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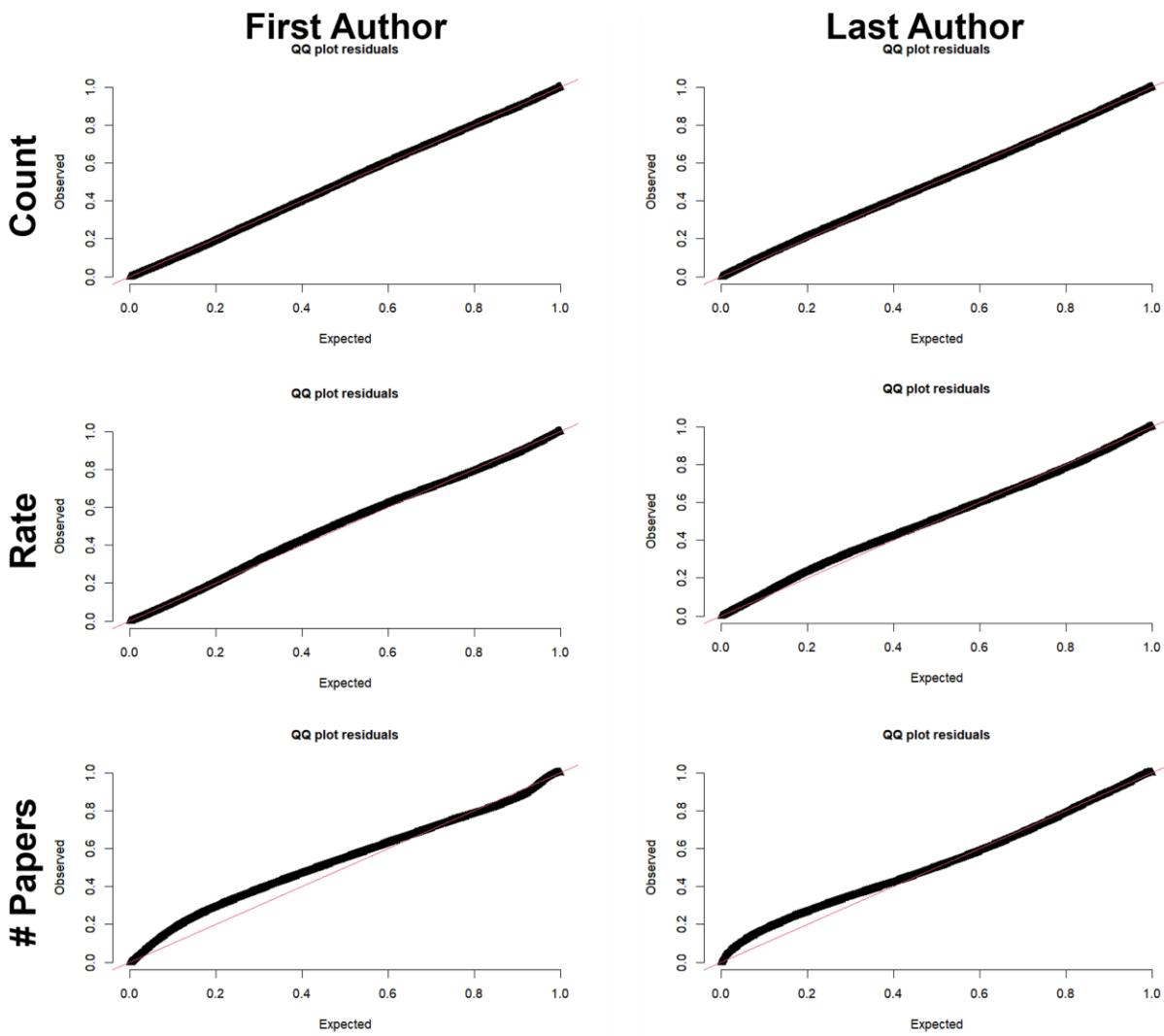
| | | Count | | Rate | | Number of papers | |
|----------------------------------|--------------|---------------------|---------------------|---------------------|---------------------|---------------------|----------------------|
| | | First Author | Last Author | First Author | Last Author | First Author | Last Author |
| Adjusted R ² | | 0.509 | 0.353 | 0.349 | 0.204 | 0.565 | 0.4 |
| Deviance explained | | 50.1% | 38.6% | 40.9% | 25.4% | 72.5% | 55.7% |
| Intercept | | 0.034* (P=0.001) | 0.748*** (P<2e-16) | -3.645*** (P<2e-16) | -2.926*** (P<2e-16) | 2.306*** (P<2e-16) | 3.724*** (P<2e-16) |
| Field | Neurology | -0.094*** (P<2e-16) | -0.026* (P=0.045) | -0.132*** (P<2e-16) | -0.062** (P=1.3e-6) | 0.026* (P=3.8e-4) | 0.068*** (P=3.8e-15) |
| | Neuroscience | 0.146*** (P<2e-16) | 0.185*** (P<2e-16) | 0.112*** (P<2e-16) | 0.186*** (P<2e-16) | -0.195*** (P<2e-16) | -0.122*** (P<2e-16) |
| | Psychiatry | 0 | 0 | 0 | 0 | 0 | 0 |
| Low-middle income country status | No | 0 | 0 | 0 | 0 | 0 | 0 |
| | Yes | -0.118** (P=7.4e-8) | -0.242*** (P<2e-16) | -0.128** (P=8.0e-8) | -0.237*** (P<2e-16) | 0.073* (P=1.4e-5) | 0.009 (P=0.628) |
| Gender | Woman | 0 | 0 | 0 | 0 | 0 | 0 |
| | Man | 0.019 (P=0.107) | -0.031* (P=0.023) | -0.001 (P=0.911) | -0.048* (P=0.001) | 0.223*** (P<2e-16) | 0.254*** (P<2e-16) |
| Document type | Article | 0 | 0 | 0 | 0 | 0 | 0 |
| | Review | -0.040* (P=0.001) | -0.139*** (P<2e-16) | -0.063* (P=1.3e-5) | -0.142*** (P<2e-16) | 0.151*** (P<2e-16) | -0.019* (P=0.046) |

1136 **Table S8.** Models with interaction terms for between gender/academic age and gender/number of previous papers.
 1137 *P<0.05, **P<1e-5, ***P<1e-10.

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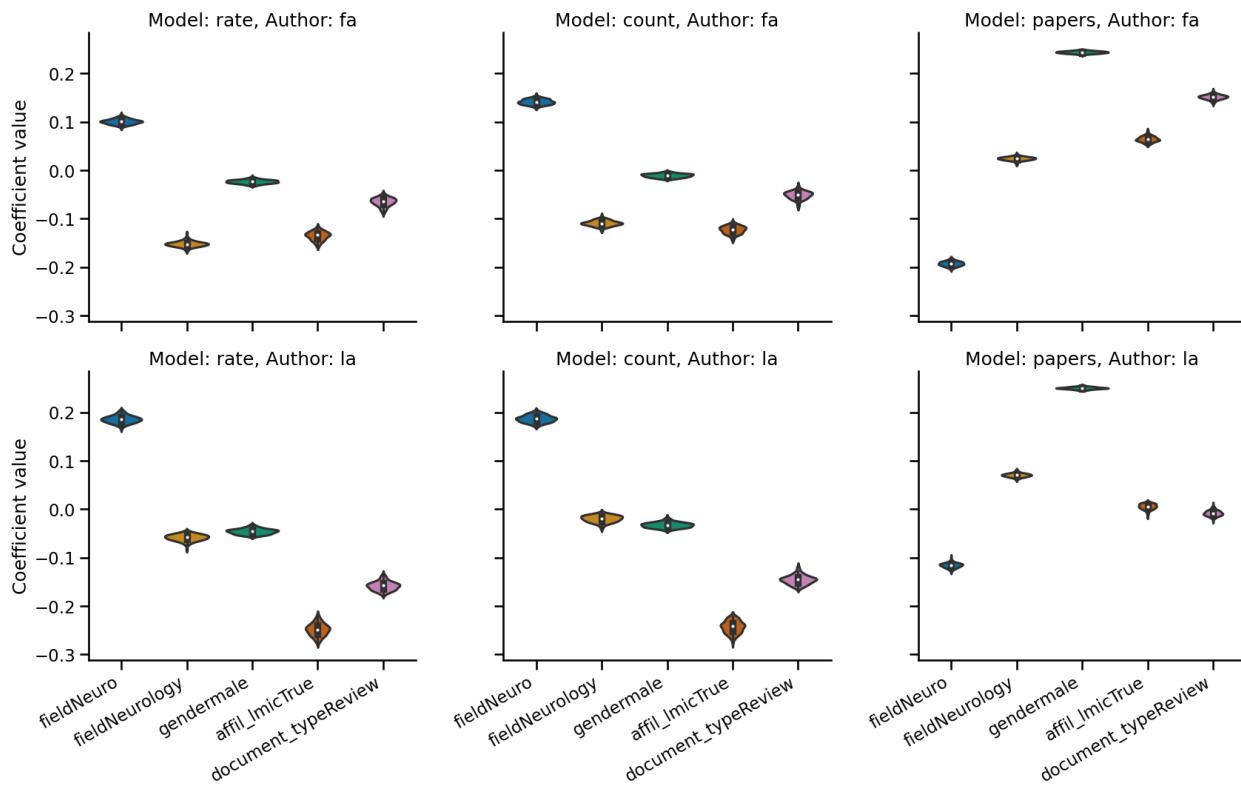


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Figure S11. Quantile-quantile plots for all models. The plots were generated with a simulation-based approach using the DHARMA package in R.

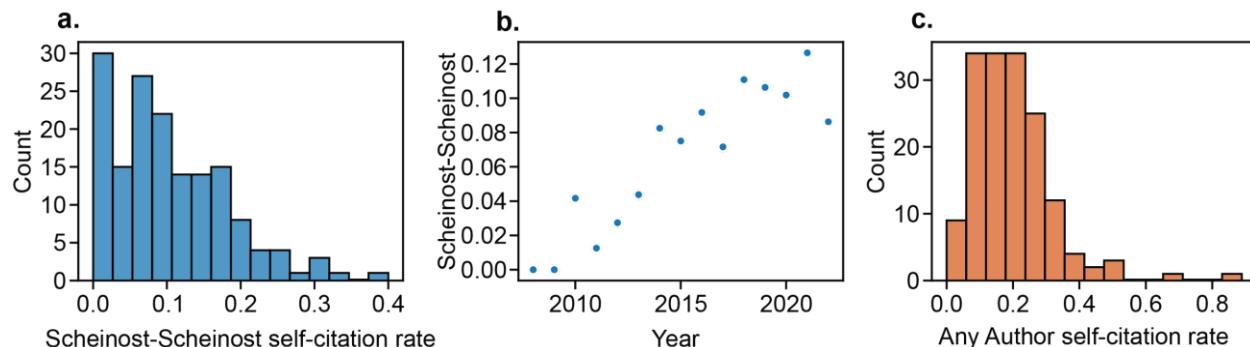
| | Count | | Rate | | Number of papers | |
|----------------|---------------------------------------|---------------------------------------|--|--------------------------------------|--|--|
| | First Author | Last Author | First Author | Last Author | First Author | Last Author |
| Uniformity | D=0.010 (P=3.1e-6) | D=0.016 (P=1.4e-9) | D=0.030 (P<2.2e-16) | D=0.041 (P<2.2e-16) | D=0.097 (P<2.2e-16) | D=0.078 (P<2.2e-16) |
| Outliers | 0.009 outlier frequency (P=1.2e-5) | 0.010 outlier frequency (P=5.0e-4) | 0.011 outlier frequency (P=4.0e-14) | 0.009 outlier frequency (P=0.004) | 0.013 outlier frequency (P<2.2e-16) | 0.012 outlier frequency (P<2.2e-16) |
| Dispersion | dispersion=1.358 (P<2.2e-16) | dispersion=1.211 (P<2.2e-16) | dispersion=1.251 (P<2.2e-16) | dispersion=1.058 (P<2.2e-16) | dispersion=1.775 (P<2.2e-16) | dispersion=1.258 (P<2.2e-16) |
| Zero Inflation | ratio=0.977 (P<2.2e-16) | ratio=0.858 (P<2.2e-16) | ratio=0.913 (P<2.2e-16) | ratio=0.806 (P<2.2e-16) | ratio=0.250 (P<2.2e-16) | ratio=0.173 (P<2.2e-16) |

1146 **Table S9.** Tests for uniformity, outliers, and dispersion in models. Tests were performed using the DHARMA package
1147 in R. Uniformity: Asymptotic one-sample Kolmogorov-Smirnov test. DHARMA outlier test based on exact binomial test
1148 with approximate expectations. DHARMA nonparametric dispersion test via sd of residuals fitted vs. simulated.
1149 DHARMA zero-inflation test via comparison to expected zeros with simulation under H_0 = fitted model
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1154 **Figure S12.** Values for parametric terms in models across 100 random resamplings.
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1156 *S8. Self-citation tool*
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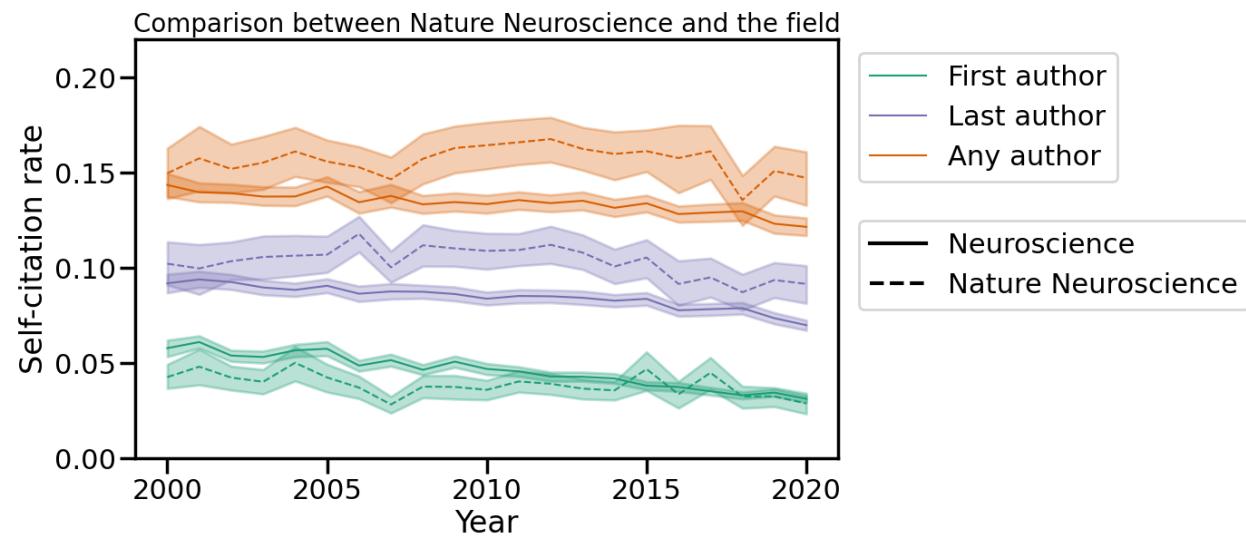
1158 Along with evaluating self-citation rates by topic, we also investigated self-citation rates for a
1159 particular author, in this case Dustin Scheinost. Dr. Scheinost permitted us to use his name and
1160 self-citation data in this work. We show a histogram of self-citations by paper (Figure S9a), the
1161 self-citation rates over time (Figure S9b), and the histogram of Any Author self-citation rates for
1162 all of Dr. Scheinost's papers (Figure S9c).
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1166 Scheinost-Scheinost self-citation rate
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Figure S13. Single author self-citation rates for Dustin Scheinost. **a)** Histogram of Scheinost-Scheinost self-citation rates, which were computed as the proportion of references with Scheinost as an author across every paper. **b)** Scheinost-Scheinost self-citation rate over time. **c)** Any Author self-citation rates for all papers with Scheinost as an author.

Self-citation rates for particular authors may be of interest for authors to evaluate and regulate their self-citations and to better understand individual trajectories in self-citation rates. Furthermore, these methods can be extended to evaluate self-citation rates at the level of a country, institute, or journal. For instance, we compared self-citation rates in *Nature Neuroscience* to the overall field of Neuroscience (Figure S10). In general, Last Author and Any Author self-citation rates were higher in *Nature Neuroscience* compared to the field. First Author self-citation rates used to be lower in *Nature Neuroscience* (e.g., Year 2000) but are now approximately equal to that of the field.



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Figure S14. Comparison of self-citation rates in the entire field of Neuroscience and the journal *Nature Neuroscience*.

1193 S9. Additional data details

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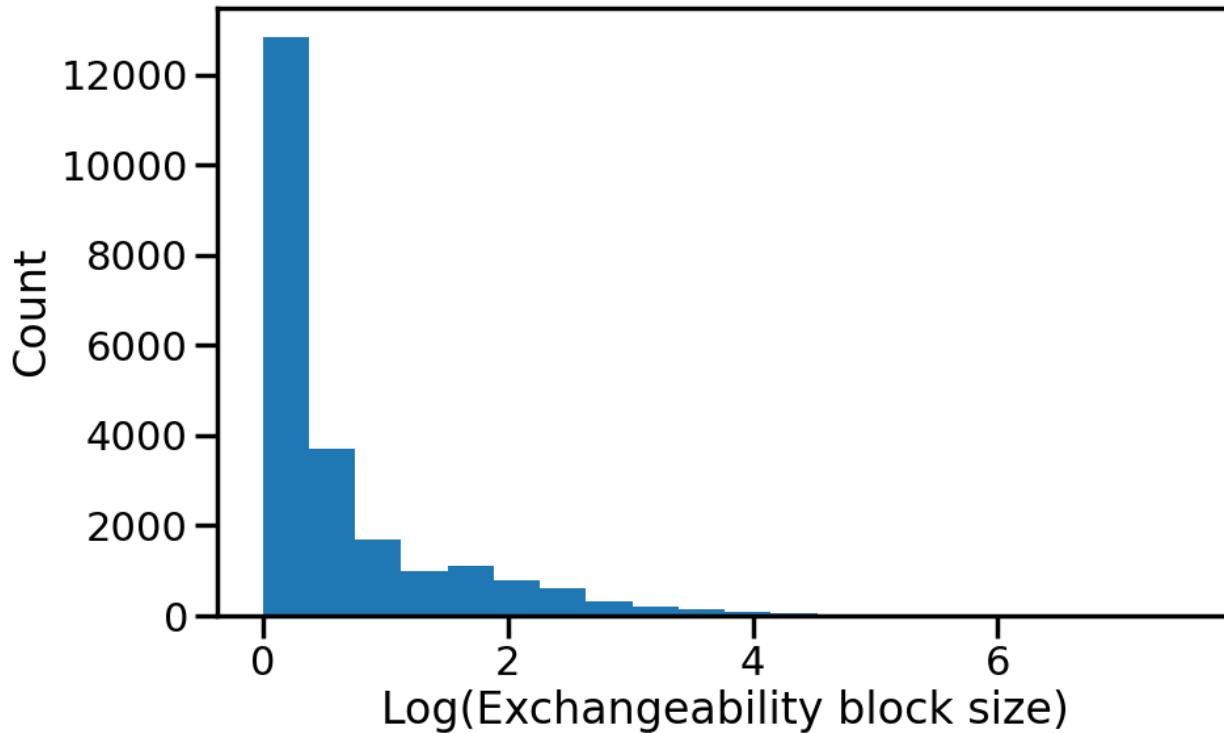
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| | | Ratio of prevalence in missing to non-missing data | |
|----------------------------------|--------------|--|-------------|
| | | First Author | Last Author |
| Document type | Article | 0.994 | |
| | Review | 1.029 | |
| Field | Neurology | 1.204 | |
| | Neuroscience | 0.888 | |
| | Psychiatry | 0.900 | |
| Continent | Africa | 1.308 | 1.329 |
| | Americas | 0.973 | 0.979 |
| | Asia | 1.562 | 1.570 |
| | Europe | 0.909 | 0.908 |
| | Oceania | 0.926 | 0.914 |
| Low-middle income country status | No | 0.972 | 0.976 |
| | Yes | 1.615 | 1.608 |
| Gender | Woman | 0.864 | 0.922 |
| | Man | 1.089 | 1.026 |

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Table S10. Data missingness.

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1199 **Figure S15.** Distribution of the natural log of exchangeability block size.

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1202 *S10. Summary of all comparisons*

| Comparison | Method | Uncorrected <i>P</i> | Corrected <i>P</i> | Finding |
|---|-------------|----------------------|--------------------|-----------------------------|
| First vs Last Author self-citation (all fields) | permutation | 1e-4 | 2.9e-4 | * Last > First |
| First vs Last Author self-citation (Neurology) | permutation | 1e-4 | 2.9e-4 | * Last > First |
| First vs Last Author self-citation (Neuroscience) | permutation | 1e-4 | 2.9e-4 | * Last > First |
| First vs Last Author self-citation (Psychiatry) | permutation | 1e-4 | 2.9e-4 | * Last > First |
| First Author: Neurology vs. Neuroscience | permutation | 1e-4 | 2.9e-4 | * Neurology > Neuroscience |
| First Author: Neuroscience vs. Psychiatry | permutation | 1e-4 | 2.9e-4 | * Psychiatry > Neuroscience |
| First Author: Neurology vs. Psychiatry | permutation | 0.095 | 0.144 | No significant difference |
| Last Author: Neurology vs. Neuroscience | permutation | 1e-4 | 2.9e-4 | * Neurology > Neuroscience |
| Last Author: Neuroscience vs. Psychiatry | permutation | 1e-4 | 2.9e-4 | * Psychiatry > Neuroscience |
| Last Author: Neurology vs. Psychiatry | permutation | 0.078 | 0.123 | No significant difference |
| Any Author: Neurology vs. Neuroscience | permutation | 1e-4 | 2.9e-4 | * Neurology > Neuroscience |
| Any Author: Neuroscience vs. Psychiatry | permutation | 1e-4 | 2.9e-4 | * Psychiatry > Neuroscience |
| Any Author: Neurology vs. Psychiatry | permutation | 0.005 | 0.010 | * Neurology > Psychiatry |

| | | | | | |
|--|-------------|-------------|---------|---------------------------------|---------------------------|
| Slope over the years: First Author | correlation | 2.1e-15 | 9.2e-14 | * $m = -1.21\% / \text{decade}$ | |
| Slope over the years: Last Author | correlation | 0.074 | 0.123 | No significant correlation | |
| Slope over the years: Any Author | correlation | 0.012 | 0.024 | No significant correlation | |
| Country-level self-citation rate and number of previous papers: First Author | correlation | 1.5e-4 | 4.1e-4 | *Spearman's $r=0.576$ | |
| Country-level self-citation rate and number of previous papers: Last Author | correlation | 8.0e-7 | 1.8e-5 | *Spearman's $r=0.654$ | |
| Country-level self-citation rate and impact factor: First Author | correlation | 0.347 | 0.424 | No significant correlation | |
| Country-level self-citation rate and impact factor: Last Author | correlation | 0.007 | 0.014 | *Spearman's $r=0.428$ | |
| First Author: Spearman's correlation between topic self-citation and number of authors | correlation | 0.915 | 0.929 | No significant correlation | |
| Last Author: Spearman's correlation between topic self-citation and number of authors | correlation | 0.003 | 0.007 | *Spearman's $r=0.758$ | |
| Any Author: Spearman's correlation between topic self-citation and number of authors | correlation | 0.004 | 0.009 | *Spearman's $r=0.736$ | |
| Men vs. Women, First Author self-citation rate, 2020 | permutation | 1e-4 | 2.9e-4 | * Men > Women | |
| Men vs. Women, Last Author self-citation rate, 2020 | permutation | 4e-4 | 0.001 | * Men > Women | |
| Early career men vs. women, self-citation rate | permutation | 1e-4 | 2.9e-4 | * Men > Women | |
| Early career men vs. women, number of papers | permutation | 1e-4 | 2.9e-4 | * Men > Women | |
| Early career men vs. women self-citation rate by number of papers | 0-9 papers | permutation | 3.0e-4 | 7.8e-4 | * Men > Women |
| | 10-19 | permutation | 0.019 | 0.034 | * Men > Women |
| | 20-29 | permutation | 0.174 | 0.248 | No significant difference |
| | 30-39 | permutation | 0.855 | 0.918 | No significant difference |
| | 40-49 | permutation | 0.035 | 0.062 | No significant difference |
| | 50-59 | permutation | 0.888 | 0.929 | No significant difference |
| | 60-69 | permutation | 0.508 | 0.588 | No significant difference |
| | 70-79 | permutation | 0.272 | 0.342 | No significant difference |
| | 80-89 | permutation | 0.175 | 0.248 | No significant difference |
| | 90-99 | permutation | 0.399 | 0.475 | No significant difference |

| | | | | | |
|--|---------|-------------|-------|-------|---------------------------|
| | 100-149 | permutation | 0.929 | 0.929 | No significant difference |
| | 150-199 | permutation | 0.824 | 0.906 | No significant difference |
| | 200-249 | permutation | 0.264 | 0.342 | No significant difference |
| | 250-299 | permutation | 0.196 | 0.269 | No significant difference |
| | 300-399 | permutation | 0.264 | 0.342 | No significant difference |
| | 400-499 | permutation | 0.716 | 0.808 | No significant difference |
| | >=500 | permutation | 0.075 | 0.123 | No significant difference |

1203 **Table S11.** *P* values for all 44 comparisons performed in this study. *P* values are corrected for multiple comparisons
1204 with the Benjamini/Hochberg false discovery rate (FDR) correction with $\alpha=0.05$. For *P* values determined by
1205 permutation testing, 10,000 permutations were used. Significant values ($P_{\text{corrected}}<0.05$) are marked with an asterisk in
1206 the "Finding" column.

1207

1208 S11. Subfield to field mapping

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| Field | Scopus-defined Subfields |
|--------------|--|
| Neurology | Neurology; Neurology (clinical) |
| Neuroscience | Cognitive Neuroscience; Neuroscience (all); Cellular and Molecular Neuroscience; Behavioral Neuroscience; Neuropsychology and Physiological Psychology; Developmental Neuroscience; Neuroscience (miscellaneous) |
| Psychiatry | Biological Psychiatry; Psychiatric Mental Health; Psychiatry and Mental Health |

1210 **Table S12.** Mapping of subfields to fields.

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