

THE ROLE OF THE MEDICAL JOURNAL

In recent months, much debate has taken place regarding the source and declaration of research funding of studies published in medical journals. This followed the decision by the *British Medical Journal (BMJ)* to publish a study which suggested that the harmful effects of environmental tobacco smoke, or passive smoking, may be less serious than had been thought, in terms of both overall mortality and the strength of association between environmental tobacco smoke and coronary heart disease and lung cancer.¹ It was not so much the publication of these findings *per se* that caused concern, but the fact that the research underpinning this study had been funded by the tobacco industry.^{2,3}

Tobacco-related disease is clearly an emotive issue, particularly when a causal link has been established between smoking and ill-health and when the resulting global burden of disease is taken into account. When considering a paper for publication on this, or any other, clinical area, medical journals have a responsibility to screen submitted papers for bias, to ensure that papers are rigorously peer reviewed and also to ensure that all relevant interests of the authors are declared. In parallel to this procedural consideration of a submitted paper, there is also an underlying moral responsibility with which journal editors are faced – namely, to decide if a paper which has met the criteria for publication should be published both in the interests of contributing to medical and scientific understanding and in the wider public interest, even if it is likely to be deemed controversial or be opposed by those sharing a different scientific opinion.

It is not for *The Journal* to comment on the scientific validity of the passive smoking paper. We cannot, however, ignore or condone the level of hostility that was directed towards, and the personal vilification of, the *BMJ* editor, following the publication of this paper (as evidenced by subsequent correspondence posted on the *BMJ* website⁴). Such actions threaten to undermine not only the *BMJ* as a publication, but also the role and integrity of the medical journal as an entity.

It is clear that the source of research funding of any study could be seen to be prejudicial to its outcome. This is, however, as applicable to research funded by the tobacco industry as it is to research funded by the pharmaceutical industry (perhaps the main source of funding for current clinical research) or by charities established to fund research into specific disease areas.

Whilst it is appreciated that this could be seen, by some, to be a provocative or simplistic statement, and it could be argued that there is a fundamental difference in intent between medical research funded with the intention of preventing or curing disease and research which has been perceived to originate through commercial motivation, principles aimed at eliminating bias have to be applied on an equitable basis regardless of the source of funding. For this reason, journal contributors are required to declare all relevant interests, the methodology behind studies reported in submitted papers has to be transparently documented and, if a paper passes the peer-review process and is published, it is for the reader to make an informed decision as to what extent the source of the research funding could have influenced the findings. Equally, the open declaration of interests is not just restricted to funding, but to any significant interest which could be prejudicial to the outcome of published research.

Whilst ideally only research that has been funded on an entirely independent basis would be published, it is perhaps the norm for clinicians and researchers to find themselves with limited opportunities for funding and thus entering commercial arrangements whereby funding is accepted from an interested party, but for which a robust methodology has to be developed so as to provide separation between the funding source and the results – as is common practice with modern-day clinical trials. If we were to follow the argument regarding prejudicial sources of funding to its logical conclusion one cannot help but feel that very little clinical or academic research would be undertaken, the evolution of medical and scientific knowledge would grind to a halt and the publication of original research would cease to be a viable venture, resulting in the demise of journal publishing as we know it. Alternatively, the adoption of a form of self-censorship, by which journals could only publish research funded by 'politically acceptable' sources, would result in an imbalance in published research and a skewing of subsequent clinical recommendations and guidance.

But what of the readership of journals? Are we to assume, from this recent exchange, that journal readers are incapable of original thought and of exercising judgement based upon the facts and declarations of interests as presented to them? In the case of the passive smoking paper, all interests of the authors were fully declared,¹ an accompanying editorial (highlighting

limitations in the study) was published in the same issue,⁵ peer-review comments were posted on the *BMJ* website⁶ and the limitations in the study were acknowledged in a *BMJ* press release.⁷ Would it in future be more effective to preface scientific papers with authors' declarations of interest rather than, as is current practice, to list these interests as subscripts where they can be easily overlooked, or has scientific debate become so polarised that we are now incapable of tolerating findings or opinions which depart from received opinion, or of responding in a reasoned manner?

It is perhaps a sad irony that by attacking this paper so precipitously, the anti-smoking lobby and the professional organisations who similarly rushed to express concern have done their cause a great disservice and have, at a single stroke, dismissed journal readers as being incapable of independent thought and provided the study with much greater media exposure than it would most likely have received had the response to its publication been carried out in a more restrained manner.

THE JOURNAL: FIT FOR PURPOSE?

The recent controversy ignited by the publication of the passive smoking paper has re-focused clinical, academic, media and public interest on the world of medical journal publishing. As it is also 18 months since *The Journal* was launched – a period in which much has happened both within medicine and in the wider world – it is both appropriate and timely to review the progress of *The Journal*, and to define its future role.

The College has for some time recognised the need to communicate more effectively with, and to facilitate communication between, its Fellows and Members. In parallel to this, the College has also been keen to disseminate material from its educational programme in a published form which would be of value to its Fellows and Members wherever they practice or reside. Only comparatively recently, however, within the last few decades, has the College actively sought to do this. Readers may be intrigued to learn that whilst this challenge was recognised at a meeting of the College in 1825 it was not until 1971 that a College newsletter first appeared in print, before evolving into the predecessor to *The Journal*, *Proceedings (of the Royal College of Physicians of Edinburgh)*, in 1984. During this period, and in successive years, a variety of regular College publications including *Chronicle*, *Current Medicine* and *Chiron* were also produced, details of which have been documented in earlier *Proceedings* editorials.^{8,9} Of these publications, perhaps the most successful was *Proceedings* which, over a period of 17 years, sought to facilitate medical education through the publication of original papers, reports of College symposia (so as to enable Fellows and Members from around the world to

benefit from events held in the UK), papers on the history of medicine, thought-provoking editorials, and by providing a forum for correspondence. In addition to fulfilling the 'duties' of a medical journal, it provided a personal service for the membership through the publication of obituaries and occasional College announcements.

Whilst all of these publications served their time, external developments in the disseminating of information, most notably the development of the internet (or world wide web) in 1991, changed forever the manner in which personal communication and education provision could take place. Additionally, external pressures such as the Research Assessment Exercise (RAE) in the UK, which has forced researchers to only seek publication in the journals with the highest impact factor (in competition for funding), and also increasing professional and clinical demands on the College's Fellows and Members, had resulted in a decline in original submissions for publication in *Proceedings*.

In response to this situation it was decided to radically overhaul the College's publishing programme. The first stage involved developing *The Bulletin*,¹⁰ a new electronic communications service for Fellows and Members, providing daily updates on medical developments around the world underpinned by expert commissioned clinical comments on these items, news from the College and from Fellows and Members, and an interactive forum for discussing topical matters. The second stage involved overhauling *Proceedings* to provide a new format of general medical journal, *The Journal*, which would retain the more popular elements of *Proceedings* whilst increasing its emphasis on current medicine and providing a more focused, topical and sustainable publication for the College's worldwide membership (currently standing at 7,109 Fellows and Members, covering 54 specialties and practising or residing in 85 countries).

So, what has *The Journal* achieved? Since it was launched, *The Journal* has become a much more topical publication by which Fellows and Members can keep abreast of current developments in medicine. Review articles, in the form of 'Clinical Opinions' have been introduced, in which recently published specialist papers of wider interest are reviewed for a general medical audience. A new section entitled 'Behind the Headlines' has been introduced in which expert comment is commissioned on topical areas of medical interest, as reported in the medical and mainstream media – articles have covered such topical matters as severe acute respiratory syndrome (SARS) in Hong Kong,¹¹ methicillin resistant *Staphylococcus aureus* (MRSA) and its clinical impact,¹² and the surgical management of breast cancer.¹³ Topical literature reviews have been commissioned on areas of interest such as the possible link between the measles,

mumps and rubella (MMR) triple vaccine and autism in young children.¹⁴ Critiques of current clinical practice have been provided through, for example, papers on the pitfalls of managing the poisoned patient¹⁵ and a report of a workshop highlighting practical difficulties experienced in implementing the Scottish Intercollegiate Guidelines Network (SIGN) guideline on genital chlamydial infection.¹⁶ A major review on the pathogenesis of multiple sclerosis was published¹⁷ and attracted international attention, including an article in the *New Scientist*.¹⁸ We have continued to foster understanding of different approaches to medicine, be they cultural, religious or philosophical: the publication of a paper on genetics in the Holy Qur'an¹⁹ is an example of this. A patient's experience of medicine has been provided by a paper containing parallel perspectives from a general practitioner and a patient of their experiences in seeking to manage chronic fatigue syndrome.²⁰ Finally, editorials have been published on subjects as diverse as the use and abuse of impact factors in academic medicine,²¹ Scotland's health,²² liver transplantation²³ and reflections on a world on the precipice of war.²⁴

Alongside our attempts to provide more topical and focused content, great consideration has been given to the manner in which the final published output is disseminated to our audience. Progress has been made in achieving effective cross-linkage between publications (and the print and electronic media) by providing an online early publication facility, whereby clinical review articles are published online, in the first instance, in *The Bulletin* and then reproduced shortly thereafter in print in *The Journal* – perhaps the most notable example of this was the online publication of the SARS in Hong Kong article¹⁰ in the same week in which the first SARS papers received advance online publication in the *New England Journal of Medicine*.^{25,26}

It should be stressed, however, that the introduction of this topical content has not been at the expense of the history articles, symposia reports, occasional communications and obituaries which we know to be popular and which we have continued to publish. Fellows and Members may also be interested to note that an overhaul of our production and printing procedures, since the launch of *The Journal*, has resulted in print and distribution cost savings to the College in the region of £25,000 per annum.

It is often asked if change takes place simply for the sake of change. We firmly believe that the time was right for *Proceedings* to be re-launched as *The Journal*, that the changes undertaken reflect much more than a simple change of title and design, and that we have developed a relevant and sustainable publication fit for purpose in the twenty-first century. Whilst *The Journal* is still a young publication, the signs are encouraging, particularly when

the noticeable increase in correspondence received by the editorial office is considered. *The Journal* is, however, your journal and requires the interaction and contributions of Fellows and Members to support it. Let us know what you think of *The Journal*, what you would like to see in it and what you could contribute. The future of *The Journal* is in your hands.

E-mail: editorial@rcpe.ac.uk or write to the Editor, *The Journal*, Royal College of Physicians of Edinburgh, 9 Queen Street, Edinburgh EH2 1JQ.

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WOULD YOU LIKE TO INCREASE YOUR PUBLICATION RATE OR THE LEVEL OF JOURNAL IN WHICH YOUR PAPERS ARE PUBLISHED? NEW SCIENTIFIC WRITING COURSE FOR FELLOWS AND MEMBERS TO BE HELD IN DECEMBER 2003

While writing a scientific paper may at first appear straightforward, we would like to ask you a few simple questions –

- Have you ever had a paper rejected for publication?
- If so, have you ever wondered *why* it was rejected?
- Alternatively, would you like to improve your publication rate or the level of publication in which your papers appear?

Clinicians regularly submit papers for publication which, while containing excellent and original clinical detail, may be rejected as soon as they are received by an editor or are put out for peer review. This situation can be demoralising and can lead to an author questioning his or her work.

In order to assist Fellows and Members to increase their publication rates through gaining a better understanding of what journal editors and reviewers look for in submitted papers, the College has engaged the services of **Tim Albert**, an experienced writing consultant, former editor and author of three books on this subject, to run his '**Writing a scientific paper**' course for the College.

'**Writing a scientific paper**' adopts an 'evidence-based approach to writing', based upon the tutor's extensive experience of medical publishing and journalism, and blends this with analytical and marketing techniques to provide a sophisticated method of increasing publication outcomes. It provides course participants with invaluable insights into how to plan, structure, develop and write a scientific paper (including useful advice on how to avoid 'writer's block'); information on what editors and reviewers look for in papers; original analyses of trends in medical publishing; and should considerably increase participants' chances of being published in the journal of their choice.

The course would be of value to junior doctors interested in getting on to the first rung of the publications ladder, mid-career consultants interested in publishing and disseminating original research in higher-impact journals or senior consultants interested in reviewing their scientific writing skills.

The course will be held on **Thursday 11 December 2003** at the College in Edinburgh. Places are available at a cost of £175 per participant and those interested in attending are advised to book early. Contact h.elliott@rcpe.ac.uk to reserve a place.

This event is CPD-approved and PGEA (for GPs) will be applied for.