

Tension Between the Needs of Authors and Editors

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Medical authors—who are usually academic researchers—want their papers accepted and published as soon as possible. Medical readers—often busy clinicians—want short articles with more commentary and analysis. Those conflicting needs create tension at biomedical journals as editors try to serve two distinct communities. Editors Howard Bauchner and Fiona Moss know that a balancing act is required, and they shared techniques that have worked for them.

Bauchner's venerable journal exists to serve its readers, members of the Royal College of Pediatrics and Child Health. Hired to "create a vision" for the publication, he carefully balances readers' needs and authors' wishes.

Readers' top priority is clinical messages that can be read and understood quickly. Because the abstract may be the only part of an article read by busy clinicians,

structured abstracts are a must. Readers also appreciate commentaries that place a subject into context. Bauchner's journal now has a commentary editor.

Although speed of publication doesn't matter to readers, it is extremely important to authors. Striving to publish a few landmark articles that will change clinicians' practice, Bauchner settled on a 4- to 6-month timeframe for publication. Length is another point of contention: authors want every word published, and readers want brevity. So manuscripts may be edited to one-half or two-thirds of their submitted size.

Bauchner suggested that editors learn from others by copying useful innovations. "Emphasize commentary and reviews; even stir up controversy", he advised. "For example, should every 400-g infant be resuscitated?" Regular columns also add value and can help to place original research into context. One column is written by patients, such as a column about a Down syndrome child who didn't want to wear a back brace.

Bauchner emphasized that a good support staff is needed to institute change, as are financial resources and boldness. "Have passion and vision", he urged. "And, as you go through changes, tolerate anger and rejection."

As editor of a new interdisciplinary journal, *Quality and Safety in Healthcare*, established in 1992, Fiona Moss faced similar and different issues. At startup, neither readership nor the author pool was well defined. Diverse academics submit most of the papers, whereas healthcare-quality professionals and clinical professionals constitute the readership. Adding to the challenge, clinical professionals have all

the other "main" journals to read.

Moss set lofty editorial standards that initially resulted in a high rejection rate but eventually paid off. Many of the early papers submitted were boring, and "I did not want to be in charge of the BMJ group's most boring journal", Moss quipped.

She banned clichés, such as the definition of an audit, and accentuated the important ideas buried in the text, especially subjects of immediate relevance to clinicians and patient care. The detail of arcane policies is minimized, and jargon is replaced with clear, unambiguous English. Much less heavy editorial work is required, now that the journal and its style are well established.

"The editor's role is to add value for readers", Moss asserted. She uses boxes, illustrations, and examples to clarify main points. Papers are sometimes restructured from IMRAD to viewpoint pieces. And commissioned editorials add context.

Like other publications, Moss's journal has undergone many changes in the 12 years since its inception. The transition to the Web, a name change, and a link to the European Forum on Quality Improvement are some of the major ones. Integral to all those is the increased quantity and quality of the original research and other content. "It's the best journal of its type, with an impact factor of 1.2", Moss declared, justly proud of her accomplishment.

Bauchner's and Moss's experiences did much to illuminate authors' and readers' conflicting needs and to provide practical wisdom and proven strategies for navigating a course between them. 