

Medical journals

The venerable *BCMJ* has some company, and maybe some competition.

I recently attended the launch of the *UBC Medical Journal*, a “student-run academic journal with a goal to engage students in dialogue in medicine.” Actually, describing the *UBCMJ* as competition is not exactly correct because the *BCMJ* and its staff were major boosters in getting this new venture off the ground. The first issue of this new journal is a stylish affair, and the contents are eclectic but have a general appeal. With a publication frequency of two issues per year, the *UBCMJ* is unlikely to steal reader focus from the *CMAJ* or the *BCMJ*. But what it will do is give a large number of undergraduates exposure to the wonderful world of medical writing, reviewing, editing, and publishing, and it may even provide an additional career choice for a handful of them. They will be able to show how they will contribute to the fund of medical knowledge by writing (or helping shape) better papers. And the more that goal can be fostered and facilitated, the better it will be for all of us. Regardless, they’re off to a great start.

This launch stimulated further reflection about medical publishing in general and medical journals in particular. Virtually all medical journals depend on advertising revenue from industry (most commonly pharmaceutical) for income, and they have seen a steep decline in such advertising over the past couple of years. Several high-profile journals have had to do some serious thinking about how they will deal with shortfalls in projected advertising revenue; the options have included reducing the number of pages per issue, reducing the frequency of publication, and reducing the number of printed copies of the journal. This last option requires

that subscribers be happy to switch to reading a digital version of the journal, and that may be a tall order. Readership surveys that ask about paper and digital versions of journals always show mixed results, with some readers eagerly adopting digital versions, many more being prepared to try a digital version but still wanting a “real” journal, and a surprising number of hard-core supporters of paper exclusively. Note, however, that these are the preferences of readers; authors tend to favor electronic or digital versions, possibly because their work will be published more quickly in those formats.

The dogged supporters of paper journals often cite reading in the bathroom and in bed as the reasons for their preference. But is there indeed a future for paper versions of medical journals? Are we slowly turning to electronic publication of every journal? The advent of open-access forums such as PubMed Central has even raised the possibility of doing away with journals altogether and simply providing online publication of every paper. This would mean seeking out publications of interest using key words, rather than flicking through the pages of a journal to see if anything engages your interest. To some extent this “democratization” of scientific publications is already occurring, spurred by the increasing sophistication of Internet search engines. And it’s free, making it more difficult to defend what seems to be an anachronistic and exclusive means of broadcasting scientific knowledge.

Nevertheless, the current system of journal publication has a number of advantages. Subjecting manuscripts to peer review, for all its faults, does tend to weed out reports and reviews that are flawed or weak so that publications in peer-reviewed journals are

for the most part relevant, scientifically sound, and credible. Information trolled from Internet searches by our patients (then printed out and brought triumphantly to our offices) usually lacks these qualities. Institutions rely on publications in peer-reviewed journals when making decisions about

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appointments, promotions, and accreditation, and it would be hard to find a reliable substitute. If we are to base our clinical practices on evidence, we need the evidence to be as bulletproof as possible, whether it is published on paper or in digital form. We can count on what we read in peer-reviewed journals to keep us up-to-date and—we trust—competent.

But primarily, I and many colleagues like to read journals that provide a sense of community. This usually means that specialty journals have a ready-made readership; general medical journals have a tougher time maintaining a loyal readership because they have to appeal to a broader community. That the *BCMJ* has appeal for the BC medical community is illustrated by its consistent approval ratings year in and year out, although this sustained success is clearly the result of having such a good-looking Editorial Board. What I saw at the launch points to the new *UBCMJ* having great appeal for its community as well, and I wish its production team a long and happy orbit.

—TCR