

The Journal in its Golden Jubilee

A Golden Jubilee is an occasion on which to look back, to recall the good days with modest pride and to cast a critical eye on the follies of youth lest their repetition in later years inhibit maturation or bring about a premature senescence. With such sentiments the *Irish Medical Journal* takes this unique opportunity not only to glance back over its first half century, but also to break, however modestly, with past traditions by bringing a new style to the *Journal* and devoting this issue to a consideration of topics more general than scientific. Medical journals are traditionally conservative in style and content, and once a mould has been cast there is reluctance to break it. Most medical journals have one feature in common — they present their contents on their covers. The *Journal* is breaking with this tradition, confident that in doing so its readers will welcome the reaffirmation of a long association between medicine and painting, a relationship that is the subject of Anne Crookshank's paper "Medicine and Painting in Ireland" on page 17 of the *Journal*.¹ Henceforth the cover of the *Journal* will be devoted to illustrating sculpture, painting and photography of medical interest in Irish institutes. The first painting chosen, *The Attempted Martyrdom by fire of Saints Cosmas and Damian with their Brothers* by Fra Angelico, is one of the many treasures in the National Gallery of Ireland. The fascinating history of this painting and of its subject, the patron saints of medicine, is presented by Michael Wynne, keeper of the National Gallery on page 14.²

Medicine and the arts have been closely allied throughout history, but in recent years the scientific emphasis on medicine, both in training and afterwards, has distanced art from the practitioners of medicine. The traditional image of the doctor as the well-informed cultured figure capable of waxing eloquent on any subject after dinner is all but a historical figment. When we consider that students entering medical school today are better educated in the humanities than most of their predecessors and that they emerge six years later, their minds stuffed with scientific fact of transient durability but culturally more ignorant than when they began, we may not be unreasonable in asking those medical schools if they have not been negligent for failing to provide the means for students to develop their education in the arts. On a practical note, we may ask is it not deplorable that the medical schools of Ireland, a member country of the European Economic Community, produce doctors most of whom are conversant in only one European language?

The *Irish Medical Journal* has changed considerably since its humble beginnings fifty years ago. Professor J.B. Lyons traces the history of the *Journal* from its origins on page 7,³ and those in

search of historical details on medical journals in Ireland will find the subject well reviewed.^{4,7} The present editor takes over from Dr. Hugh Staunton who has passed on the *Journal* in excellent condition. Dr. Staunton, working on the foundations laid diligently over many years by Dr. Harry Counihan, gave the *Journal* the editorial impetus needed to bring it into the eighties. The national medical journal of a small country must by definition always be small in quantitative terms when comparisons are made with other national journals, but the *Irish Medical Journal* should be able to stand with the best of its overseas associates in terms of quality. And yet this statement, though easy to make, is not so easily brought to realisation. However ambitious and well-intentioned the aspirations of a medical journal may be, they are dependent on the quality of material submitted for publication. The quality of that material is, in turn, largely dependent on the standard of research being conducted in the country, and the level of funding is so abysmal in Ireland that it is surprising perhaps that any worthwhile research work emanates from the country at all. To this reality must be added another. Whatever original research is conducted in Ireland will not necessarily be submitted to the *Irish Medical Journal*. It has been argued that if all research was submitted to one national journal, this country would have a medical journal second to none. This line of argument fails to take account of one important fact; a researcher who has conducted a worthwhile original study will understandably, and let it be said, quite correctly want to see his work brought before as wide an audience as possible. The *Irish Medical Journal* with a circulation of 5,000 cannot offer the same international exposure as, for example, the *New England Medical Journal* with a circulation of 200,000. This being so the *Irish Medical Journal* can as the editor of the *British Medical Journal* points out in his paper "Artists and critics: the national medical journals" on page 23,⁸ provide a forum for articles of national interest as well as attracting scientific papers from centres outside the country. Moreover, not all that is rejected elsewhere, or indeed by the *Irish Medical Journal*, is necessarily second best, and disappointed authors should not necessarily throw a paper out because it is rejected, though they should examine carefully the reasons for rejection before attempting to place it in another journal.

What of the journal's present state? Scientific and clinical research papers constitute the major part of the *Irish Medical Journal* and these are chosen to give as broad a selection for the readership of the *Journal* as is possible. It is intended that future issues will carry one or more editorials on matters of topical interest, together with invited review articles on subjects meriting detailed exam-

ination. Not all papers need be scientific or clinical in content, and the *Occasional Papers* section permits expression of a view or experience that is worthy of publication. Irish medicine has a prominent place in medical history, a fact often given more recognition abroad than at home, and the *Journal* is prepared to publish papers on *Medical History* that treat medical historical subjects as worthy of detailed research and scholarship rather than an exercise in anecdote. The sign of a lively journal is an active correspondence column, and it is hoped that readers who find their views at variance with editorial policy or the papers published, or feel inclined to expound on a topic of interest, will not be reticent about putting their opinions into print.

The number of papers being submitted to the *Irish Medical Journal* is increasing consistently and rather rapidly. The editorial office receives about thirty papers a month, of which about one quarter are accepted for publication. The decision as to whether or not an article is suitable for publication, though ultimately resting with the editor, depends on a team of expert referees who perform the demanding and unacknowledged task of giving their opinions as to the merit of a paper. Without peer opinion an editor would find himself in an impossible situation. The occasion to acknowledge the support of the *Journal's* referees arises but rarely, and the opportunity is seized by the editor to convey his gratitude for this most necessary function. For those who doubt the validity of editorial peer review in medicine a look at Stephen Lock's Rock Carling lecture *A Difficult Balance*⁵ should serve to convince. Though the system is not perfect, and never will be, Lock believes that "the combined contribution of editors screening articles, referees reading the remainder, and editors using the referees' opinions in making their final decision is as effective a mechanism as any for identifying those articles that should be published and then put to the test of time".⁹ With the improving quality of papers being submitted to the *Journal*, there is a need to accommodate more papers. The *Short Paper* section is being expanded to facilitate the publication of a greater number and selection of submitted papers. Authors often resent the discipline that a short paper (seven hundred words, two figures or illustrations, seven references) imposes on their presentation, without realising that there is little that is written that does not improve with pruning, and, moreover, there are many papers, far too many, published that are excessively verbose and often lose their message in a lengthy presentation.

Whereas the quality of papers being submitted to the *Journal* is improving in terms of content, the same cannot always be said for their presentation. Henceforth the *Journal* will publish in each issue its requirements for publication, and unless these are complied with papers will not be considered for publication. Professors Ristead Mulcahy and

Kevin O'Malley, editor of the *Journal of the Irish Colleges of Physicians and Surgeons*, each of whom has a large experience of submitting papers for publication to journals both at home and abroad give many useful hints in this issue for the would-be author of a scientific paper.^{10,11} Three articles from the International Committee of Medical Editors providing useful guidelines on writing are also published in this issue.

No author should even contemplate preparing a manuscript for publication in the once conventional manner with a typewriter. It should be recognised from the outset that most papers require at least seven drafts between the first rough gathering of thoughts and the final manuscript that the editor accepts for the printers. The labour involved in typing seven (and in many instances more) drafts is reduced very substantially with a word processor, and perhaps of even greater importance, the potential for introducing error is much less. This important topic is addressed by Jane Smith, Assistant Editor to the *British Medical Journal* in her article "Writing medical articles on a word processor: the importance of editing".¹² Indeed the day has almost arrived when editors will request authors to submit articles on disk — a matter to which the editorial office is giving careful consideration. Care in presentation of a paper is always worthwhile. Clean, clear presentation will not ensure that a bad paper gets into print, but it may make all the difference to a borderline article in that it helps the editor to reach a decision as to whether or not to publish.

The *Irish Medical Journal* for its part will endeavour to publish as accurately and speedily as possible those articles which are accepted, and to bring these papers to as wide an audience as possible through its national circulation of 5,000, its overseas library circulation, and finally through *Index Medicus* and *Current Contents/Clinical Practice* and the *ISI/BIOMED* — the Institute for Scientific Information's on-line guide to biosciences — in all of which the *Irish Medical Journal* is indexed.

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