

# Editorial

## Writing about Writing

Editors of peer-reviewed journals like this one have about as much reason to be grateful to authors whose manuscripts are not published as to those whose are. Such gratitude may be small consolation to the rejected, but it is nevertheless genuine. We are dependent almost entirely upon the voluntary submission of manuscripts; these must be in excess of what can be published, and for good reasons. Unsolicited manuscripts not only help to identify the active content of a discipline by embodying the inquisitive and reflective work of its constituents, but also they allow reviewers and editors to establish what counts for the qualities that merit publication. Judgments about merit would be even more precarious than they are without the possibility of comparisons.

We are extraordinarily grateful, therefore, to several hundred authors who submitted 184 manuscripts to a journal that had not yet seen the light of day. Approximately 20 percent of these (35) will comprise the first three issues of *The Journal*, and when these are published, we will all have a better idea of how well we are serving our common interests. Readers will have the chance to tell us what they think about what we selected, and authors, many but not all, will have told us what they think about what we did not select. We hope to learn from both sets of critics.

The processes of selection are by no means simple. Very few manuscripts are ready for the printer on first reading, and even fewer have no redeeming qualities. All represent a good deal of time and energy, and for that reason alone, they deserve multiple readings before any editorial response is made to the authors. Most manuscripts generate questions in the minds of reviewers and evoke judgments about priority in the minds of the editors. Revisions are usually called for, and this leads to the most delicate editorial task; should the authors be encouraged to revise in the hope that a revision will be accepted, or should a revision only be mentioned, knowing that a major overhaul probably will be necessary? Contrary to some opinions, editors and authors are not adversaries; editors are greedy for publishable material and are not inclined to snuff out any manuscript that has possibilities. What we do not know in

advance is the authors' willingness to rework their material without a promise about the outcome. Letters from editors, like letters of recommendation from deans, tend to contain a certain amount of ambiguity that must be interpreted. There are subtle differences between "Yes, but . . ." and "No, but . . ." that are unavoidable in the early stages of communication about a manuscript. Ultimately the ambiguity must be eliminated, but before that a process of negotiation takes place. To support the value of this process in our experience, 38 revisions were developed from our first batch of manuscripts, and 26 of these were accepted for publication, which shows that the majority of our finished articles (26/35) are revisions. This will not be surprising to anyone experienced in medical journalism, but it is worth making a point that revisions should not be seen in a negative light by authors.

Since our original call for papers elicited a broad range of responses, we had to make an early decision about the priority of topics that would be considered appropriate for *The Journal*. In view of the fact that our targeted readers are Diplomates of the American Board of Family Practice, we focused on clinical topics, but interpreted this broadly to include all aspects of clinical work. We excluded medical economics, medical politics, medical education, most editorial essays, travelogues, poetry, and satire; not because these topics are unworthy or uninteresting, but within our constraints of about 60 pages per quarter, they are not of primary importance. We prefer original clinical research, medical reviews, and clinical case reports. Fortunately, in the first 100 manuscripts, there were 47 reports of research, 27 reviews, and 11 case reports. Something needs to be said about each of these.

The commonest research design we have seen is the cross-sectional study, which is considered by those who write about the "architecture of research" as having the lowest explanatory power.<sup>1</sup> For practical purposes, any study that uses a questionnaire or survey as its chief source of data is cross-sectional. It analyzes data collected at one point in time, and its highest level of inference is to give a statistical value to the association of variables. It cannot determine whether one variable

is caused by another; hence, its chief value is to generate hypotheses that can be tested by more rigorous designs, such as a cohort study, a clinical trial, or a case-control study. Cross-sectional studies are attractive to those who have limited research time and resources, and there are computer programs to do the calculations, but there are problems with this design. Surveys and questionnaires need to be validated in advance, representative samples of the population of interest must be defined, and response rates must be adequate. Much of our correspondence with authors has been about these factors. The statistics generated can be complex, and we routinely have a statistician read such manuscripts. Our advice to authors is to seek consultation with a biostatistician before carrying out a cross-sectional study. Like most medical editors, we would like to see more cohort (longitudinal) and more case-control studies. These are more difficult and time-consuming, but the payoff is greater.

"Good review articles are precious commodities."<sup>2</sup> p 485 So states the author of a review of medical reviews, in which she did not find much to applaud. The problem is to find a focus for a review that does not result in writing a chapter for a textbook. The key is choosing references, attending to their methodology, and defining what is not known about a topic, as well as what is known. Good reviews should also come to a conclusion and give a reader perspective and a "handle" on the topic. Assimilating all the relevant literature and boiling it down without bias or undue simplification is a challenge. We welcome efforts in this direction.

An article dealing with 10 or fewer patients qualifies as a case report. Such studies are usually observational or generate descriptive statistics only. These are valuable in family practice because they represent clinical experience. Ordinarily they should be brief, preceded by an appropriate introduction, and followed by a focused discussion. Single case reports that are longitudinal can incorporate scientific methods in which the patient is used as her or his own control for various interventions. Problems we have seen with this genre

of writing occur when the case is used as a take-off for an inadequate topical review. The author is caught between what should be simplicity and specificity of a case and the integrative synthesis that a review demands. Also, it is defeating when essential laboratory data are missing from a case report.

Writing style and clarity are frequently mentioned when inviting revisions. Editors are not in a position to rewrite, yet it is hard to tell an author how to do it. *The Journal* provides expert copy-reading and proofing, but these do not create style; they only conform the article to our journalistic conventions. Insofar as possible, all medical writing should be gender-free except when gender is essential to the meaning. Sex bias should be avoided and gender inclusive language used whenever possible. References should be checked by the authors for accuracy and relevance. We repeat this costly and time-consuming process, and we find a remarkable number of inaccuracies; but we do not actually read the references. One prominent journal requires a copy of the title page and the page where each quotation appears in each reference. We recommend that each manuscript be read for style and clarity before submission.

There is no formula that will guarantee publication, but attention to these specifics will go a long way towards securing an optimal and timely review and reducing the delays between submission and a definitive reply. We consider it part of our jobs to nurture authors. Sometimes this is better achieved through the tedious work of revision than through professional editing.

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## References

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