



Problems of Editing a Peer-Reviewed Biomedical Journal in a Developing Country

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Editing a peer-reviewed medical journal in a developing country can be a very stressful and frustrating job in view of the enormous problems which an editor has to face.¹ Authors' failure to comply with instructions, financial constraints, poor quality of manuscripts, duplicate submission, slicing, plagiarism, poor quality of reviewers and their non-availability, and untrained manpower including editorial staff coupled with the desire to improve the quality and standard of the journal and get it indexed in important databases create such a vicious circle that an editor finds himself/herself in a very challenging situation all the time.²

Editors are defined as those who are responsible and accountable for determining the scientific contents of a peer-reviewed biomedical journal. The International Committee of Medical Journal Editors (ICMJE) defines a peer-reviewed journal as one that has submitted most of its published articles for review by experts who are not part of the editorial staff (www.icmje.org). Editors are responsible not only to authors but also to reviewers, readers, study subjects, science and the publishers, hence they have to work under a great deal of pressure. The pressure is magnified in the absence of optimally trained and experienced editorial staff. Editors are supposed to create such an equilibrium that all the stake holders can be kept happy. It is indeed a very difficult and onerous task.¹ That is why Dr. H. Whitefield, editor of the British Journal of Urology, is reported to have remarked, "If you do not want to make friends, become an editor." Likewise, Sir Hugh Clegg, editor of the British Medical Journal (BMJ) (1947-1965) is reported to have said, "A medical editor has to be the keeper of the conscience of a profession and if he/she tries to come up to this ideal, he/she always be getting into trouble."³ "In general the only people who love editors are their wives/husbands, children and parents,"⁴ says Dr. Harvey. This shows how difficult the job of an editor is and particularly so in a developing country working under financial as well as other constraints.

Some of the specific problems which editors have to face include incomplete and incorrect references in manuscripts submitted by authors; missing photos and illustrations; missing Letter of Undertaking signed by all the authors, which is supposed to confirm exclusive submission and willingness to pay publication charges; withdrawal of accepted manuscripts at the last minute disrupting publication schedule; failure to arrange publication charges in time; failure to respond to queries by the authors promptly; misplacement of manuscripts by the reviewers or need for repeated reminders; ignorance on the part of the authors as to how to convey the corrections to a PDF file sent for proof reading; request for change of the authors; addition or deletion of some of the authors' names or change in their order; and pressing for early publication, to mention but a few.

The fact that 25% of the world's scientists are from developing Third World countries but their contribution to world medical literature is just 2% is highly disappointing (Laporte RE. Proceedings of South Asian Cardiovascular Research Methodology Workshop held at Aga Khan University, Karachi. Pulse International Feb. 15th 2005. Karachi. Pakistan.). One of the important reasons for this is disregard for merit and the fact that medical writing was until recently not taught in medical schools in most of these countries and even now only a few of them have set out in this direction. Research culture has been mostly lacking; most often the research scientists never received the respect and status which they deserved, and research was also not a career which many thought of adopting. The situation, however, is gradually changing.

Peer review is considered a central activity in improving the quality of manuscripts, but this is a poorly understood process which remains under intense scrutiny and controversy. During discussion on the World Association of Medical Editors (WAME) List serve recently, Dr. Godlee, editor of BMJ, remarked, "Peer review is expensive, slow, subjective,

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biased, open to abuse, patchy at detecting important methodological defects and almost useless at detecting fraud and misconduct." Dr. Farrokh Habibzadeh, secretary of the WAME, participating in the discussion opined, "Many experienced editors practically do not rely on the peer reviewers to accept or reject articles. Reviewers are indeed advisors and editors use their comments to improve the quality of papers if they find they are publishable at all. It is the editors who are fully responsible for the publication/rejection of a manuscript. A good editor will use any means available to improve the quality of his/her journal."

If one looks at the ground realities, what happens is that "non-availability of competent and qualified reviewers" forces the small journals in most of the developing world to open the gates too wide and use reviewers who might lack the necessary knowledge (Morcos A. Publishing in developing countries: problems and solutions. *CBE Views* 1999;22:198)."

Richard Smith, former editor of the *BMJ*, in his book entitled "The Trouble with Medical Journals" remarks that clinicians, researchers, editors, journalists and publishers should all accept that medical journals have many problems and thus need reform. During his twenty-five years at the *BMJ*, Smith became aware of the complex problems in medical editing and publishing. The situation becomes still worse when there is a lack of evidence to guide on how to conduct all this (Smith R. *The trouble with medical journals*. Royal Society of Medicine Press. London 2006.). Currently (as of December 2007), 5,194 journals are indexed by Medline. Other important databases include the Netherlands-based *Excerpta Medica Database (EMBASE)*. *Science Citation Index Expanded (SCIE)* by Thompson/ISI, more commonly known for impact factor, covers 7,631 medical journals which include fewer than 2% of the journals published in the developing world (Morcos A. Publishing in developing countries: problems and solutions. *CBE Views* 1999;22:198). *Directory of Open Access Journals (DOAJ)* covers 3,680 journals. The Iran-based *emrmedex* database has included one hundred ninety-five journals from the EMRO region.

The Eastern Mediterranean Association of Medical Editors (EMAME) has also established its own database, *IMEMRC Current Contents (Index Medicus for the World Health Organization (WHO) Eastern Mediterranean Region)*, which is being linked to Medline. Hence this requirement will also be met to a great extent in the not too distant future, thanks to the untiring efforts of Dr. Najib Shorbaji and his team at the WHO EMRO (<http://www.emro.who.int/HIS/VHSL/imemr.htm>).

Regulatory authorities in different countries are also trying to monitor the standard and quality of biomedical journals published in their respective countries. In Pakistan, there are about fifty medical and dental journals recognized by the Pakistan Medical and Dental Council, while about half a dozen are recognized by the Higher Education Commission of Pakistan. Among these, the number of the medical and

dental journals which practice peer review is less than ten. The Ministry of Health in the Islamic Republic of Iran has also constituted a committee of experts for the recognition of biomedical journals, and authors are encouraged to publish their manuscripts in those journals, which are either indexed in Medline or covered by SCIE ISI/Thompson Web of Sciences. Be that as it may, in most of the developing countries, scholarly publishing still remains a cottage industry.

The picture is not so gloomy, however, for in the face of the difficulties and hardships, medical editors involved in editing peer-reviewed biomedical journals in the developing world have made a lot of progress. It is all the more commendable since most of them had no formal training in editing but had on-the-job training and most of them are working part time. Apart from their clinical responsibilities, most medical editors have taken upon this additional responsibility and are trying their best to come up to the expectations of readers, authors and reviewers. Still, for a long time to come except for those biomedical journals which are sponsored by various institutions and can afford to have full time editors and other editorial staff, most editors will have to be content with working in honorary capacity. It will never be the financial rewards but professional satisfaction which will keep them moving. Once they are able to influence some decisions at policymaking level, this should offer them the immense satisfaction of having accomplished something.

It will be the editor who will have to finally decide which of the manuscripts can be accepted for publication after internal review and which are the manuscripts which need to be submitted for external review. Keeping up with the advances in technology, now going online, which is very economical as compared to print publication, improves the visibility of the journals tremendously and also serves as a great source of manuscripts and potential regional cooperation.⁵ Indexing in *Medline Index Medicus* is of course considered an important yardstick of quality and standard of a journal; not succeeding in that, however, should not weaken an editor's resolve to continue his/her efforts to enhance the quality and standard of the journal. With more and more medical journals going online with full text manuscripts, Medline, in the opinion of some, may not stay as relevant in the days to come (Laporte RE. With availability of full text online medical journals indexing in Medline is going to become irrelevant. *Pulse International Karachi, Pakistan* 2005;6:1). *Google Scholar*, which has turned out to be an excellent database for latest references, is being increasingly used by researchers as it covers a much larger number of manuscripts published in biomedical journals available online. Hence, all efforts should be directed at maintaining the online edition of the journal, which enables the authors to have a much wider readership.



What we need to do is to include subjects like medical writing and research methodology in the undergraduate curriculum, organize frequent courses, seminars, symposia and workshops not only for authors but also for reviewers and training of editors. This is something which the Pakistan Medical Journalists Association (PMJA) has undertaken in Pakistan for the last couple of years. It was with the same objective that we organized the First National Conference on Medical Editing in Rawalpindi in April 2007. Proceedings of this conference were published and are now freely accessible on the PMJA website (pmja.com). It offers a great deal of useful material not only for authors and reviewers but also for editors (Proceedings of First National Conference on Medical Editing held in Pakistan in April 2007. Accessible free on www.pmja.com).

More recently, we have embarked upon planning a series of workshops on medical editing and peer review in collaboration with the Eastern Mediterranean Association of Medical Editors (EMAME), wherein the latter has provided some technical assistance. We have organized three such successful workshops and will be only too glad to share our experience with the editors in the region.⁶ What we earnestly require is a closer cooperation and collaboration between research scientists and medical editors of the countries in this region to share our knowledge and learn from one another's experience. It was with this objective in mind that I myself recently visited various Islamic Republic of Iran's medical universities, namely Ahwaz, Tehran, Shaheed Beheshti, Iran, and Isfahan, participated in their workshops on medical writing and peer review, and had fruitful discussions with their faculty members, all of which has been a great learning experience for me.

References

1. Jawaid SA. Problems faced by Editors of Peer Reviewed Medical Journals. *Saudi Med J* 2004;25:S21-25.
2. Jawaid SA, Jafary MH. Simultaneous submission and duplicate publication: curse and a menace which needs to be checked. *Pak J Med Sci* 2005;21:245-248.
3. Jawaid SA. What medicine and medical journal editing means to me. *Mens Sana Monographs* 2006;4:62-77.
4. Harvey M. What medical journal editing means to me. In: *Mens Sana Monograph* 2008;6:237-243.
5. Jafary MH, Jawaid SA. Online edition of a journal: a great source of manuscripts and potential regional cooperation. *Pak J Med Sci* 2006;22:107-109.
6. Jawaid SA. Proceedings of workshop on medical editing and peer review held at NICH and DUHS, Karachi. Pakistan. *Pak J Med Sci* 2008;24:637-641.

