

Open Letter to Editors at Biomedical Journals From Two Author's Editors

An editor at the journal had elegantly changed the author's compound sentence into a simple one introduced by a participial phrase. However, when the author sent the paper to one of us for help with suggested revisions, his comment was, "That's not a sentence, the way it's written, is it? It doesn't sound right to me. Put it back the way it was."

This little cameo illustrates the space occupied by the author's editor. As author's editors, we occupy a niche halfway between the author and the editor at a journal, and we often get caught between these proverbial rocks and hard places. An author's editor often works for many scientists or physicians within an institution helping to prepare manuscripts for submission to journals. Sometimes we merely edit; at other times we edit, format the article and references, write the cover letter, and mail the manuscript. Sometimes we pretty much rewrite the whole article.

Because we are detail-oriented and professional, we try to please both masters, the author-researcher and the journal editor. But if we know that the editor at the journal would like that sentence introduced by a participial phrase, should we insist the author leave it in to suit the editor? How much can we change an author's style and still have it be the author's—not ours or the editor's? Conversely, how can we let pass an author's badly written or incorrectly organized journal article without almost ensuring its rejection?

Although, as Harold Ross has said, "Any editor worth a damn has to take a vow of anonymity", we do exist, and we believe we contribute substantively to the biomedical publication process. In this open letter, we—two author's editors—would like to give editors at journals an idea of our daily work. We particularly wish to comment on some of the rules edi-

tors at journals set that are, in real life, hard for us and for authors to follow. By using scenarios that epitomize the binds we often find ourselves in, we hope to demonstrate how different our perspective can be from the perspectives of editors at journals. Perhaps this discussion will clarify how these differences affect our work and our contributions to the profession; we hope it also leads to more cooperation.

The force is with you.

The force—the power, the upper hand—is not with the author's editor. Remember, the author's continuing "presence" in our offices is what keeps us employed; tact is the trait that author's editors need most. Because most of our authors are capable and successful physicians and scientists unused to being told they do anything

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poorly, our criticism of their writing is often not well received. Editors at journals have a far easier time in giving an author bad news—they don't have to do it face to face. Even if we are e-mailing or calling our authors, it's a delicate task no matter what. When an irate author stands two feet away, waving a manuscript in irritation, an opening at the United Nations to handle Middle East negotiations looks mighty appealing.

It's also important to recognize that our status in the pecking order is lower than yours. A faculty member-to-faculty member (or journal editor-to-author) discussion has an entirely different dynamic from a faculty member-to-author's editor discussion, particularly when the faculty member is not sure we really know what we're doing. In the end, it is the job of the author's editor to help express the author's ideas as well as possible. Impediments

don't mean we stop trying; it's just hard sometimes to tell that we strove, mightily, to little avail.

Authorship is a funny thing.

Persuading an author to omit someone from coauthorship who is clearly undeserving is, shall we say, challenging. Although the criteria for authorship have received wide circulation through the International Committee of Medical Journal Editors (ICMJE)¹ and although much discussion has taken place in the last several years about contributorship,² many scientists and physicians are unaware of either the criteria or the movement toward contributorship. When we bring these ideas to their attention, they disdain to listen. "We've always done it this way", they say, meaning, often, "We've always included the head of the lab or the chair of the department as an author, even when neither has contributed to the manuscript." Despite these attitudes, we keep trying to convince authors that the rules governing ethics of authorship should be followed.

Yes, we're aware that all authors should see and approve the final copy of a manuscript. But when questioned, authors may respond with sentiments like "Ol' Harvey is my fraternity brother; anything I say is okay by him!" Short of impugning ol' Harvey, this one is pretty much a standoff for the author's editor. Can we then persuade the author to send the manuscript to Harvey? Not likely. (And even if we do mail the text, we can't make ol' Harvey read it carefully.) When one of us refused to mail a manuscript until a listed author in another state had read and approved the manuscript, the first author simply submitted the manuscript himself.

We're good, but not that good.

We know very well that the principal investigator should get institutional review board approval and study-design or statisti-

cal advice before beginning a study. There just isn't much we can do about it a year or more later, when the manuscript arrives on our desks. Sure, we can try to educate the authors for the future. But we may not see them again until the end of the *next* study.

Plagiarism is in the eye of the beholder, or so some authors think. Others believe that if they plagiarize themselves, no jury would ever convict them of editorial crimes. "How about mentioning to the editor of the journal your use of your own material?" one of us once ventured (and even drafted a cover letter describing the situation, a letter that, as far as we know, remains unsent).

If you only knew . . .

All author's editors have horror stories to tell, and they're not all about authors.

Most author's editors work on manuscripts in many specialties. Each of the specialties and each of the specialty journals have separate sets of specific instructions to authors. Despite our best efforts at researching those instructions, we sometimes get things wrong. When we write "Study Design" instead of "Methods" and the journal editor responds, "Perhaps you have us confused with another publication", the comment is, to put it mildly, not constructive. Taking your blue pencil to the offending term and writing the proper term above it takes less time than dashing off a sarcastic comment.

Rejection letters are no fun for anyone. When you have rejected our author's manuscript (with vague or even no reviewers' comments) and 6 months later you publish one on the same topic by Harvard or Johns Hopkins faculty, our authors wonder whether equal consideration is given to all manuscripts. They often turn to author's editors for explanations; lacking clairvoyance, we generally have none to offer. Editors at journals no doubt have sound reasons for such decisions, but your rejection (form) letters rarely elucidate them. You do the scientific community a disservice when you miss such an opportunity to educate authors about how to publish science.

When an author's editor calls or e-mails your editorial office on behalf of an author about the status of a paper in review, we do so as part of our jobs, not as an undercover mission for some competing journal or because we like bothering busy editorial staff. Journal editors could set the tone in their offices: we'd like you to explain to your staff who we are and the legitimacy of our voice. We know which questions are inappropriate, and we won't ask them—unlike some authors, as one of us can attest from her managing-editor days.

*You do the scientific
community a disservice
when you miss
such an opportunity
to educate authors about
how to publish science.*

If we could change the medical writing world . . .

. . . we would exterminate the passive voice. Quickly. But when clinic notes, operative summaries, and chart reviews bristle with examples of that hated form, clinicians regress whenever they pick up a pen. It might help if more editors said, in their journal's instructions for authors, that they encourage the use of the active voice. Then again, maybe it wouldn't, because we need you to . . .

Rename "Instructions for Authors".

"Instructions for author's editors" might be more accurate—we seem to be the only people who ever read them. And because we author's editors are few within the biomedical writing profession, we sometimes wonder whether *anybody* reads them. Sometimes we even wonder whether editors at journals read their *own* instructions, especially when the journal claims to follow the ICMJE's guidelines and then prints five pages of exceptions. If editors at

journals wrote instructions for their true audience—us—we could help create less ambiguous, more informative, and even (dare we hope?) less quirky guidelines.

It ain't necessarily so.

As our opening cameo suggests, stylish prose doesn't meet with rave reviews from every author. Waving our copies of *Fowler's* or *The Chicago Manual of Style* is effective only with rookies, who are just grateful that someone in a white coat isn't yelling at them yet again. So please don't take it personally if our authors send, in the revised manuscript, their original sentence rather than your elegantly revised one.

The times they are a-changin' (with apologies to Mr. Dylan).

With the advent of entities like PubMed Central and BioMed Central, author's editors and editors at journals alike are wondering how online publishing is going to change how they work. Addeane Caelleigh suggests that, especially with the material that is not carefully peer reviewed, the need for editors will grow. Authors will still need their author's editors because, Caelleigh says, "good editing ensures that a work is complete, consistent, accurate, and easy to read."³ Because page charges may still be levied even for electronic contributions, all parties will be interested in keeping articles as succinct as possible (more grist for the author's editor's mill).

In summary, the work of the author's editor is a lot like that of editors at journals. We both need authors; we both work with authors; we both receive manuscripts that need to be made fit for publication. We are concerned with vocabulary and diction, style and clarity, and correctness. We track revisions of manuscripts and deal with anxious and insistent authors inquiring about the status of their manuscripts. We care about authorship, conflicts of interest, and the ethical conduct of research. Because we aim for publication, we worry about timeliness, reactions to novel ideas, and the effects of new information on public health. We like to think that without author's

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editors, the manuscripts you receive would look far worse than they do now.

We author's editors sometimes must navigate Scylla and Charybdis as we try to adhere to a journal's rules, accommodate an author's preferences, and do what we believe is ethically sound. But our efforts save journal editors, reviewers, and copyeditors countless hours of correcting annoying errors. Ours is hard, exacting work that requires expertise, intelligence,

and sometimes the patience of a saint. We believe you feel the same way about your work. We thought you should see the view from our side.

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1. International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. <http://www.cam.ca/mwc/uniform.htm> (accessed 14 November 2000).
2. Smith R. Authorship is dying: long live contributorship. *BMJ* 1997;315:696.
3. Caelleigh A. PubMed Central and the new publishing landscape: shifts and tradeoffs. *Acad Med* 2000;75(1):4-10.

***Fourth International Congress
on Peer Review in Biomedical
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