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Editorial Address

A/Prof C Rajasoorya, Editor
Singapore Medical Journal
Singapore Medical Association
2 College Road
Singapore 169850



Cover Picture:
Hippocrates: Father of Medicine
(Refer to page 005-006)

Metamorphosis of the Singapore Medical Journal – Where do We Go from Here?

C Rajasoorya

Metamorphosis usually refers to a marked change in form during the life history of an organism. Over the last few years, the Singapore Medical Journal (SMJ) has successively gone through various changes in its editorial board, content and the nature of articles. The original-article submission rate from both local and regional and international authors has progressively increased. As the journal is published on a monthly basis, there is necessarily a higher rejection rate. The SMJ has embraced the technological revolution sweeping through the medical world. For nearly two years now, all published articles of the SMJ have been available in Portable Document Format (pdf) free of charge for anyone with net access, very soon after print publication. With the increasing use of PDA (Personal Digital Assistant) computers amongst medical professionals, abstracts of articles on palm tops through AvantGo are now readily available. Readership and authorship from Singaporeans who live overseas or are on attachment, as well as our non-Singaporean colleagues have also shown an increase. Increasingly, we have had requests for articles and reprints to be available on other medical resources. A significant increase in the number of letters to the editor augurs well for the readership. The future of the journal looks promising indeed.

As I embark on my second two-year term as editor of the SMJ, I am thankful to the President and Council members of the Singapore Medical Association (SMA) for their mandate, trust and total editorial independence. Independence, however, comes with accountability and responsibility – to deliver what is desirable for the readership. A second term naturally brings with it apprehension. The fear stems partially from trying to avoid a state of limbo. Whilst it would be easy to rest on our laurels and cruise along, maintaining the status quo, remaining on “auto-pilot” will cause us to stagnate. This is precisely what prevents progress and is quite reminiscent of the criticism levied at those who fear change – that it is this very fear that prompts complacency and engenders the death of innovation and progress. The journal cannot afford to remain stagnant, particularly in the information age where medical knowledge has become so easily accessible.

What then are the roles and responsibility of an editor and his team? I could not find a more comprehensive account than that posted in October 2001 on the website of the World Association for Medical Editors (WAME) (<http://www.wame.com/syllabus.htm>). Robert Utiger, Chairman of the Education committee of WAME succinctly summarises the responsibilities of editors of medical journals as follows:

1. Editors are responsible to readers, and should learn about their needs and interests.

Department of
Medicine
Alexandra Hospital
378 Alexandra Road
Singapore 159964

C Rajasoorya,
FRCP (Edin),
FAMS, FACE
Editor, Singapore
Medical Journal

Correspondence to:
A/Prof C Rajasoorya
Tel: (65) 379 3777
Fax: (65) 379 3893
Email: Rajasoorya_C@
alexhosp.com.sg

2. Editors are responsible for safeguarding the rights of study subjects and animals.
3. Editors are responsible for the editorial content of the journal; that is, the subject matter and types of articles and the actual content of the articles that are published in the journal.
4. Editors are responsible for establishing the policies for authorship and submission of manuscripts to the journal.
5. Editors are responsible for establishing and maintaining a process for the constructive, prompt evaluation of manuscripts, whether accepted for publication or not.
6. Editors are responsible to authors for maintaining the integrity and confidentiality of the authors' work while that work is being evaluated for publication.
7. Editors must be willing to make decisions and stand behind them, but be willing to reconsider their decisions when appropriate.
8. Editors should work to improve not only the quality of manuscripts but also the quality of research in the field.
9. Editors must be prepared to deal with error and allegations of misbehaviour.
10. Editors should maintain editorial independence and work to ensure that authors have editorial freedom.
11. Editors must not have personal, financial, or other relationships linked in any way to any of their responsibilities as an editor.
12. Editors should plan for the future of their journals.

As I ponder on some of the issues facing the SMJ and look ahead to the future, certain immediate issues come to mind as being foremost in priority. Certainly, there are some practical areas which can be improved upon, such as minimising delays in processing submissions and communicating the acceptance or rejection of articles speedily to the authors to name but two. This will enable us to avoid losing submissions of good quality to more efficient journals. Of course, we are thankful to our reviewers, who assist the journal, sacrificing their time and effort with no expectation of reward. The majority have very diligently submitted reviews on time. Few have rejected the opportunity to serve as reviewers, citing lack of time or interest in the editorial review process.

The SMJ does not have a full-time editor unlike most journals with a high impact factor. One of the long-term aspired goals of the SMJ is to be the journal of first choice for submission by local authors. We acknowledge that this goal is no mean task. In addition, no journal can achieve a high impact factor and citation index overnight, but we have to start somewhere and build on this. Until such time when the impact factor and citation index improve remarkably, this goal may seem elusive, but it can be achieved with the inclusion of more original-study publications. How then can we facilitate this, despite the fact that publications in journals like the SMJ do not seem to factor in as an important "Key Performance Indicator (KPI)" of doctors or institutions?

The Singapore Medical Journal represents the academic publication arm of the Singapore Medical Association. It serves as the journal to advance the medical professionalism of the members as well as the readership. Quality has moved beyond the traditional boundaries of pure academic and scientific studies and scholarly reviews. The journal has to keep up with the times and with its readers. Being one of the peer reviewed journals that is represented in the Index Medicus, it has a

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responsibility to uphold the honour. Lots of other local and regional publications keep the journal on its toes – the temptation of colour, accessibility on the Internet and ease of readability are some of these. The bottom line of any journal however is the scientific quality and readership.

Towards this end, the journal's editorial policies will be directed towards achieving these goals. The editorial board renewal process will continue. A framework for renewal at all levels of the editorial board including the editor himself has to be further refined. New enthusiastic members will be added on and retiring members (due to difficult time or effort commitment on their part) would be continued to tap on for their experience and counsel, even if they do not serve in the official editorial board.

There is a need to process-map every article submitted and clearly identify and correct unnecessary delays. Counter-check mechanisms must be in place to prevent lost and delayed articles if it hopes to attract its readership with quality submissions.


Reader-friendly contents would certainly be an attraction of any journal. This issue kicks off with a new series of Stamps in Medicine with the kind regular contribution agreed to by Prof Tan Sia Yong, whose enthusiasm in the medical circle goes beyond medicine, ethics and law. He will share his personal hobby of "Stamps in Medicine" with the journal readership and if the first article is anything to go by, we certainly have much to look forward to. It is entirely appropriate that he starts off his regular series publication with Hippocrates, the father of medicine. Towards the middle of the year, a new centre-page feature will kick off with current issues in medicine. The SMJ will continue its policy of generally accepting review articles by invitation only. However, review articles of high standards by those who have excelled in their particular subspecialty fields will still be considered after the peer review process. The invited editorial would continue to be based on one or more original articles in the issue and special invited editorials may be added on or substituted in instances. As in last month's issue, Medical Ethics will continue to receive greater coverage. Future articles on Medical Errors, Medical Audit, Genomic and Molecular Medicine simplified and Computer applications in medicine would be added as appropriate and feasible. An area the editorial board is keen on is to tackle the issue of Controversies in Medicine which can put forward opposing views by local experts. The popular Radiology Quizzes section will continue. Case reports, which have high educational value, will continue to feature in the SMJ although this will be more rigorously reviewed in view of the rapid increase in numbers of such submissions.

Since 2001, we have also introduced a "Fast track publication" for papers which are very original. The aim is for such reports (if highlighted to the editorial board) to go from acceptance to publication within three months. In the August 2001 issue of the SMJ, we published an article of the first report of a granulosa cell tumour of the nasal septum; the article was accepted for publication after peer review within a month. The Singapore Medical Association is exploring the introduction of a "Best Original Paper Award" soon. We do hope that such incentives amongst others would make the SMJ a more popular first choice submission journal.

All authors expect to get a quick response from the editor; the editorial team is mindful of this. The turnaround time for articles has been considerably reduced over the last few years. The SMJ and its editorial board is very thankful and grateful to all the reviewers for their contributions

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and objectivity and timely submissions. The entire peer review process will be revised. Ambiguities will be removed and the peer review process will be simplified. The reviewer's impression of the originality and quality of articles will also be religiously sought. The undue delay amongst some reviewers must be a problem that should be tackled by gentle persuasion; if that does not work, with realistic firmness.

What we need is more of your feedback on how the journal should change for the better. You will have a golden opportunity soon, when we do our readership survey. We hope you will exercise your right and help play a part in further transformation of the journal. The SMJ depends a lot on you, our reader. 

Publisher

Singapore Medical Journal
Level 2, Alumni Medical Centre
2 College Road
Singapore 169850
Tel: 223-1264
Fax: 224-7827
URL <http://www.sma.org.sg>

Design and Advertising

Lancer Communications Pte Ltd
69 Spottiswoode Park Road
Singapore 088659
Tel: 324 4337
Fax: 324 4661
Email: studio@lancer.com.sg

For advertising placement, call

- Charlie Teo at 324-4337

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