

## The Medical Journal of Australia — *prosperere, procedere et regna*

On July 4, exactly 90 years ago, *The Medical Journal of Australia* began its life “as the official organ of the British Medical Association in Australia”. Its purpose was clear — “to record the progress of scientific medicine, and to assist in rendering the practice of medicine in all its branches of the greatest benefit to the people of Australia”.<sup>1</sup> In that first issue, the president of the Victorian branch of the British Medical Association warmly welcomed the Journal, noting that it symbolised “the intimate union of all the branches of the British Medical Association in Australia”, and that it would “continue every week to indicate and advocate the common aims, interests, and ideals of the profession”. He closed by wishing that the Journal *prosperere, procedere et regna*<sup>2</sup> — “proceed prosperously and reign”!

The following 90 years have seen the formation of the Australian Medical Association in 1962,<sup>3</sup> and, with the advent of the *AMA Gazette* in 1968, the disappearance of Federal and Branch news in the Journal. In the late 1980s, after nearly 60 years of living the Australian dream of being an owner/occupier, the Journal’s publisher — the Australasian Medical Publishing Company (AMPCo) — sold its Sydney premises to finance the AMA’s move to Canberra. This was the culmination of the Journal’s *Sturm und Drang* decade, with the destabilising turnover of editors — six in all — and tensions caused by AMPCo’s financial difficulties.

However, after 90 years, the Journal’s purpose remains clear — to “be the recognised forum for information and commentary on all aspects of health care in Australia” through “original peer-reviewed clinical research of the highest standard”, “high level continuing medical education”, and “commentary and informed debate on standards of clinical practice, ethics, social, legal and other issues related to health care in Australia”.<sup>4</sup>

In this 90th anniversary issue, Gregory (*page 9*) surveys the “clinical research of the highest standard” published by the Journal during this time.<sup>5</sup> Its ongoing commitment to “commentary and informed debate on standards of clinical practice” is exemplified by the Quality in Australian Health Care Study<sup>6</sup> and the study of adverse events in Australian general practice,<sup>7</sup> both of which played a part in the lead-up to establishing the Australian Council for Safety and Quality in Health Care. The Journal’s role as a forum for “ethics, social, legal and other issues” is reflected in our reports on end-of-life decisions,<sup>8,9</sup> the health of asylum seekers in detention,<sup>10,11</sup> and in our commitment to Indigenous health.<sup>12</sup> Finally, pragmatic links to the world of medical research and to specialist and general practice were pursued through networking and the Journal’s Content Review Committee.

A cursory review of the Journal’s progress over the past 90 years will readily identify broad changes which have come to pass. There has been a noticeable decline in the number of clinical studies, case reports and the more leisurely reviews, with a concomitant increase in studies of healthcare interventions and health system performance, as well as those on adverse lifestyles, substance misuse, mental illness and, more recently, consumer concerns. With the rise of evidence-based medicine came a barrage of evidence-based guidelines and further delineation of levels of

evidence. The design and reporting of research itself adopted more rigorous formats, such as controlled trials, systematic reviews and structured abstracts.

Significantly, the number of authors per article continues to multiply,<sup>13</sup> and the international trend now is for authorship to involve a team of doctors, other healthcare professionals and scientists. Correspondingly, the number of Journal editors has also increased as the number of submissions continues to rise.<sup>13</sup> In 2003 we received a record 917 submissions, compared with 856 in 2001 and 741 in 1999.

On the downside, the blurring of the boundaries between commerce and research has spawned a culture of suspicion, particularly for research supported by pharmaceutical companies.<sup>14</sup> It is interesting to note that all Journal articles are now accompanied by an item noticeably absent a decade ago — the competing interests statement. The Journal’s policy of safeguarding

the integrity of research by exploring potential conflicts of interest of contributors and reviewers is detailed by Chew (*page 4*).<sup>15</sup>

What does the future hold? Just as Gutenberg’s printing press saw the demise of the monastic monopoly of manuscript production, electronic technology has changed both the essence of publishing itself, and ease of access to the latest research. *The Medical Journal of Australia*, like most other medical journals, simultaneously releases the electronic (*eMJA*) with the print Journal, and uses rapid online publication for selected articles. Future electronic developments are also anticipated.

There are those who promote the notion that peer review and editing are things of the past.<sup>16</sup> They believe science should simply be posted on the Internet, thus letting the world judge its quality. However, an editor’s first responsibility is to the readers, and they have signalled that they are too busy to separate the wheat from the chaff.<sup>17</sup> They prefer that to be the function of quality filters — the editors, peer reviewers and editorial staff who ensure the clarity, brevity and non-exclusive language of the final product. This bridging between the readers and the profession is the stuff of the Journal.

Despite enthusiastic predictions of its demise,<sup>18</sup> the printed Journal will live on for some time. There is something reassuring about knowing where a journal’s contents will be revealed, its portability from bed to breakfast table, and the feel of something physical, that binds readers to the paper Journal.<sup>19</sup>

In any event, whatever changes the future may bring, as long as the Journal continues to add value to its core content of original articles, editorials, reviews and informed debate on contemporaneous healthcare issues in Australia, *The Medical Journal of Australia* will most certainly *prosperere, procedere et regna*.

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1 The Medical Journal of Australia [editorial]. *Med J Aust* 1914; 1: 9.

2 Kenny AL. The Medical Journal of Australia [letter]. *Med J Aust* 1914; 1: 23.

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