

IMPORTANCE OF SELF AUDIT BY A JOURNAL TO MEASURE QUALITY IMPROVEMENT AND PLANNING FOR FUTURE

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Self audit by the medical journals constantly striving to improve their standard and quality of the manuscripts accepted for publication is extremely important. It not only provides an opportunity to look back at the progress made but also helps in future planning and take new initiatives to achieve the objective of a quality peer reviewed journal. We have been doing this exercise regularly for the last couple of years and found it extremely helpful. It was also heartening to note that it influenced some other reputed indexed medical journals to start self audit.¹

If we look back at the year 2006 we received a total of two hundred sixty eight manuscripts as compared with 220 in 2005 and one hundred forty in 2004. Again the number of manuscripts received from overseas has been steadily increasing ever since we started the online edition of Pakistan Journal of Medical Sciences (Pak J Med Sci website www.pjms.com.pk).^{2,3} The total number of manuscripts from overseas during the Year 2006 was one hundred seventy eight as against 37 in 2003, 62 in 2004, and 133 in 2005. (Table-I). In particular the number of manuscripts being received from our brotherly friendly country Islamic Republic of Iran has also increased significantly from 13 in 2003 to 21 in 2004, 74 in 2005 to 90 in the Year 2006. (Table-I).

Number of manuscripts being received from authors within the country has also registered an increase i.e. 78 in 2004, 76 in 2005 and 90 in the Year 2006. Since we practice open peer review system, some authors are reluctant to go through this process; hence some of them prefer to opt for journals which do not practice peer review to ensure early publica-

Table-I: Manuscripts received from
Pakistan & Overseas during 2003 - 2006

Name of Country	2003	2004	2005	2006
Bangladesh	02	04	03	07
Cameroon	-	-	01	-
Canada	-	01	03	-
China	-	-	-	01
Egypt	-	-	-	02
India	-	02	09	04
Ireland	-	01	01	-
Iran	13	21	74	90
Iraq	-	-	02	03
Jordan	04	04	08	14
Kuwait	-	01	02	02
Lebanon	-	01	-	-
Malaysia	-	-	-	03
Nepal	01	01	01	01
Netherland	-	-	-	01
Nigeria	01	02	07	16
Oman	-	-	-	03
Pakistan	77	78	76	90
Palestine	-	02	01	05
Poland	01	01	01	03
Qatar	-	-	01	-
Russia	-	-	-	02
Saudi Arabia	07	09	10	11
Thailand	-	01	01	-
Tunisia	01	02	-	-
Turkey	06	05	02	02
UAE	01	01	-	-
UK	-	01	05	08
USA	-	02	01	-
Total	114	140	209	268

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tion. This is an important reason why there has not been a significant increase in manuscripts from Pakistan. The total number of manuscripts published from overseas authors during 2006 was 72 of which 38 were from Iran alone as against 48 from Pakistan. (Table-II)

All this seems quite encouraging which shows the confidence of authors and research scientists not only within the country but overseas as well who selected Pakistan Journal of Medical Sciences for their publications. While this is certainly a positive development, we continue to face certain problems such as:-

Financial viability: Though some progress has been made as regards financial health of the journal but still it requires constant struggle. Publication charges received from the authors once their manuscripts are approved after peer review takes care of some of the expenditures but long term sustainability of the journal remains an issue. Pharmaceutical trade and industry all over the world remains a major source of revenue for the medical journals but in Pakistan the Pharma industry has different priorities. We are constantly subsidizing publication of this journal through subsidy from our sister publication "Pulse International" (www.pulsepakistan.com) a fortnightly medical newspaper.

Waiting time for publication: Despite the fact

Table-II: Number of manuscripts published during 2006

Country	No. of manuscripts published
Bangladesh	01
Canada	01
Holland	01
India	06
Iran	38
Iraq	02
Jordan	06
Nigeria	03
Palestine	03
Pakistan	48
Saudi Arabia	06
Turkey	01
UK	04
Total	120

that we have increased the number of manuscripts being published in each issue, we could not reduce the waiting time for publication after approval of manuscript which remains six months or more in most cases. Again financial constraints do not permit us to increase the frequency of publication making it bimonthly from quarterly. However, an attempt is being made to reduce this period. One of the initiatives that have been taken in this regard is publication of two additional issues of the Journal i.e. one in April 2007 and another in the later part of the year though officially it will remain a quarterly publication as we cannot afford a permanent change at present. We hope it will ensure early publication of some of the manuscripts.

Publication ethics: Authors, publishers, reviewers and referees as well as Editors of medical journals in the developed more civilized world abide by the well known publication ethics as recommended by Committee on Publication Ethics (COPE)⁴ and where these are considered norms. But in many developing third world countries it is not so which creates lot of problems. This is a constant source of worries for the Editors.

Correction vs. rewriting: Some of the authors fail to appreciate the difference between corrections and rewriting. When PDF files or computer print outs are sent for proof reading, they are not supposed to make so many changes or rewrite various portions. All these issues need to be looked after before finalizing the manuscript and its submission for publication.

Simultaneous submission and duplicate publication: This again remains a problem which always comes under discussion at different forums concerning medical writing and publications. Last year we had to take the unpleasant decision of black listing one of the authors and again this year our attention was drawn to an article published in our October-December 2005 issue which had earlier appeared in another journal.⁵⁻⁷ After necessary investigations and providing the author ample

opportunity to put forward his viewpoint, we had to black list this author under intimation to concerned authorities, agencies and abstracting services besides removing that paper from our database.

Last week our attention was drawn to yet another duplicate publication by the editor of Calicut Medical Journal regarding an editorial entitled "Identity crisis: Who is a vascular Surgeon" which was published in our January-March 2006 issue.⁸ It has been published in Calicut Medical Journal at the same time.⁹ We received this editorial note from Dr. Devender Singh from India. He was told that it just talks about situation in India whereas our journal has a much wider circulation and readership. It is an interesting topic; hence we would like to make it much more comprehensive after literature search and adding information relevant to Pakistan and other developing third world countries. It was also suggested that it will be a joint editorial to which he agreed. He was also informed that Pakistan Journal of Medical Sciences is a peer reviewed journal which accepts only those manuscripts which are exclusively submitted to this journal. After rewriting it, adding relevant references and including the situation in this region in general and Pakistan in particular, it was sent for peer review. After acceptance, the revised and rewritten editorial note was sent to Dr. Devender Singh to have a look at the final manuscript. After his approval and consent, it was published. Now we find out that the original version of this editorial note has also been published in Calicut Medical Journal while the manuscript we published is more comprehensive. However, it still comes under duplicate publication. We have taken up the issue with the author and are currently investigating. What final action has to be taken will be decided once we have heard the viewpoint of Dr. Devender Singh. Editor of Calicut Medical Journal has also been asked to conduct an enquiry at their end.

The fault lies with the Editors as well. Every author submitting a manuscript for publication is keen to see it in print and wishes to be

kept informed of the developments concerning the manuscript. If the authors do not receive any communication despite repeated reminders, they are left with no alternative but to submit such manuscripts to another journal. However, even in such cases, they are supposed to tell the truth and instead of hiding such information, it is always better to take the Editor of the journal in confidence whose guidance could be of immense help to all such authors.

It is usually felt that some of the authors intentionally avoid submitting a Letter of Undertaking signed by all the authors along with the manuscript. They simultaneously submit their manuscripts to different journals. When they hear that it has been accepted by a particular journal, they withdraw this manuscript from other journals. This is not only a bad practice but also highly unethical. It may help them once but they lose the confidence and trust of the Editors which will adversely affect credibility of such authors with the result that the journal editors may not be willing to process their manuscripts in future.

Letter of Acceptance: The authors are very keen and eager to get a letter of acceptance and once that objective is achieved, they do not show the same enthusiasm. Payment of publication charges is often delayed and returning the corrected copy after proof reading again takes longer periods. Some times they withdraw the manuscript once it is approved after peer review to get it published somewhere else without realizing that lot of valuable time was invested in the peer review process. Such last minute withdrawals once publication schedule is already finalized is very frustrating for the Editor and publishers. Failure to make payment of publication charges despite repeated reminders leaves the editors and publishers with no other option but to withhold publication of such manuscripts.

Education of authors: Some authors do not know how to convey the corrections of manuscripts sent to them in PDF file attachment. Some are unaware of what a short running title means.

Some do not check their e-mails regularly and at times have to be reminded numerous times or contacted on phone to respond to the queries. Failure to convey change of address by the authors, how to send figures and illustrations in JPEG format which ensures good reproduction, poor quality of English language are some of the factors which result in un-necessary delay in processing of the manuscripts.

Authorship: Though World Association of Medical Editors (WAME)¹⁰ and the International Committee of Medical Journal Editors (ICMJE)¹¹ has laid down criteria of authorship, many authors are not familiar with that. ICMJE guidelines for authorship states that "Authorship credit should be based on 1) substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data; 2) drafting the article or revising it critically for important intellectual content; and 3) final approval of the version to be published. Authors should meet conditions 1,2, and 3". Authorship is something which must be decided by the authors in case of multiple authors before starting to write the manuscript. The Editors has no role in it. Ghost written articles are often very difficult to detect. During 2006 we received five requests for change in authorship. In one case, since the information was conveyed by the corresponding author to add another name before publication, it was accepted. However, four requests came wherein it was requested to add more authors to manuscripts already published six to nine months earlier and publish an erratum. All these were certainly cases of offering gifted authorship to friends and colleagues to help them get credit needed for their academic promotion. This was highly unethical; hence their requests were turned down. In yet another case, when the manuscript was received from Palestine, it had listed only one author. During its processing, another author sent us an e-mail complaining that he was supposed to be the second author but his name has not been mentioned. The initial author

refused to accept him as second author and in such cases; Editors and publishers have to go by the authors mentioned at the manuscript at the time of submission. That is exactly what we did but they kept on fighting and eventually the author asked for withdrawing the manuscript and got it published in another Journal. This did create lot of problems for us as the whole publication schedule had to be revised including another manuscript to fill up that gap in pages.

In case of manuscripts being received from Iran, apart from the extremely poor quality of English language in some of them, typing of the manuscript from right to left rather than the normal left to right is also a problem. This also delays the processing of such manuscripts un-necessarily.

Number of Authors: At times even when one has strong suspicions about actual contributions by listed authors which are usually more than expected, one cannot arbitrarily limit their number. If details are asked, it will further delay the processing besides increasing secretarial workload which is something we cannot afford at present. Hence, we have to trust the corresponding author.

Additions to Reviewers database: We are constantly striving to increase our Reviewers data base to minimize the processing period but without much success. At presents it takes from a minimum of three to six months. Finding good quality reviewers is a problem with most of the medical journals in the developing third world countries. However, we are confident that in view of the steps that we have taken, this period will be reduced considerably during the current year.

Indexation in Medline: We intend to approach the National Library of Medicine to re-evaluate our journal for possible indexing in Index Medicus. The relevant details have already been furnished to them. Our journal was provisionally approved for inclusion in PubMed Central which contain full text peer reviewed journals but so far we could not overcome the problem of providing them XML

files. The quotation that we received from different companies providing this service has been very prohibitive. We are going to take up this issue with WHO EMRO hoping that it will be able to provide us some help and assistance in this regard. Similarly inclusion of Pakistan Journal of Medical Sciences by ISI has also been taken up though indexation in Medline and the much talked about Impact Factor are not going to be so important in the days to come in view of the fact that more and more journals are migrating to the net.¹² However, they are still considered as an important yardstick to measure the quality of any medical journal. This is going to remain so until new measures or system to grade the quality of medical journals become effective and popular.

The important salient features of our revised publication policy¹³ starting January 2007 will be as under:

- * It has been decided that as far as possible we will insist and try to implement that the authors abide by the maximum length of manuscripts that we accept for publication i.e. of 2500 words for original manuscripts and 3500 words in case of review article. It will enable us to accommodate more manuscripts thereby reducing the waiting period.
- * In future the authors will be encouraged to make payment of publication charges immediately once the manuscript has been approved after peer review so that there is no disturbance in publication schedule.
- * All manuscripts will be carefully graded A, B and C. Those in A category will be processed speedily and may be published much earlier as compared to those manuscripts which fall in B and C category. This will be helpful in further improving the standard of the journal.
- * More and more reviewers will be persuaded to switch over to Online review to shorten the peer review period. It is not only economical but also quick.
- * There will be more emphasis on publishing clinical studies. Authors will be encouraged to get their studies approved by their respective Institutional Ethics Committees and also declare source of funding.
- * Original epidemiological studies will continue to receive preference in processing and publication.
- * Letter of undertaking to be signed by all the authors as well as the Reviewers. Performa will be revised to make it more comprehensive.

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