Anchored to principles, moving with the times

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he *Singapore Medical Journal* (SMJ) has been in circulation since March 1960. It started as the only medical journal in Singapore, publishing the work of our local doctors and providing the platform for sharing of knowledge and information among the medical profession. Since then, many medical journals have emerged in Singapore. Most of these journals serve a selected population, for example, the specialist or the family physician, and are peer-reviewed and indexed in Index Medicus.

The SMJ has undergone many changes in the past decades. There have been nine past editors-in-chief, with each bringing their strengths into the Journal to build it up to where it stands today. I took over the helm from Professor Wilfred Peh in January 2009 and have sought to take small steps to further improve the Journal. From a mainly local publication, the SMJ now publishes many articles from around the region. As of February 2012, the Journal has acquired a first impact factor of 0.73. Although this is nothing to shout about, considering the many regional and international journals with impact factor exceeding 5 and some even in the double digit range, I feel it is appropriate to share this development with our loyal supporters – authors who have chosen the SMJ as the choice platform for sharing their work, as well as our reviewers who have contributed their invaluable time and expertise to the peer-review process.

There are many aspects of the SMJ that, however, will not change. These are the principles that form the pillar of the SMJ, directing the daily operations of the Journal. The personnel in the secretariat team may change, but the commitment to be responsive to our authors, reviewers and the editorial board remains. With regard to the type of articles published by the SMJ, the emphasis will also remain unchanged – we welcome any article of interest to a wide body of medical practitioners. These articles may be in the form of systemic reviews, meta-analyses, original research, review articles, continual medical education articles or case reports. The common denominator is the contribution of knowledge and understanding to the disease entity or subject matter put forth in the article.

The principles governing the review of submitted manuscripts will remain consistent as well. As the SMJ is published in the English language, the initial screening is to ensure that the language of the manuscript is acceptable. For this, the editorial secretariat adopts a more inclusive rather than exclusive approach, rendering as much help as possible to authors with regards to copy-editing. The editorial secretariat then checks the manuscript for past publication in other journals as well as plagiarism. The editorial board takes

a very strong stand against duplicate publication and plagiarism, and will issue a stern warning to authors if there is evidence of either. Repeat offenders may be black-listed by the journal. The manuscripts then undergo a process of peer-review. This may be performed by a member of the editorial board or sent to independent reviewers for their comments. This process ensures that every manuscript that passes the initial screening is peer-reviewed. While authors may recommend their preferred reviewers, the editorial board reserves the right to select the reviewers. This principle ensures that every manuscript is reviewed in a just and unbiased manner. The Journal also keeps the reviewers anonymous so that no complication will arise from liaison between authors and reviewers. Finally, the principle of free and rapid sharing of information entrusted to the Journal ensures that all published articles remain accessible with no charge and that accepted articles are published in a timely manner.

Notwithstanding these constants, there are some changes that one can expect from the SMJ. In the last five years, the number of manuscripts received by the Journal has increased steadily. Despite the increased manuscript load, the turn-around time has shortened significantly. This is possible only with the commitment and hard work of the editorial team as well as the strong support of our reviewers. Content wise, while regular columns such as Medicine in Stamps, Pictorial Essays, Clinics in Diagnostic Imaging and ECG Series are maintained, readers can look forward to more themebased publications, such as the Oncology issue in January and Infectious Disease in this current issue. We believe that this will enhance the reading experience for our readers. In addition, we have revamped both the cover and inside pages of the journal. The new page layout and font change are designed to enhance readability, while the cover image, which shows blue swirls moving in an upward direction, alludes to the rapid, forward movement of medical knowledge as well as our commitment to constantly move with these advancements. We hope that this new look will not alienate our readers but instead provide a relaxing yet enriching reading experience.

Finally, it has been said that nothing in this world is constant except change. With the awarding of the impact factor for the Journal, the attempt for theme-based issues and the new look, the editorial team will strive to continually improve the Journal through active engagement with our contributors as well as readers. It is my wish that the SMJ would not only serve our local medical community but be a regional general medical journal – a journal that remains anchored to its principles, yet moving with the times to serve the needs of our readers.