My Vision for JAMA

Howard Bauchner, MD

JOURNALS ARE SACRED TRUSTS. THEY ARE THE MOST IMPORTANT VOICE OF THE SCIENTIFIC COMMUNITY AND THE BRIDGE BETWEEN INVESTIGATORS AND CLINICIANS. JOURNALS HELP ESTABLISH ACCEPTED PRACTICE NORMS, THEY INFLUENCE POLICY DECISIONS, AND THEY ARE READ BY CLINICIANS AND PATIENTS ALIKE. RECENTLY, JOURNALS HAVE EVOLVED: MOST JOURNALS NOW CONTAIN FAR MORE VALUE-ADDED MATERIAL THAN ORIGINAL RESEARCH PAPERS. MANY ARE EXPERIMENTING WITH NEW WAYS OF COMMUNICATING, INCLUDING PODCASTS, VIDEOS, AND WAYS TO REGISTER THE OPINIONS OF THEIR READERS. THE BEST JOURNALS CONTRIBUTE TO THE DISCOURSE ABOUT THE MANY COMPLEXITIES OF MEDICINE AND INFLUENCE HOW IT IS PRACTICED.

I have been given the reins of a great publication: JAMA. I thank the selection committee for choosing me and the outgoing editor, Dr Cathy DeAngelis, and her staff, who have done an outstanding job these past 12 years. The stature of JAMA has never been greater and the journal has clearly thrived under Cathy’s leadership. She has enhanced the scientific rigor of JAMA research reports. In numerous editorials, she has carefully articulated the importance of understanding and reporting possible conflicts of interest. Although concerns about potential conflicts have always existed, Cathy’s persistence and JAMA’s leadership in this area have led to substantial changes in the reporting of such conflicts in journals and academic medical centers. In addition, her outspoken and often-repeated concerns that each researcher has an ethical responsibility to report the results of studies accurately contributed substantially to mandatory registration of clinical trials. This latter success has done more to ensure the scientific integrity of medical research than any other change in the last decade.

I am a pediatrician whose academic home for the past 20 years has been Boston University School of Medicine and Boston Medical Center (formed by the merger of Boston City Hospital and University Hospital). The past decade, I have led a large division of general pediatrics that remains committed to clinical and health services research focused on low-income urban children. My passions have been my own research and mentoring and development of academic careers. The division has been fortunate to have a thriving 2-decades-old federally supported fellowship training program and the majority of faculty members have received career development awards from the NIH and various foundations, or both. Virtually all of our faculty members have become successful independently supported investigators. My own training is in epidemiology and biostatistics, and I have conducted numerous clinical trials and observational cohort studies.

My editorial experience and knowledge of publishing comes via Archives of Disease in Childhood (ADC), the official publication of the Royal College of Paediatrics and Child Health (UK), starting out as the journal’s American Editor in 2000 and becoming Editor-in-Chief in 2003. During the past 8 years ADC has aggressively pursued intelligent innovation, experimenting with different types of articles, columns (including global health reports), critically appraised topics, and guideline reviews and with interactive radiology and dermatology sections. We supported original research, ensuring that our articles reflected the vast enterprise of medicine. These reports became shorter and more focused. Readership surveys were conducted every 3 years and the information was used to help sculpt content and develop new initiatives. ADC pursued relationships with various pediatric societies around the world. I have come to appreciate how health care is organized and delivered in many European, Asian, and South American countries. I was blessed with editors who were energetic, intelligent, innovative, and committed to making ADC a better journal.

What about the future of JAMA? Both the print edition and Web site are being redesigned. We are hoping for a more modern look that is easier to navigate and better highlights our content. We will experiment with new and creative ways to present material and to engage and hear from our readers. The content will also evolve over time. JAMA must be a place for ideas—ideas that affect health care in the United States as well as around the world. Medicine is a complex organism, and JAMA must reflect its myriad moving parts. Evidence will be balanced with narrative, and the views of influential practitioners and observers of medicine will be published.

Author Affiliation: Dr Bauchner (howard.bauchner@jama-archives.org) is Editor in Chief, JAMA.

©2011 American Medical Association. All rights reserved.
JAMA serves many communities of readers, but 2 deserve particular mention. The first is physicians and other clinicians who spend most of their time caring for patients. My goal is to ensure that our content helps them appreciate the complexities of health care in the 21st century and contributes to their ability to care for patients and understand the politics of health care. The second community is our authors—both those who contribute original research reports and those who contribute other material, such as editorials and reviews. Although JAMA will remain highly selective, I pledge that we will continue to treat our authors as colleagues and respected peers. I have submitted many papers for publication to numerous journals—I know the joy of acceptance, particularly as a young investigator, and the agony of defeat. But most important is the inherent worth, regardless of the outcome of the peer review process, of being treated with respect.

The Archives Journals are an important part of the JAMA and Archives Journals family. Many of the changes at JAMA will be incorporated into these publications. In addition, the editors of the Archives Journals and I will meet regularly to discuss, debate, and learn from one another. One of the most rewarding aspects of my time at BMJ Publishing was our annual meeting, at which the editors could interact with one another and share both our successes and failures. The Archives Journals make a substantial contribution to the scientific endeavors of medicine and that will continue.

I am asked many times about my vision for JAMA. How will I take a great journal and make it even better? I want to make the journal a compelling read, from its original research content to its reviews and editorials. We will innovate and experiment. For example, I am hoping that soon our abstracts and electronic table of contents will be available in a number of languages. Journals must evolve to thrive. We will have many successes and some failures. JAMA will participate in the discussion of the future of medicine: its pages will be filled with papers that contribute to our understanding of where medicine is, where it should go, and how it should get there. I suspect that few of you will read JAMA from cover to cover each week, but my goal is to ensure that much of our content is of interest to you and enriches your professional life.

Conflict of Interest Disclosures: The author has completed and submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest and none were reported.