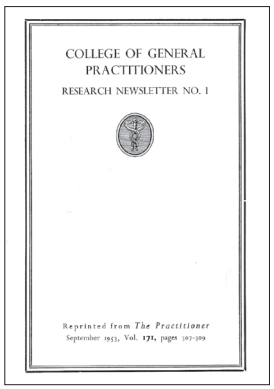
# Editorials

# The *BJGP* at 60

The *British Journal of General Practice* (*BJGP* ) started life in 1953 as a cyclostyled newsletter called *Between Ourselves*, sent out by Dr Robin Pinsent, a Birmingham GP who was a founder member of College Council and the leader of the College's first Research Committee, to a small group of research enthusiasts. The first issue of the *Research Newsletter* was published in the same year, edited by Dr RMS (Mac) McConaghey, a GP from Dartmouth in Devon.


COLLEGE OF GENERAL PRACTITIONERS

RESEARCH NEWSLETTER NO. 1

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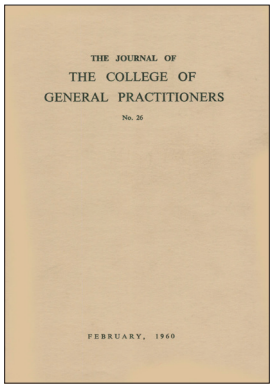
McConaghey's statement of the reasons for undertaking research in general practice in primary care, which forms part of his introduction to the *Newsletter*, can hardly be bettered:

*'There was a time in the history of medicine when all research was general-practitioner research, for there were none but general practitioners to undertake it. ... Jenner recognized the relationship between cowpox and smallpox, and Withering observed the diuretic effect of the foxglove leaf. Then came a change in the pattern of medical practice. Institutional care of serious illness and research in hospital developed on an increasing scale. The quest for more facts in the field of general practice slackened, and family doctors devoted their energies to relaying to patients the new knowledge that their hospital colleagues had gained. The flame of general-practitioner research burned low, to be fanned into occasional brilliance by such men as James Mackenzie and William Pickles. Now, once again it is being realized that opportunities to undertake research into conditions encountered in general practice are unique and wide, and that general practitioners have a duty to work on many problems which might otherwise not receive the attention they deserve.'*[1]

These aspirations reflected the excitement of the early 1950s: the discovery by Francis Crick and James Watson of DNA and the ascent of Everest by Edmund Hillary and Tenzing Norgay. Ten years later, in 1963, the newsletter had grown into the *Journal of the College of General Practitioners*, and Mac was still at the helm. This was the year of the assassination of John F Kennedy, Bob Dylan's recording of *Blowin' in the Wind*, the Great Train Robbery, and Hitchcock's *The Birds*.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No. 26

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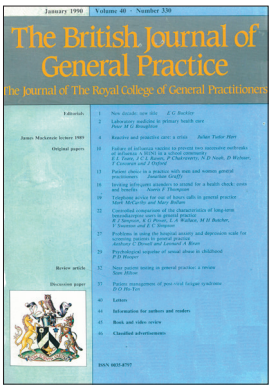
Two years earlier the National Library of Medicine in Washington, US, had independently included the Journal in *Index Medicus*, giving international recognition to the unique body of knowledge being collected through research in general practice. As Sir Denis Pereira Gray, editor of the Journal from 1972 to 1980, has pointed out:

*'This was the historic turning point. Two years before there was a general practice professor anywhere in the world, this small, nine-year-old, highly decentralised College of General Practitioners, with its scholarly editor in a remote provincial practice, established general practice as a new independent discipline, for the first time in the world.'*[2]

1973 will be remembered for Watergate, the end of US involvement in the Vietnam War, and the first transatlantic flight of Concorde. Value Added Tax was introduced at 10%, and a terylene College fellowship tie cost £1.77. Denis Pereira Gray's key contribution was to firmly establish the academic credentials of what was then the only peer-reviewed journal of general practice in the world. A rigorous peer review system and careful statistical assessment were key, while the submission and publication of challenging and controversial editorial and discussion material was encouraged. The College nailed its colours to the mast by spending a substantial proportion of its budget (up to 20% at one point) on the Journal, and at the same time defending editorial freedom, which it has continued to do up to the present day. The Journal was subtitled the *British Journal of General Practice*, which became its formal name in 1990.

By 1983, Graham Buckley had taken over from Simon Barley as the Journal editor and, like all editors had the challenging task of balancing the publication of original research, the dissemination of good clinical practice, and commentary on the interface between medicine and the socio-political context. The 1980s were times of great expansion of academic general practice, as the recognition of general practice surgeries as ideal undergraduate teaching environments dawned on the General Medical Council,[3] and the universities began to look with more interest at community-based teaching. The early 1980s were also the time of Reagan's Star Wars initiative, the beginning of the Space Shuttle Program, and the arrival of cruise missiles at Greenham Common.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1993, and Alastair Wright is now in the editorial chair. The Maastricht Treaty has been signed and the Washington Peace Accords between the Palestine Liberation Organisation and Israel are on the table. These major international agreements were preceded by Sir Michael Peckham's review of research and development (R&D) in the NHS in 1991,[4] and the influential Culyer report on R&D funding in 1994,[5] which laid the foundations for a substantial and solid funding stream for primary care research for the next two decades. Wright, correctly,

focused on measuring and maintaining the impact of the journal. The bibliometrics showed that the *BJGP* was well ahead of other journals in the field, and could be judged objectively as *'probably the most read and influential journal of general practice in the world'*.[2] As undergraduate teaching funding through the Service Increment for Teaching (SIFT, and its equivalent in the other countries of the UK) moved into the community, the departments of general practice and primary care in the medical schools enjoyed another period of expansion.


Research and development in primary care was further strengthened in 1997 by the important report on NHS Research and Development by Professor David Mant[6] and the influential MRC Topic Review, led by Professor Nigel Stott.[7] David Jewell became editor of the *BJGP* in 2000 and recognised the continuing tensions between maintaining the Journal as a service to the research community and as a publication of wider relevance and interest to a much larger College membership. There had been recent major disagreements between the owners and editors of both the *Journal of the American Medical Association* and the *New England Journal of Medicine*, and on one or two occasions, editorial independence at the *BJGP* also needed vigorous defence. By 2003 the human genome had been sequenced and the Iraq war had started. Three years later, with great farsightedness, Professor Sally Davies established the National Institute of Health Research and the National School of Primary Care Research, which, over the past 7 years, have added greatly to the opportunities for research and research careers in general practice and primary care.

So, 2013, 60 years on and where does this leave the *BJGP*? It remains the second most highly cited journal of primary care research in the world, although we are still waiting for the calculation of the 2012 Impact Factor. Last year we recorded 1.2 million full-text downloads from the *BJGP* and PubMed Central sites, and 2.5 million page views across the two sites, with almost 1 million unique visitors: one-quarter from the US. We lead the field in our use of open peer review, our paper-short/web-long publishing strategy, our recently-introduced open access publishing arrangements and our support for reviewers. The *BJGP* archive is now digitised and fully searchable back to 1953. When we move to our new HighWire publishing platform next year, further significant improvements in presentation, appearance, accessibility, and functionality will emerge.

We now provide a superb service for our authors: the median time to an initial decision on an article submitted via our online manuscript handling system is 11 days. Following peer review and revision we give a final decision to 83% of our authors within 2 months of submission and to 93% within 3 months. Our ability to respond rapidly depends to a large extent on the diligence and quality of our peer reviewers — over 1000 of them — who we now try to support by providing detailed guidance on reviewing and additional material on critical appraisal and, in the near future, a systematic approach to feedback and comment on review quality. This is my opportunity to thank them all, and also to pay tribute to and thank most warmly the editorial team in the RCGP who make the Journal the excellent publication it is, and the members of our UK Editorial Board and the International Advisory Board for their friendship and advice.


The main challenge for the future is one that all my predecessors have shared: how do we ensure that the Journal continues to flourish as a world-recognised publisher of top-quality primary care research, backed up by intelligent and influential debate and opinion, supplemented by interesting, entertaining and provoking non-research material, all in a single publication? You can't please all the people all of the time, as Abraham Lincoln discovered, and it may be that over the next few years, with changes in the paper and digital publishing environment, these functions will become separated. Whatever changes take place, the editor and the College remain committed to the continued publication of high quality peer-reviewed research.

**ADDRESS FOR CORRESPONDENCE**

**Roger Jones**
Royal College of General Practitioners, 30 Euston Square, London NW1 2FB, UK.
**E-mail: rjones@rcgp.org.uk**

**Roger Jones,**
*BJGP Editor, London.*

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