Backlash at MJA for firing another editor

Dr. Stephen Leeder didn’t take the job for the income or to improve his résumé. With a career spanning more than five decades, including a stint as dean of medicine at the University of Sydney, he was already one of the most well-known and respected academic physicians in Australia. It was, instead, an objective that guided his decision — two objectives, actually.

Those objectives were expressed in the very first issue of the Medical Journal of Australia (MJA), published more than a century ago: to keep physicians abreast of advances in their profession; and to provide evidence to inform discussions on health policy. These values aligned with his own, so in April of 2013, Leeder accepted the position of editor-in-chief of the journal.

He enjoyed the work — the writing, seeking comment on current events in medicine, tweaking the journal’s design. Encouraging authors, whether young or not-so-young, also made the job rewarding. He had plans to improve the journal, to introduce more formats, to usher it further into the information age.

Those plans, however, were curtailed on Apr. 29, when he was fired by the board of the Australasian Medical Publishing Company (AMPCo), the subsidiary of the Australian Medical Association that publishes the journal. Leeder had disagreed with the board’s decision to outsource some production, copyediting and administrative work to Elsevier, a large academic publishing house.

“I was escorted from the termination interview to my office, asked to identify my goods for packing and dispatch to my home, and then escorted from the building. No member of the AMPCo board was present. Virtually all the editorial team watched this aghast,” Leeder wrote in an email to CMAJ. “We were making progress. That has been cut short. I feel bereaved and deeply hurt.”

In response to a request for comment on the situation, a public relations representative for AMPCo forwarded two media releases to CMAJ. The first, dated Apr. 23, announced the decision to outsource work to Elsevier. The change was made to improve efficiency and provide the journal access to Elsevier’s “expertise and digital experience to the production process.” AMPCo promised there would be “no change in the MJA’s editorial independence and control over content development.” The second press release, dated Apr. 29, stated that Leeder “will conclude his tenure” effective immediately because he and the board could not agree on “the necessary steps required” to ensure the journal’s future success.

“There are many ways to cut costs, but cutting core staff has been shown repeatedly not to work,” Leeder wrote in an email. “MJA could in my view work with an enlightened, entrepreneurial board to create new revenue lines, as many association-owned journals have done.”

Word of Leeder’s dismissal spread quickly, not only in Australia’s medical community but around the world. And it raised many questions among those interested in scholarly publishing. How can medical journals remain financially viable in an age of declining advertising, subscriptions and medical-association membership? Does outsourcing to an academic publishing company affect editorial quality? Is reducing staff without an editor-in-chief’s consent a violation of editorial independence?

More than a few people are also wondering how the MJA will attract a new editor-in-chief, considering that less than three years ago, Leeder’s predecessor had also been fired after a dispute with the AMPCo board. As Dr. Richard Smith, former editor of the BMJ, put it on his blog: Who would want to run a journal that goes through editors like a professional soccer team goes through coaches?

Restoring tarnished reputation

In January 2011, Dr. Annette Katelaris took the job of editor-in-chief of the MJA, with great enthusiasm. She believed the journal was important, that it could provoke debate on important topics, influence health care decision-makers, improve patient care and help doctors sift through the deluge of medical information thrown at them.

She jumped into the role, redesigning the print edition, relaunching the website and revamping the editorial process to reduce the time it took to publish a manuscript by more than 30%. Author submissions to the journal increased, as did readership and media presence. But like Leeder a few years later, Katelaris found herself in conflict with the AMPCo board and, after 18 months on the job, she was fired.

“I was passionate about the MJA and the agenda it supported. I was devastated when I was sacked.” Katelaris, who is now the director of professional medical education at the University of Sydney, wrote in an email to CMAJ. “After I was sacked, the reputation of the MJA was significantly tarnished.”

Following Leeder’s firing, the jour-
nal’s reputation appears to have fallen even further, if the reaction in the medical community is any indication. Many doctors in Australia expressed shock over how Leeder was treated, describing him as a man of “outstanding intellect and integrity.” All but one member of the journal’s editorial advisory committee have resigned. “Professor Stephen Leeder as editor of the Medical Journal of Australia demonstrated intellectual rigor, unquestioned ethics and a strong literary ability,” Dr. Michael Giksman, an occupational physician in Sydney, wrote in an email to CMAJ. “A rare combination in any setting.”

The backlash was so strong, in fact, that it prompted AMPCO to publish an open letter to the medical community on May 3 defending its position. The decision to outsource came after an 18-month review of AMPCO business, stated the letter, which found that the “future viability” of the MJA was at risk and it was “absolutely necessary to seek operational efficiencies.” The letter also criticized the media coverage of the turmoil at the journal, claiming that reports of Leeder’s poor treatment upon termination were “totally inaccurate.”

It will take more than open letters, though, to restore confidence in the journal among physicians, according to Katelaris. “The reputation and the goodwill offered to the journal by thousands of reviewers and contributors are at risk,” she stated. “The only way to restore the reputation of the MJA and to attract an editor of substance is to appoint an independent editorial board.”

Outsourcing and independence

Some observers of the controversy in Australia believe the fierce opposition to outsourcing that led to this mess may be unfounded. Many scholarly societies outsource some or most of their publishing functions to established academic publishers and receive not only cost savings but also access to valuable online tools and platforms, according to Jeffrey Beall, a scholarly communications librarian at the University of Colorado, Denver, who runs a popular blog, Scholarly Open Access, that monitors open-access publishing practices.

The economy of scale for large publishers makes it cheaper to produce a medical journal, and those savings can be passed on to the medical society that owns the publication. A major publisher can also increase a journal’s visibility and reach, linking it to thousands of academic libraries and improving access to abstracting and indexing services, noted Beall. Elsevier, for example, operates popular online platforms such as ScienceDirect and Mendeley.

“So, if this outsourcing is such a bad idea, why are so many scholarly societies doing it?” Beall wrote in email to CMAJ. “In fact, it’s a good idea for scholarly societies, their members and the consumers of scholarly research.”

Also showing support for outsourcing was Dr. Richard Horton, editor-in-chief of The Lancet, which is published by Elsevier. He took to Twitter following Leeder’s firing to express his opinion that Elsevier is “100% supportive of editorial independence” and “extremely committed” to investing in the growth and success of journals.

Some of Leeder’s objections to Elsevier, however, are based on ethics, not economics. In an article posted after his firing, he wrote that many academicians and researchers are critical of Elsevier’s business practices. This is the company, after all, that partnered with pharmaceutical companies to produce “custom publications” to promote their drugs, noted Leeder, pointing specifically to the Australian Journal of Bone and Joint Medicine, a fake journal sponsored by Merck.

Katelaris has also been critical of outsourcing copyediting at the MJA. The meticulous in-house copyediting improves the journal’s quality and, subsequently, its credibility, she noted in an email to CMAJ. Lack of in-house editing, she suggested, reduces a journal’s ability to be agile, newsworthy and vibrant. “Any decision to outsource should only be made with the support of the editor, who should have a substantial say in which company is used if there is a commercial imperative to outsource,” wrote Katelaris.

This is an opinion shared by Dr. John Fletcher, editor-in-chief of CMAJ. The owner of a journal, of course, has a right to monitor expenses and to set the editorial budget. “However, it is primarily the purview of the editor how the editorial budget is spent,” said Fletcher, who noted that the outsourcing of editing could affect the tone of the articles in a journal and relationships with authors.

The situation in Australia has some similarities with a near-decade-old controversy at CMAJ. In 2006, Canadian Medical Association (CMA) Media, which owned CMAJ, fired the journal’s editor-in-chief, Dr. John Hoey, who had held the position for nearly a decade. The CMA had censored an article in the journal, which Hoey viewed as a “clear violation of the principle of editorial independence.” As in Australia, the firing led to resignations at the journal and much negative publicity.

“But something good that came out of that was a review of the governance of the journal, so that there are now clearly defined roles and responsibilities for the owner, the publisher and the editor-in-chief,” said Fletcher. “And if there is substantial disagreement between the owner and the editor-in-chief, the independent Journal Oversight Committee is mandated to intervene.” — Roger Collier, CMAJ