CMAJ

Why Canada needs CMAJ

Diane Kelsall MD MEd, Matthew B. Stanbrook MD PhD, Kirsten Patrick MB BCh DA, Ken Flegel MD, Erin Russell MSc, Barbara Sibbald BJ

n editorial in the first issue of the *Canadian Medical Association Journal (CMAJ)*, in 1911, declared "If Canadian thought upon medicine is to make that impression upon the world ... it must be concentrated in one channel. What that channel shall be remains for the thinkers themselves to decide."¹ For the past 105 years, that channel has been *CMAJ*.

Recent events at the journal, including the disbanding of the Journal Oversight Committee and dismissal of the editorin-chief,² have prompted some to speculate whether there is a future for national medical journals such as *CMAJ*.³ Others have wondered whether journals — national or otherwise — are approaching their final act. Too slow, too expensive, too limited, too static — these are some of the criticisms.⁴ Is there a place for *CMAJ* in Canada and beyond?

CMAJ has been publishing continuously for more than a century. A mere handful of journals can claim such longevity, and most, like *CMAJ*, remain influential and respected publications. *CMAJ*'s authority derives not from its current page counts, Web hits or impact factor, but from its place in medical history. It has told the medical story through a century that future generations will likely remember as the zenith of medical science, from the second industrial revolution into the information age, through epidemics, wars and natural disasters. No new journal, however well-financed, can ever purchase or replicate such a history; it can be earned only through equally long years of ethical, professional publishing.

The journal's years of contributing to medical science should not be dismissed casually, trivialized or ignored. *CMAJ*'s influence today is rooted in this legacy, and it extends well beyond Canada's borders.

CMAJ has never been intended solely for Canadians, but it is and always has been Canadian medicine's most visible platform on the world stage. Although Canadians have done well earning their place on the world's other great platforms of medical science, *CMAJ* is the one that belongs to us, to Canadians. The opportunities *CMAJ* confers on the outstanding scientists and clinicians who submit their work to the journal today are the same opportunities it conferred in the past to Canadians who changed the course of medicine, including Drs. William Osler, Frederick Banting and Fraser Mustard.

But *CMAJ* is not frozen in a distant past. The journal has evolved in response to a changing world. In its early days, the content reflected the issues of the time, such as syphilis, goitre and high infant mortality. Over the years, the journal's voice has contributed to the public discourse on medicare, cigarette packaging, asbestos, *Clostridium difficile* and other public health and policy problems. Today, *CMAJ* addresses contemporary concerns such as physician-assisted death, solitary confinement and refugee health.

EDITORIAL

Similarly, editorial and production processes have evolved in response to advances in technology and changes in stakeholder expectations. *CMAJ* is available in several formats and is supplemented by podcasts, blogs, videos and a robust social media presence. To offer more opportunities for Canadian and international clinicians and scientists to share their work, *CMAJ* launched *CMAJ Open*, an open-access research journal.

CMAJ's influence extends well beyond Canada's borders

As we adapt further to an increasingly digital world — a world characterized by real-time conversation and real-time access to knowledge — the journal will continue to change. The future *CMAJ* will likely look and function differently from today's journal.

What will endure, however, is the commitment of *CMAJ's* editors to offer the journal to Canada and the world as "a medium for the expression of all that is best in Canadian medicine. For practitioners of general medicine, or in any special department of it; for workers in the laboratory or the hospital, a vehicle is offered, which goes wide afield, for the conveyance of fresh information, free comment, and sound opinion."¹

Canada, *CMAJ* is *your* medical journal. If you value the journal as we do and have thoughts about how it can best continue its mission well into its second century, now is the time to share them with us (editor@cmaj.ca).

References

- 1. Official notice. Can Med Assoc J 1911;1:57-8.
- Kelsall D, Patrick K, Stanbrook MB, et al. Upholding the integrity of your CMAJ. CMAJ 2016;188:E113-4.
- Richard Smith: the death throes of national medical journals [blog]. BMJ 2016 Mar. 2. Available: http://blogs.bmj.com/bmj/2016/03/02/richard-smith-the-death -throes-of-national-medical-journals/ (accessed 2016 May 10).
- Krumholz HM. The end of journals. Circ Cardiovasc Qual Outcomes 2015; 8:533-4.

Competing interests: See www.cmaj.ca/site/misc/cmaj_staff.xhtml.

Affiliations: Editor-in-Chief (interim) (Kelsall), Deputy Editor (Stanbrook, Patrick), Senior Editor (Flegel), Assistant Editor (Russell), News and Humanities Editor (Sibbald), *CMAJ*

Correspondence to: CMAJ editor, editor@cmaj.ca

CMAJ 2016. DOI:10.1503/cmaj.160539

All editorial matter in CMAJ represents the opinions of the authors and not necessarily those of the Canadian Medical Association or its subsidiaries.