The publishable paper
How does the BMJ decide?

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BMJ
What BMJ does not publish

- pure laboratory based research
- animal research
- case reports (unless presented as lesson of the week or drug point)
- case series with no (or inadequate) control group
- retrospective studies using case notes, charts, and other routinely collected records
- non-randomised comparisons
- intervention studies with no control group
What BMJ does not publish (2)

- hypotheses
- papers describing interventions and initiatives without evaluating them
- simple prevalence or incidence studies
- cost of illness studies
- surveys of self-reported practice, rather than observed practice
- simple ("open loop") audits without intervention and reaudit
- clinical guidelines based on expert opinion rather than evidence
For all papers

- Is the paper important?
- Will the paper add enough to existing knowledge?
- Does the paper read well and make sense?
- Originality — does the work add enough to what is already in the published literature?
- If so, what does it add?
- Importance of the work to general readers — does this work matter to clinicians, patients, teachers, or policymakers?
- Is a general journal the right place for it?
- Scientific reliability
The process

- The BMJ peer reviews all the material it receives
- Half the original articles are rejected after review in house, usually by two medical editors
- Not sufficiently original
- Serious scientific flaws
- No important message for a general medical audience
- Priority to articles that will help doctors to make better decisions –
  - (clinicians, public health doctors, doctors in health policy)
- We may screen a research paper by reading only the structured abstract.
- First decision on all manuscripts in 2-3 weeks usually earlier.
- We reject about 2/3 all submissions without external peer review.
- BMJ uses an open peer review system.
Further screening

- Screening by senior editor
- External peer review

*If generally positive*

- Discussed in weekly manuscript meeting
- Assessment by clinical epidemiologist
- Statistician
- External expert
- In house editors

- Final decision in 8-10 weeks of submission
External reviewers?

- Did the reviewer help us make a decision?
- Courteous and constructive
- Reviewers advise - editors make decisions
- One aim of peer review is to improve the paper
- Maintain confidentiality
- Declare competing interests
Finding reviewers

- This is more an art than a science!
- You want someone to do quality work for you
- You want that person to be scholarly, honest, punctual, courteous, constructive
- Usually remain anonymous
- Usually work for free

**Where do you find such people?**
Introduction

- Why did you do the study?
- What does your work add to existing literature?

- Introductions should be short
- Relevant articles should be systematically reviewed
- Mention the study design you used
Methods

- What was the study design?
- How were the subjects recruited?
- Why were some excluded?
- What was the power of your study?
- What was done to the subjects?
- How were the data analysed?
- Ethical approval
Was the sample size estimated? How?

“We estimated that 150 respondents would allow proportions to be estimated with 95% confidence intervals for proportions of 5% (0 to 10%) ... Assuming a response rate if 66% we estimated that a minimum of 225 GPs...”

How was randomisation done?
“We used random number tables...”
What study design was used?

“We used a randomised cross over design.”

If the method is complex -

- Name the different stages, groups
- Use flow diagram?

How were the subjects recruited?

“We studied the first ejaculates from healthy unpaid sperm donors that were collected in our centre...”

Why were some excluded?

“We excluded donors aged less than 20 and over 45 as age can affect the characteristics of sperm.”
What statistical tests were used?

“Data were entered and analysed with SPSS, and 95% confidence intervals were calculated with CIA. (11)”

Why were they considered to be appropriate?
Are the results reproducible?

- Did you get the same result when the same sample was tested twice?
- How did you test for inter and intra observer variations?
- How was the assessor blinded?
Ethical approval

- Was it a problem to get ethical approval?
- How easy was it to get informed consent?
- How did the patients stand to benefit from your study?
Results - What did you find?

- Use a mixture of text, figures, and tables.
  
  **Text**
  - The text should tell a story
  - Lead your readers through your results as you would through a story

  **Illustrations**
  - Photograph (written consent)
  - Statistical conclusions

- Unexpected results?
Discussion

- Should discuss the results, not repeat them
- Comparison of results with previous work
- Limitations of the study?
- Is the conclusion clearly stated?
- What is the relevance to clinical practice?
- Directions for future work?
Appeal process

- Authors can appeal if their paper is rejected
- Such appeals are usually looked at by an editor who has not been involved in the editorial process
Thank you