

Five Years of a Special Approach to Medical Communication: *The Brazilian Journal of Infectious Diseases*

The Brazilian Journal of Infectious Disease (BJID) has completed 5 years of publication and has become the primary method of international communication by members of the Brazilian Society of Infectology (BSI). The *BJID* is a bimonthly publication. It is published in English, and it is now one of the largest such journals representing infectious diseases in South and Central America. Abstracts of the *BJID* have been included in Medline citation for the past two years, and abstracts and editorials are presented in the BSI Home Page (www.infecto.org.br/bjid.htm). The *Journal* publishes original clinical and basic science articles, reviews, case reports and case series, and editorials relevant to infectious diseases.

We, the Editors of the *BJID* during this 5 year period, have taken great pride in the fact that a clinical *Journal* from a Portuguese-speaking part of the world has been able to compete successfully for international recognition. The *Journal* utilizes its Editors, Drs. Badaro and Jones, the Editorial Board, and a dedicated medical Copy Editor, Ms. Betsy Chalfin, to provide a unique service of advice and direct assistance in re-writing articles that, for reasons of native language background, or inexperience in medical writing, are in need of such attention. The Editors and Writing Editor assist each author with data organization, study design presentation, publication format, and use of the English language. Of course, the Managing Editor, Luciana Bastinelli, has provided the important service of coordinating these activities.

This degree of author assistance at the time of publication is unique among medical journals. We are aware that for most medical journals the time and effort needed to reorganize an author's presentation, and to provide extensive assistance in medical writing has not been available. Such a manuscript was simply rejected, with the result that important information from a very large section of the world of infectious diseases remained unavailable. The Internet may have made information more available worldwide, but, without the

assistance of editing and of a peer review process, the information has remained uni-directional, rather than bi-directional. The *BJID* has begun a process that we believe will make medical communication from many areas of the world more complete. By use of this approach, the *Journal* has become not only a means of information exchange, but also of education in study designs, data organization and presentation, and medical writing.

During the 5 years of publication, over 150 original articles, 20 reviews, 30 case reports, and 25 editorials have been presented covering all aspects of clinical medicine and infectious diseases. The *Journal* has been able to accept 90% of manuscripts submitted, almost entirely due to the willingness of the Editors and the authors to enter into dialogue regarding how best to present the information. Understanding by authors of what we, the Editors, considered to be helpful criticism, has been very much appreciated.

At present, most of the articles have been submitted and published by authors whose work originated in Brazil, but articles originating from work in Europe, North America, Africa, and countries in South America other than Brazil have also been published. Our hope is to continue to expand international contributions to the *Journal*. The *Journal* is supported by revenue from personal and library subscriptions, and by a selected number of advertisers.

The Editors of the *Journal* would like to expand free access of the articles to readers internationally via full text access through our Internet Home Page. The style of the presentation and interactive mail exchange would follow that used at present by a few other journals, such as the *British Medical Journal*. That means that each issue of the *Journal* would be displayed on the BJID Home Page, with a Table of Contents and the full text of each article. Comments to the article will be by direct e-mail to the authors, or to the *Journal*, both with the potential for author responses or interactive discussion. When comments are sent to

the *Journal* in response to an article, they will be edited and presented as letters-to-the-editor on the Home Page, and then in the next published issue of the *Journal*. This approach, we believe, will begin to make available to investigators and physicians worldwide not only up-to-date information about infectious diseases particularly relevant to people in South and Central America, Africa and Asia, but it will allow them to begin interactive discussion about specific points with the authors of the information. This method of free information access should provide an important step for improving the quality of health care worldwide, including to parts of the world where, at present, access to journal information is limited. We also believe that our unique approach of author assistance in data presentation will allow publication of experiences by physicians who would otherwise not have such a service available, and whose medical observations would therefore continue to go unrecorded.

A *BJID* webmaster will coordinate the publication of the full text and the rapid distribution of responses for editing and inclusion in the webpage or hard copy *Journal*. A dedicated editor of the *BJID* will be available to assist in ensuring communications are accurate and appropriate. In addition, each article will have the potential via the Home Page for article downloading, printing, obtaining of related articles on PubMed, viewing other articles by the authors, and the potential to be alerted when related articles appear in the *BJID*.

We believe that the combination of free access to articles, assistance in article preparation and presentation, interactive potential between readers and authors, and worldwide distribution will have an important impact on health care of infectious diseases.

Of course, there have been problems during the first 5 years of the *BJID* that need urgent resolution. One of the most distressing is that fewer than 5% of members of the Brazilian Society of Infectology have submitted manuscripts to the *Journal*. It is true that medical writing has not been a high priority among clinicians in Brazil. We hope that this has been due to a general discouragement that what was written would not be published anyway. If that has been true, we wish to

pass the word that those days are over. We look forward to the day when 20% of Society members (Over 100 of the 500 clinical scientists) would have submitted papers to the *BJID*: On the other hand, this reluctance may have been due to lack of experience in medical data collecting and presentation. The Editors of the *BJID* have begun to address this issue by giving courses at scientific meetings and at universities in Brazil to ensure that young investigators feel comfortable with study design and presentation.

Another problem has been inadequate financing of the *Journal*. Our advertisers have provided the majority of the funds necessary to publish the *Journal*, and for their support we are grateful. The process of gaining funds via subscription either among Society members or outside the BSI has not been so successful. Without correction of this problem we fear the *Journal* is doomed. We hope the new members of the Executive Board of the BSI will be able to correct this problem. It is also possible that by the *BJID* having survived for the first 5 years that any skeptics will have been silenced and that new enthusiasm will lead to the necessary funding.

We have experienced delays in publishing that we are confident can be corrected during the next years. This will require a better attention to timelines by the authors, by reviewers and by our production staff. We are aware that such an attention to timelines has not been a particularly strong trait among Brazilians, but we do sense that for many reasons this is changing.

Medical communication is a critical part of a vibrant health care system. For that reason, we hope that the new Editor of the *BJID* will make every effort to continue this now established tradition. We thank the BSI for having given us the chance to start this important process.

Roberto Badaró
Editor-in-Chief

Thomas C. Jones
Former Editor BJID