

From the editor

Clinical Medicine – what’s it all about..?

Medline®, the tool of the US National Library of Medicine, currently cites from approximately 5,500 journals worldwide in 39 languages: it accumulates citations at a rate of 2,000–4,000 completed references daily – or more accurately every day from Tuesday to Saturday each week; this amounts to about 700,000 a year.¹ The journals surveyed range from the internationally pre-eminent to others that could kindly be described as *recherché*. From the readers’ point of view, it is a jungle – or at least a forest – out there. Judging quality and relevance of different journals remains problematic.

This might be thought of lesser importance in the age of search engines, but of course merely retrieving the title of a paper online does little to indicate quality. Furthermore, until all journals become immediately open access online, retrieving an up-to-date intriguing title from a search engine can be frustrating, expensive or both. So the reputation of a journal – and perhaps for a subscriber a clear pre-recognition of what any journal is going to contain – is of paramount importance in maintaining its readership.

Consider the published outcome of two of the oldest and most respected scientific journals in the world. The Proceedings of the Royal Society and *Comptes rendus de l’Académie des sciences* each have their origins in the 1660s. The good fortune that has led to English becoming the *lingua franca* of science and medicine obviously favours the former, but each must suffer from the fact that they fail to announce clearly to would-be readers what they are likely to contain. In contrast, many contemporary medical journals do indeed contain exactly what they say on the tin. *Gut*, *Heart*, *Brain*, and *Gullet* leave no doubt as to the clinical areas they address. More long-windedly, every ‘ology has its own specific home, from the *Journal of Neuro-ophthalmology* to the *Journal of Proctology*, and even cells and subcellular particles have their own, in *Cell*, *Mitochondrion* and *Nucleus*.

The full title of this journal does its best to address this dilemma. The adoption of the title *Clinical Medicine* during the editorship of Peter Watkins was an inspired move which liberated the journal from the constraints of its previous parochial boundaries, but by maintaining the former name as a subtitle continued to announce its role as the Journal of the Royal College of Physicians (RCP).

However, the name *Clinical Medicine* is somewhat all-embracing, and is less than explicit concerning what the reader will find within its pages, so recently the editorial board succumbed to the vogue for a mission statement, to define more explicitly what we were about, and adopted the following:

Clinical Medicine is the journal of the Royal College of Physicians and aims:

- To publish a broad range of content, including original research, review, guidance, and opinion, for the continuing medical and professional education of physicians.
- To promote balanced and responsible debate on a variety of subjects, including the latest developments in medicine, healthcare, ethics and clinical leadership.
- To maintain high levels of editorial integrity and to engage, inform and support the life-long learning of hospital doctors, of all grades.
- To be a journal which informs, stimulates, and entertains.

Whilst many readers may regard such mission statements as merely another opportunity to express support for motherhood and apple pie, there are editorial consequences which flow from it. Firstly, of course we hope it clearly explains to subscribers and would-be subscribers what they can find in the journal, and the breadth of what it does. Furthermore, if you as a fellow or member of the RCP disagree, please let us know. More importantly, however, the phrase ‘life-long learning of hospital doctors of all grades’ announces a diversification. It is rather salutary to consider the consequences of the truncation of the duration of training of all medical specialties that has occurred in the last decade; one result is that the processes involved in constructing an attractive application form and curriculum vitae for a foundation year one (FY1) training post, during the fourth year of medical school, encourage career choices at a very early stage. The RCP should clearly try and involve physicians in training from the time that they have made that career choice – or indeed to help them make that decision, and thus part of the journal’s role should be to encourage that involvement. Much of the journal’s content, for example the clinical cases, the continuing medical education, and perhaps particularly the self assessment questions to accompany the latter, are highly relevant to trainees

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during their general professional training years. We should encourage trainees to read these – they are indeed the essence of clinical medicine. To this end, the journal recently advertised for, and appointed, an additional member of the editorial staff to widen the appeal of the journal to doctors in training. We were fortunate to be able to appoint Dr Paul Grant – an article by whom (written before his appointment) appears later in the journal; the next issue will carry his first editorial in the post.

Finally, this issue is the first to carry our new cover page. We chose it because it conveys one aspect of the excitement and

drama of clinical medicine, and we hope you agree. For readers who don't subscribe to that view of it, it will change again next year!

Reference

- 1 www.nlm.nih.gov/pubs/factsheets/dif_med_pub.html

Humphrey Hodgson



Royal College of Physicians

Medical Training Initiative (MTI)

Supporting international training links

The Royal College of Physicians (RCP) works with partner institutions abroad to support training for international medical graduates (IMGs) by facilitating placements, General Medical Council (GMC) registration, and a Tier 5 visa.

Candidates must meet selection criteria appropriate for GMC registration and immigration requirements and are interviewed by a joint panel of UK and partner institution consultants in country. The RCP currently has sponsored IMGs awaiting placements in the following medical specialties:

- > CMT-level GIM rotations > Acute medicine
- > Neurology > Stroke medicine
- > Geriatrics/care of the elderly > Cardiology
- > Gastroenterology > Endocrinology/diabetes
- > Respiratory medicine > Rheumatology
- > Medical and clinical oncology > Nephrology

If your hospital or trust would like to submit a clinical training fellowship towards the MTI scheme for placement, or if you would like more information on the MTI, please visit:

www.rcplondon.ac.uk/education/img/mti
 or email: international@rcplondon.ac.uk