

EDITORIAL

THE MEDICAL JOURNAL OF MALAYSIA: PAST AND FUTURE

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The current series of the Medical Journal of Malaysia has now entered its 37th volume of publication, the first volume having been published in 1946 immediately after the close of World War II. However, a search of the literature has revealed that the Medical Journal of Malaysia had its origin in 1890, 92 years ago, when the first local medical journal was published under the title of the Journal of the Straits Medical Association. However, for a short period at the turn of the century this came to

be replaced by the Journal of the Malaya Branch of the British Medical Association. Then in 1911, the latter was in turn replaced by the Malaya Medical Journal which by the 1920's had been renamed the Malayan Medical Journal (Table I).

However, it seems that for a short period prior to the outbreak of World War II in South-east Asia, the Malayan Medical Journal was once again replaced by the Journal of the Malaya Branch of the British Medical Association. It took the trauma of World War II to finally settle the issue of whether the doctors serving in Malaya owed their allegiance to an independent local Malayan Medical Association or to the Malaya Branch of the British Medical Association.

By 1946, this issue seemed to have been settled once and forever, and the first volume of the present series was begun under the title of the Medical Journal of Malaya. In 1959, the Singapore Medical Association was founded and began its own journal under the title of the Singapore Medical Journal. In September 1972, the Medical Journal of Malaya was renamed the Medical Journal of Malaysia in line with the renaming of the Association. However the series continued and was not renumbered. Hence even though the current series of the Medical Journal of Malaysia now number 37, the Journal can look back with pride to its early birth in 1890, and with a smile to its childhood, when it was passed from parents to foster parents and to guardians before it finally found its own independent self. Today, at the age of 92, it must try to maintain its dignified position among the much younger journals of the region. It must show its vigour, strength and leadership. With

TABLE I
EDITORSHIP, NAME AND YEAR OF PUBLICATION
OF MEDICAL JOURNALS IN MALAYSIA FROM
1890 - 1982

PERIOD	NAME OF JOURNAL	EDITOR
1890	J. Straits Med. Assoc.	M.F. Simon
1891	J. Straits Med. Assoc.	W.G. Ellis
1892	J. Straits Med. Assoc.	T.S. Kerr
1893	J. Straits Med. Assoc.	M.F. Simon
1894 - 1903	-	-
1904 - 1907	J. Malaya Branch B.M.A.	J. Kirk
1908 - 1910	-	-
1911 - 1912	Malaya Med. Journal	G.F. Brooke
1913 - 1925	-	-
1926	Malayan Med. Journal	T.S. Macaulay
1927	Malayan Med. Journal	J.R. Kay-Mouat
1928 - 1929	Malayan Med. Journal	G.H. Macalister
1930 - 1937	Malayan Med. Journal	G.V. Allen
1937 - 1941	J. Malaya Branch B.M.A.	G.V. Allen
1942 - 1945	(World War II)	-
1946 - 1947	Medical J. Malaya	D.W.G. Faris
1948 - 1954	Medical J. Malaya	D.E.C. Mekie
1954 - 1965	Medical J. Malaya	H.M. McGladery
1965 - 1972	Medical J. Malaya	A.A. Sandosham
1972 - 1977	Medical J. Malaysia	A.A. Sandosham
1977 -	Medical J. Malaysia	P.C.Y. Chen

a circulation of 4,500, the Medical Journal of Malaysia is one of the leading medical journals of this region.

QUALITY VERSUS FINANCIAL SOLVENCY

Nonetheless, the publication of the journal has not been without its problems. In the early stages of this century, its publication was somewhat irregular and the controversy of its desire to cut its umbilical link to its parent association, the British Medical Association, was only conclusively settled after the upheaval of World War II.

After the Second World War, its position was never doubted and its circulation increased with each year and it came to be reviewed by international indexes as well as the Index Medicus. Nonetheless, it has been racked by financial problems as the cost of publication continues to escalate combined with decreasing standards of English among proof readers and type setters of the printing firms.

The question that really confronts us is the question of whether the Journal should be concerned primarily with maintaining a high standard of publication or be concerned primarily with its financial position of being self-supporting. Our contention is that it must primarily be concerned with the highest level of editorial and medical writing. If it is needed, some financial assistance to cover the cost of publication and postage will surely be in order. With this philosophy in mind, the Journal has since early 1981, acquired the part-time services of an executive assistant whose task has mainly been to assist in maintaining the difficult and meticulous editorial policy we set ourselves. A large part of her time has been spent with individual authors as well as with type-setters and proof-readers checking not only that papers are clear and concise but that the printers, many of whom do not read or write English, correct the printing errors that have a tendency to creep in. This has certainly been a herculean task that has continued to take up an enormous quantity of time of the Editor, Editorial Board and the executive assistant. Fortunately, the Journal can still claim that it is largely self supportive and needs only some financial assistance from the Association itself.

THE AUTHOR AND THE JOURNAL

It has always been the unshakable conviction of the Journal that clear, concise and accurate

writing, together with a meticulous editorial policy, would be absolutely essential for a quality medical journal which, we believe, is now 92 years old. To this end, we believe that the information which follows will be of value to both readers who will become authors, and to authors who are readers of this Journal.

When your manuscript is submitted, it will undergo intensive editorial study and criticism. However your interests and that of the Journal are the same namely to maintain as high a standard as is possible. Thus each paper published should add to the body of knowledge that the Journal represents. Thus the first question you should ask of your paper is: "Does it add, replace or reinforce the body of medical knowledge the Journal represents?"

Editorial criticism is hard to take and is even harder to give. The Editor and members of the Editorial Board spend hours studying the papers sent to them for review and the bulk of the Editor's time goes into preparing and composing letters of analysis and suggestions. It would be far easier to reject a paper, but the Editorial Board has always accepted as its obligation the devotion of time, patience, and persuasion to getting valuable information into a publishable form.

In writing a paper, the author should first ask himself if the information he is putting together truly teaches or is it just another "rare odd ball". Interesting and informative case reports are always valuable to the Journal's readers. However another rare case without educational merit is of very little interest. The author should also see a purpose. He will not write with conviction unless he is himself convinced. Don't write in a vacuum. One common and very sad editorial criticism is: "There is nothing new in this paper".

A fair proportion of the Journal is sent overseas. Further, an increasing number of the Journal's readers in Malaysia and elsewhere are readers whose native tongue is not English. It is therefore very important to strive to make phrases and sentences as simple and clear as possible - particularly for those who may have to read the Journal with the help of a dictionary. Incomplete sentences such as "chest - n.a.d." or "heart normal" must be avoided, and only approved abbreviations may be used. Sentences must not only be simple but complete. Related facts should be placed in paragraphs. Nothing is more disturbing than to have to report that, "I have read this paper four

times but I just am not sure what the author is trying to say”.

There is a great need to examine the statistical significance of data that has been gathered. One of the important aspects of editorial criticism is the endeavour to guard the author against unwarranted conclusions that he may regret when it is too late to change the record.

In as much as each individual author prides himself in having written a good paper, the Editor and the Editorial Board share the same pride when the collection of papers in each issue are of high quality and value.

UNIFORM REQUIREMENTS FOR BIOMEDICAL JOURNALS

On 5 February 1979 the second meeting of the International Steering Committee of Medical Editors was held in Montreal.¹ The committee approved the proposals for a uniform style for submitted manuscripts. This revised version is now being introduced into many journals and is reproduced below with a view to its gradual introduction to the Medical Journal of Malaysia. Authors are requested to study the instructions carefully and to adhere to them.

Summary of requirements

Type manuscript double-spaced, including title page, abstract, text, acknowledgements, references, tables and legends.

Each manuscript component should begin on a new page, in this sequence: title page; abstract and key words; text; acknowledgements; references; tables: each table, complete with title and footnotes, on a separate page; legends for illustrations.

Illustrations must be good quality, unmounted glossy prints usually 12.7 x 17.3 cm (5 x 7 in) but no larger than 20.3 x 25.4 cm (8 x 10 in).

Preparation of manuscript

Type manuscript on white bond paper, 20.3 x 26.7 cm or 21.6 x 27.9 cm (8 x 10½ in or 8½ x 11 in) or ISO A4 (212 x 297 mm) with margins of at least 2.5 cm (1 in). Use double spacing throughout, including title page, abstract, text, acknowledgements, references, tables, and legends for illustrations. Begin each of the following sections on separate pages: title page, abstract and

key words, text, acknowledgements, references, individual tables, and legends. Number pages consecutively, beginning with the title page. Type the page number in the upper right-hand corner of each page.

Manuscripts will be reviewed for possible publication with the understanding that they are being submitted to one journal at a time and have not been published, simultaneously submitted, or already accepted for publication elsewhere. This does not preclude consideration of a manuscript that has been rejected by another journal or of a complete report that follows publication of preliminary findings elsewhere, usually in the form of an abstract. Copies of any possibly duplicative published material should be submitted with the manuscript that is being sent for consideration.

Title page

The title page should contain (1) the title of the article, which should be concise but informative; (2) a short running head or footline of no more than 40 characters (count letters and spaces) placed at the foot of the title page and identified; (3) first name, middle initial, and surname (underlined) of each author, with highest academic degree(s); (4) name of department(s) and institution(s) to which the work should be attributed; (5) disclaimers, if any; (6) name and address of author responsible for correspondence about the manuscript; (7) name and address of author to whom requests for reprints should be addressed, or statement that reprints will not be available from the author; (8) the source(s) of support in the form of grants, equipment, drugs, or all of these.

Abstract and Key Words

The second page should carry an abstract of not more than 150 words. The abstract should state the purposes of the study or investigation, basic procedures (study subjects or experimental animals and observational and analytic methods), main findings (give specific data and their statistical significance, if possible), and the principal conclusions. Emphasise new and important aspects of the study or observations. Use only approved abbreviations.

Key (indexing) terms - Below the abstract, provide and identify as such, three to 10 key words or short phrases that will assist indexers in cross-

indexing your article and that may be published with the abstract. Use terms from the Medical Subject Headings list from *Index Medicus* whenever possible.

Text

The text of observational and experimental articles is usually - but not necessarily - divided into sections with the headings Introduction, Methods, Results, and Discussion. Long articles may need sub-headings within some sections to clarify their content, especially the Results and Discussion sections. Other types of articles such as case reports, reviews, and editorials are likely to need other formats, and authors should consult individual journals for further guidance.

Introduction - Clearly state the purpose of the article. Summarise the rationale for the study or observation. Give only strictly pertinent references, and do not review the subject extensively.

Methods - Describe your selection of the observational or experimental subjects (patients or experimental animals, including controls) clearly. Identify the methods, apparatus (manufacturer's name and address in parenthesis), and procedures in sufficient detail to allow other workers to reproduce the results. Give references to established methods, including statistical methods; provide references and brief descriptions of methods that have been published but are not well known; describe new or substantially modified methods, give reasons for using them, and evaluate their limitations.

When reporting experiments on human subjects, indicate whether the procedures followed were in accord with the ethical standards of the committee on human experimentation of the institution in which the experiments were done or in accord with the Helsinki Declaration of 1975. When reporting experiments on animal subjects, indicate whether the institution's or the national research council's guide for the care and use of laboratory animals was followed. Identify precisely all drugs and chemicals used, including generic name(s), dosage(s), and route(s) of administration. Do not use patients' names, initials, or hospital numbers.

Include numbers of observations and the statistical significance of the findings when appropriate. Detailed statistical analyses, mathematical derivations, and the like may sometimes be suitably presented in the form of one

or more appendixes.

Results - Present your results in logical sequence in the text, tables, and illustrations. Do not repeat in the text all the data in the tables or illustrations or both: emphasise or summarise only important observations.

Discussion - Emphasize the new and important aspects of the study and conclusions that followed from them. Do not repeat in detail data given in the Results section. Include in the Discussion the implications of the findings and their limitations and relate the observations to other relevant studies. Link the conclusions with the goals of the study but avoid unqualified statements and conclusions not completely supported by your data. Avoid claiming priority and alluding to work that has not been completed. State new hypotheses when warranted, but clearly label them as such. Recommendations, when appropriate, may be included.

Acknowledgements

Acknowledge only persons who have made substantive contributions to the study. Authors are responsible for obtaining written permission from everyone acknowledged by name because readers may infer their endorsement of the data and conclusions.

References

Number references consecutively in the order in which they are first mentioned in the text. Identify references in text, tables, and legends by arabic numerals (in parentheses). References cited only in tables or in legends to figures should be numbered in accordance with a sequence established by the first identification in the text of the particular table or illustration.

Use the form of references adopted by the US National Library of Medicine and used in *Index Medicus*. Use the style of the examples cited at the end of this section, which have been approved by the National Library of Medicine.

The titles of journals should be abbreviated according to the style used in *Index Medicus*.

Try to avoid using abstracts as references; "unpublished observations" and "personal communications" may not be used as references, although references to written, not verbal, communications may be inserted (in parentheses)

in the text. Include among the references manuscripts accepted but not yet published; designate the journal followed by "in press" (in parentheses). Information from manuscripts submitted but not yet accepted should be cited in the text as "unpublished observations" (in parentheses).

The references must be verified by the author(s) against the original documents.

Examples of correct forms of references are given below.

Journal

(1) *Standard journal article* - (list all authors when six or less; when seven or more, list only first three and add *et al.*):

Soter NA, Wasserman SI, Austen KF. Cold urticaria: release into the circulation of histamine and eosinophil chemotactic factor of anaphylaxis during cold challenge. *N Engl J Med* 1976; 294: 687-90.

(2) *Corporate author*

The Committee on Enzymes of the Scandinavian Society for Clinical Chemistry and Clinical Physiology. Recommended method for the determination of gamma-glutamyltransferase in blood. *Scand J Clin Lab Invest* 1976; 36: 119-25. Anonymous. Epidemiology for primary health care. *Int J Epidemiol* 1976; 5: 224-5.

Books and other monographs

(3) *Personal author(s)*

Osler AG. Complement: mechanisms and functions. Englewood Cliffs: Prentice-Hall, 1976.

(4) *Corporate author*

American Medical Association Department of Drugs. AMA drug evaluations. 3rd ed. Littleton: Publishing Sciences Group, 1977.

(5) *Editor, compiler, chairman as author*

Rhodes AJ, Van Rooyen CE, comps. Textbook of virology: for students and practitioners of medicine and the other health sciences. 5th ed. Baltimore: Williams & Wilkins, 1968.

(6) *Chapter in book*

Weinstein L, Swartz MN. Pathogenic properties of invading micro-organisms. In: Sodeman WA Jr, Sodeman WA, eds. Pathologic physiology: mechanisms of disease. Philadelphia: WB Saunders, 1974: 457-72.

(7) *Agency publication*

National Center for Health Statistics. Acute conditions incidence and associated disability, United States July 1968 - June 1969. Rockville, Md.: National Center for Health Statistics. 1972. (Vital and health statistics. Series 10: Data from the National Health Survey, No 69) (DHEW publication No (HSM) 72-1036).

Other Articles

(8) *Newspapers article*

Shaffer RA. Advances in chemistry are starting to unlock mysteries of the brain: discoveris could help cure alcoholism and insomnia, explain mental illness. How the messengers work. *Wall Street Journal* 1977 Aug 12:1(col 1), 10(col 1).

(9) *Magazine article*

Roueché B. Annals of medicine: the Santa Claus culture. *The New Yorker* 1971 Sep 4: 66-81.

Tables

Type each table on a separate sheet; remember to double space. Do not submit tables as photographs. Number tables consecutively and supply a brief title for each. Give each column a short or abbreviated heading. Place explanatory matter in footnotes, not in the heading. Explain in footnotes all non-standard abbreviations that are used in each table. For footnotes, use the following symbols in this sequence: †, ‡, §, ||, ¶, p, **, ††, Identify statistical measures of variations such as SD and SEM.

Omit internal horizontal and vertical rules.

Cite each table in the text in consecutive order.

If you use data from another published or unpublished source, obtain permission and acknowledge fully.

Having too many tables in relation to the length of the text may produce difficulties in the layout of pages. Examine issues of the journal to which you plan to submit your manuscript to estimate how many tables to use per 1000 words of text.

The editor on accepting a manuscript may recommend that additional tables containing important backup data too extensive to be published may be deposited with the National Auxiliary Publications Service or made available by the author(s). In that event, an appropriate statement will be added to the text. Submit such tables for consideration with the manuscript.

Illustrations

Submit the required number of complete sets of figures. Figures should be professionally drawn and photographed; freehand or typewritten lettering is unacceptable. Instead of original drawings, roentgenograms, and other material, send sharp, glossy black-and-white photographic prints, usually 12.7 x 17.3 cm (5 x 7 in) but no larger than 20.3 x 25.4 cm (8 x 10 in). Letters, numbers, and symbols should be clear and even throughout, and of sufficient size that when reduced for publication each item will still be legible. Titles and detailed explanations belong in the legends for illustrations, not on the illustrations themselves.

Each figure should have a label pasted on its back indicating the number of the figure, the names of the authors, and the top of the figure. Do not write on the back of the figures or mount them on cardboard, or scratch or mar them using paper clips. Do not bend figures.

Photomicrographs must have internal scale markers. Symbols, arrows, or letters used in the photomicrographs should contrast with the background.

If photographs of persons are used, either the subjects must not be identifiable or their pictures must be accompanied by written permission to use the photograph.

Cite each figure in the text in consecutive order. If a figure has been published, acknowledge the original source and submit written permission from the copyright holder to reproduce the material. Permission is required, regardless of authorship or publisher, except for documents in the public domain.

For illustrations in colour, supply colour negatives or positive transparencies and, when necessary, accompanying drawings marked to indicate the region to be reproduced; in addition, send two positive colour prints to assist editors in making recommendations. Some journals publish illustrations in colour only if the author pays for the extra cost.

Legends for illustrations

Type legends for illustrations double spaced, starting on a separate page with arabic numerals corresponding to the illustrations. When symbols, arrows, numbers, or letters are used to identify parts of the illustrations, identify and explain each

one clearly in the legend. Explain internal scale and identify method of staining in photomicrographs.

Abbreviations

Use only standard abbreviations. Consult the following sources for additional standard abbreviations: (1) CBE Style Manual Committee. *Council of Biology Editors Style Manual: a Guide for Authors, Editors, and Publishers in the Biological Sciences*. 4th ed. Arlington: Council of Biology Editors, 1978; and (2) O'Connor M, Woodford FP. *Writing Scientific Papers in English: an ELSE-Ciba Foundation Guide for Authors*. Amsterdam, Oxford, New York: Elsevier-Excerpta Medica, 1975. Avoid abbreviations in the title. The full term for which an abbreviation stands should precede its first use in the text unless it is standard unit of measurement.

In most countries the International System of Units (SI) is standard or is becoming so. Report measurements in the units in which they were made. Journals may use these units, convert them to another system, or use both.

Submission of manuscripts

Mail two copies of manuscripts in a heavy paper envelope, enclosing the manuscript copies and figures in cardboard, if necessary, to prevent bending of photographs during mail handling. Place photographs and transparencies in a separate heavy paper envelope.

Manuscripts should be accompanied by a covering letter from the author who will be responsible for correspondence regarding the manuscript. The covering letter should contain a statement that the manuscript has been seen and approved by all authors. The letter should give any additional information that may be helpful to the editor, such as the type of article the manuscript represents in the particular journal, information on publication of any part of the manuscript, and whether the author(s) will be willing to meet the cost of reproducing colour illustrations. Include copies of any permission needed to reproduce published material or to use illustrations of identifiable subjects.

REFERENCE

- ¹ International Steering Committee of Medical Editors, *Br. Med. J.*, 1979, 1, 532-535.