Some Changes in the Journal

Yes, it really is ANESTHESIOLOGY! No, we have not changed editorial philosophy. However, with this issue of the Journal, we have introduced a number of format changes, all done with the intention of enhancing readability of the Journal.

The first and most obvious change is that the cover has been completely redesigned. This was done both to give the cover a brighter appearance and, by including a listing of the editorials and scientific and clinical investigations, to give the reader an opportunity to quickly identify article(s) that might be of immediate interest. In addition, a brief summary statement accompanies each article in the complete Table of Contents.

Second, an additional editorial section, Highlights, is introduced in this volume of the Journal. In the Highlights section, we provide information on two papers describing why these papers may be important or clinically relevant. An additional purpose of a Highlight is to explain what might be perhaps a difficult scientific concept, laboratory procedure, or analytical technique. Although unsigned (and written by an editor or an invited expert), the Highlight might be viewed as a mini editorial. However, the Highlights are not meant to provide the comprehensive background usually provided by editorials in this Journal.

Third, included with each scientific investigation is a structured abstract. Present in the medical literature for more than 5 yr¹ and published in several formats,² the principal objective of a structured abstract is, while utilizing a format similar to the structure of a scientific paper—introduction or background (the "why"), methods (the "how"), results (the "what"), and conclusions (the "importance"), to allow readers to more quickly assess the essence of an article.

Fourth, the Editorial Board is aware that much of the science published in ANESTHESIOLOGY incorporates complex study design and statistical treatment of data. We also are aware that in the past flawed study design and statistical analysis may have led to misinterpretation of data. As a consequence of the above and in an attempt to minimize such problems, we have established a position of a consultant epidemiologist and statistician and appointed Warren S. Brower, M.D., M.P.H., to this position. His principal charge will be to assist the Editorial Board with respect to review of papers describing results from large, randomized, prospective studies as well as papers in which the accurate use of statistics has been questioned or that utilize more complex statistical tests.

Finally, we continue expansion of the list of Associate Editors by welcoming Drs. Gerard Bashein, Randall L. Carpenter, Aaron F. Kopman, Srinivasa N. Raja, David O. Warner, Richard B. Weiskopf, and Margaret Wood to the Board.

I reiterate, each of these changes is an attempt to enhance the readability and usefulness of this Journal for those who practice the specialty of anesthesiology and/or related to the specialty by virtue of other interests. We welcome comments on whether we have succeeded in our objectives.

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Editor in Chief

References


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