Editorial

Plus ça change . . .

“If it ain’t broke, don’t fix it” is a sound philosophy too often forgotten in the rush to improve things. This month, at 42 years of age, the Journal of Clinical Pathology has adopted a completely new size and cover to cover design. Why? With an established worldwide circulation of some 5,000 copies each month surely the title could sail to its half century and beyond without the need for a radical face lift. So what prompted the change?

There is no simple answer, rather a combination of technical and aesthetic reasons. Crown quarto, the Journal’s old paper size, is an idiosyncratic and now costly format. A4, the new one, being a world standard, is not. Many journals have already made the switch, and most subscribers seem to accept that the disadvantage of a “step” in bound volumes on library shelves is outweighed by the generally larger type face and greater ease of photocopying. Larger pages and modern typesetting techniques permit the use of more flexible page layouts, as can be seen, and authors will be pleased to learn that a much greater variety of figure sizes can now be accommodated. Revised instructions for contributors, summarised on the inside of the front cover and soon to be published in greater detail, reflect this. The swings and roundabouts effect of larger type and a less expensive paper size means that all these improvements can be achieved without any overall change in production costs.

As for aesthetics, several influences have produced the new design, but the most important has been the wish of BMA publications to achieve a uniform “look” for all 13 of its specialist journals to underline their common house style and ancestry. For this reason similar redesigns are appearing at the same time in, among others, Archives of Disease in Childhood, Gut, and the British Heart Journal.

The decision to place the contents on the front cover was not taken lightly, knowing that opinion on this feature, above all, would be divided. On balance, the scientific and technical editors involved came round to the view that the advantages of doing so outweighed the disadvantages. Apart from preferring the impact of “front full” contents, they hoped that some more practical benefits might result from the change, including leaving the back cover available for lucrative advertisements and making photo reproduction in abstracting services such as Current Contents more eye catching. The point was made that the Lancet and the New England Journal of Medicine have not wavered from displaying their wares on the front, a policy surely not simply the product of complacency.

So, “Outraged of Tunbridge Wells” should pause before reaching for his pen. He should reflect on the above points, and also that the Journal has changed its appearance several times in the past. Over the years it has had four different covers (figure) and allow the present design to be assessed.
in a broader perspective. During the same period there have also been many other less obvious changes in type style, paper quality, and layout. Some have been for practical reasons, others for reasons of taste. Most have provoked little comment.

Editorial policy, too, has evolved in an attempt to keep pace with the fragmenting world of clinical pathology, though paradoxically the different disciplines have more interests in common now than at any time in the past decade. A glance at recent issues will confirm this. Quality assurance and clinical audit are increasingly the concern of pathologists worldwide, molecular biology knows no boundaries, and cytokines have scientists as well as cells talking to each other. High quality manuscripts on a huge variety of topics continue to arrive in numbers far in excess of space to publish them, and disappointed authors should take solace from this.

The way the Journal has been partitioned since 1988 reflects an attempt to classify articles simply by type and not in any way by merit. “Occasional articles” are those that do not logically fit elsewhere and include invited reviews, opinions, guidelines and editorials. The main section contains mostly original disease based research, whereas “Laboratory techniques” are papers primarily about the development, evaluation, or improvement of current methods in diagnostic pathology, including, since 1988, the popular “ACP Broadsheets”. These are now bound within the Journal’s pages rather than appearing as a separate publication, though are still available for individual sale as indicated on the back cover. Single case reports are usually reserved for the indexed letters section, and correspondence provoked by previously published material is collected under “Matters arising”.

So, proud in its new guise, the journal of the Association of Clinical Pathologists moves towards its fiftieth birthday with confidence, but as a reassuring aside to those who feel that the new design will take a little getting used to, the message is simple. Look back as well as forward. It will then be obvious that what looks like a radical departure is really just a case of plus ça change, plus c’est la même chose.

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Editor