## EDITORIAL COMMENT WHERE IS THIS JOURNAL GOING?

Up to the present time, Dalhousie University has the only Medical School in the Atlantic Provinces, and therefore has been publishing the only student Medical Journal in these regions. Doubtless, new Medical Schools will be springing up in the near future, and with them, new journals. In the midst of all this, perhaps one should try to reflect on the role of our student Medical Journal, and see what improvements can, or should be made.

First, we have to determine the scope of our readership. This includes many of the doctors practising in the Atlantic Provinces. and the local medical student population. Do we need to increase the range of our readership? Obviously a more widely-read journal will become a better-known one, and viceversa. At present we send our journal to other Canadian medical schools too, but it is clear that that avenue reaches only the editorial staff of the other student journals—the other medical students rarely get the opportunity to read journals from other medical schools. So obviously expansion is possible in this field. Are enough doctors getting the journal? This has produced many questionnaires trying to find out also if doctors see any use in receiving such a journal. Again, the question of professional readership needs to be assessed.

In a way, readership determines the content of our journal, and so does content determine the readership. In trying to fix a policy for the material to be published in the journal, we run into the big questionmark—what is the journal trying to accomplish? A quick review shows past trends to include catering to medical historical reviews to dig up interest in the roots of medicine, encouraging student research publications (which if any good at all, will already have been snapped up by proffessional journals), and fostering review articles of general and medical interest. Are we therefore doing enough to interest potential authors and potential readers? The answer is left up to you.

Well what can be done to further the spirit and aims of the journal? A number of ways seem open, which does not mean they have not been thought of before. Getting specialists to write special "tip or hint" articles may be one way, or to review thoughts on a controversial topic. In this way, the journal might possibly become more interesting to practitioners around the four provinces. General Practitioners can be urged to write in about their experiences in medicine, thus helping to temper the tide towards specialising, and also show that G.P.'s have a lot to contribute towards medical education. A definite place should be given to student articles—after all. the journal is run by students on student money! Apathy among neophyte student authors must be wiped out, and efforts made to show them that the journal is worth writing for. This last applies to physician authors too.

It was mentioned above that the readership should be broadened. This involves money, and perhaps the physicians who are currently receiving the journal free may decide to chip in towards the betterment of the journal. A bigger and thicker magazine certainly can include more articles, and longer ones too; it might also encourage people to write—after all, how many people would like to write for a 44-page journal?

The struggle has to be started to make people want to write, and not be begged to write. This goes around in a vicious circle but a start has to be made somewhere and point x is as good as point b. Articles have to be made more interesting and worth reading; the standard of editing has to rise. Even bland reports can be re-written in an exciting manner. An undergraduate medical journal cannot and should not try to compete with professional research journals. Research articles zero down to small bits of medicine, while a student journal needs to foster a wide reading population with diverse interests. Therefore highpowered research articles should be left to the research journals.

To interest the faculty in the journal, they have to be made to feel needed and valued in the publishing of the journal. Apart from the honorary faculty advisors, each and every member of the staff of the medical school and all the hospitals around should and can be urged to participate actively, in the form of advice and articles. Articles in any journal are written with differing degrees of underlying authority, and our journal is no exception. The more we encourage articles of authority, the more our name will spread.

So we see in front of us an undergraduate medical journal that, while successful, can

benefit from efforts to build it up further. Needed are authors, readers, advisors, critics, perseverance and money. Where we will get these is one matter, why we need these is another. We need a bigger and better journal to cater to an ever enlarging medical population, graduate and undergraduate. We need a high quality publication to set the pace and example for other starting medical journals in the Atlantic area. We will achieve all these, and more, if we get everyone working — right now!

K.S.C.

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