

Medical Editorial Journalism in the Modern ERA: Beyond the Acceptance and Rejection

Syed Zulfikar Ali Shah^{1*}, Nusrat Nisar², Ishrat Bibi³

Medical Editorial Journalism (MEJ) is commonly viewed as a process of disseminating medical knowledge to the general population. In contrast, medical writing is a far more diverse and challenging domain within the sciences. The medical editor stands at the crossroads of science, medical updates and interaction, ethics, decision-making, and the public's trust. The editor is not simply the individual who approves or denies submissions, but helps to decide which evidence deserves attention, how that proof should be conveyed and how the credibility of scientific papers should be maintained. With a rising number of medical articles, the position of the editor becomes more crucial. Scientific editors must be able to appraise papers critically, understand research methods, assess the quality of the evidence, interact with scholarly authors and peers, and reach fair and timely decisions¹. These skills show that scholarly work and its evaluation require more than academic position or expertise as a researcher. This raises an essential concern. Who guides the medical editor? Much of the standard training of editors has been based upon experiential, mentoring, and specific training. Practical experience is still useful, but it is not a substitute for formal professional training. Evidence suggests that editors benefit from training of authorship, conflicts of interest, peer evaluation, and plagiarism, as well as prior editorial experience². This insight should motivate scholarly journals, professional associations, organizations and institutions to think of regular learning of editors not as an optional pursuit but as a vital element for scientific excellence.

The editor's role is much more than selecting an article; they should be familiar with methodology, statistics, reporting, publishing ethics, authorship, conflicts of interest, screening for duplicate publication, scholarly misconduct, and peer assessment. Interpersonal skills and communication abilities are major components, as effective and encouraging interaction is deserved by authors, while acknowledgement and obligation are deserved by reviewers, and reliable, accurate data and updated information are deserved by readers. The editor must

also have the confidence to make hard decisions by evaluating in the light of new facts or strong argument³.

The hallmark of medical journalism is editorial autonomy. Editors must decide based on scientific quality, not organizational and personal influences, financial considerations, intimacy, or institutional interference and recommendations. The International Committee of Medical Journal Editors (ICMJE) states that journal publishers and editors have different obligations and that editorial judgments should be free from undue favor, enmity, and influence⁴. But editorial freedom shouldn't be mistaken for a lack of accountability; a good editor is autonomous but transparent, assertive but fair, credible but not dictatorial.

Ethics is the moral cornerstone of editorial journalism. Editors are the guardians of submitted scientific documents and should be prepared to correct the record when appropriate and necessary. Revisions, declarations of concern and denials do not indicate editorial defect. Instead, the readiness to admit and to remedy errors shows admiration for science and for the public who rely on published material. The World Association of Medical Editors (WAME) explicitly lists encouragement of self-revision, publication decisions and retractions, handling conflicts of interest, privacy, and enhancement of scientific knowledge as essential editorial duties⁵.

The editor also plays a significant mentorship role. A paper denied today may well be a better work tomorrow if the author understands why it was not accepted and uses the editor's suggestions as constructive editorial help to improve scientific writing, technique, reporting, and research reasoning. Thus editors may impact research excellence not just by determining what gets accepted for publication, but also by enabling writers to grasp what is acceptable and valued. This is especially crucial for early-career scholars and investigators engaged in situations where formal research supervision may be scarce and limited^{6,7}.

There are promising instances of organizational and institutional efforts to enhance this professional ability. UHS Lahore, Pakistan, in collaboration with PAME, has initiated a certificate course in medical editing. The program covered scholarly writing, copyrights, manuscript handling, OJS, peer evaluation, journal formation, scientific plagiarism, publishing ethics, free access to article and journal information and standard of publications⁸. This effort represents an important step, as medical editing can be taught, evaluated, and

¹Associate Professor, Department of Medicine, Liaquat University of Medical and Health Sciences (LUMHS), Jamshoro, Sindh-Pakistan

²Incharge, Department of Obstetrics and Gynaecology, LUMHS, Jamshoro, Sindh-Pakistan

³Associate Professor, Department of Forensic Medicine, LUMHS, Jamshoro, Sindh-Pakistan

*Correspondence: zulfikar229@hotmail.com
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treated as an academic skill rather than an added managerial task.

Transforming technologies also means transforming medical editorial journalism. Artificial intelligence, paper mills, manipulative peer evaluation, predatory publishing, and the rapid expansion of digital communication pose new challenges for editors. Present-day editors therefore need ongoing professional enhancement instead of being limited to a single degree. WAME and other international organizations offer teaching tools on new topics in scholarly publications, such as artificial intelligence and ethics⁹. The standard of medical research ultimately rests not only on the shoulders of scholars and peer reviewers but also on the judgment, skill, and competence of editors. The contemporary medical editor should be a scientist, doctor, speaker and supervisor, instructor, mentor, ethical advisor, researcher, and a leader with decision-making ability. Medical journalism needs to invest in systematic editorial courses, mentoring programs, peer-review training, and continuing professional development¹⁰. Medical Editorial Journalism has a responsibility to do more than produce publications; it should encourage better scientific research, disseminate credible evidence, and retain the public's and readers' faith. One manuscript improved by an editor is only one publication improved, but one researcher improved by an editor is scientific literature improved and can persist and progress for several decades. The prospects of medical journalism will rely not just on how many papers we publish, but also on how prudently we pick, how ethically we revise, how truthfully we correct, and how efficiently we assist future generations of scholars in transmitting the unique, new and accurate knowledge to become experts in the research world.

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