

The impact of electronic publishing

This issue of the Journal marks a major step towards electronic publishing. From now on, manuscript submission and review will be web based. In addition, the journal will be accessible on the web to all subscribers.

Electronic publishing poses opportunities and challenges. Scientific print journals have imbedded themselves with the scientific research establishment for generations. This partnership has served investigators, readers, and the publishing industry very well. However, the cost of scholarly publications to research libraries has increased four fold over the last 20 years, from an average of \$2 million./year to close to \$8 million (Canadian) in 2003. Academic publishing is big business. For example, Reed Elsevier, one of the giants of the industry with 1800 periodicals, brings in \$2 billion per year, with an operating profit margin of 30%.

There is a view, passionately articulated by some scholars, that hefty subscription fees for journals are blocking scientific progress. Thus the advent of E-publishing. Much like web blogs have done for journalism, E-publishing is bringing the democratizing force of the web to the medical/scientific domain. The costs and infrastructure requirements required for this are a fraction of the costs of print publishing. Several non-profit start up companies have been created to produce their own scholarly journals in competition with established publishers. These include the Public Library of Science, based in California, and BioMed Central, based in London. These E-publishers charge contributors a modest fee, and are free to readers. Other web based initiatives include Google Scholar, a free service which can search for peer-reviewed articles as well as theses, abstracts, and other material. With the combination of free abstracts, free distribution to the developing world, and public-library subscriptions, most people can obtain access to the medical literature without charge.

The advent of web based submission and review eliminates many logistical barriers to article submission which can now be done with a few clicks. Since articles can be submitted more casually, with less of an investment time and effort, it carries the risk of more submissions of lower quality. Indeed, publications that have made this conversion have reported this trend. Nonetheless, the saving of secretarial and administrative time is worthwhile.

An additional concern is the impact on reviewers. Reviewing manuscripts is an act of true altruism. The motivation for reviewers is the desire to support the collegial peer review system,

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and maintain a high scientific standard, thus indirectly contributing to having one's own manuscripts fairly and conscientiously reviewed. This process has worked well. However, as the number of journals have proliferated, many editors report an increasing reluctance of reviewers to make this important contribution. This reflects an erosion of the social contract binding scientific and medical researchers together.

The advent of e-publishing in medicine will affect the traditional reliance of University promotion committees on the publication record of applicants. At many universities, promotion is based to a significant degree on a straight count of published articles in peer reviewed journals. In the era we are entering, exactly what constitutes a scientific publication may be more difficult to define. A colleague could readily initiate the North Overshoe E-Journal of Urology from the basement of his house. Undoubtedly, this august journal would be read with interest by the urologists in that community (n=2). Clearly the advent of such entities, which seems inevitable, will create a grey zone of obscure publications whose academic value is uncertain. Impact factor will become paramount. It will be important to be as stringent in our standards of web based publications as paper based.

An uncertainty in all of this is the future of print publishing in medicine. Futurologists have been predicting the demise of print newspapers for 20 years. At last check, the newspaper industry was as vigorous as ever. People still like to read the newspaper, and the same may apply to print journals. Nonetheless, the high cost of producing glossy print journals, the modest circulation of many subspecialty journals, and ready web access to most publications are major drivers for change in the business model of medical publishing.

The CJU is preparing for these shifts and changes. We have maintained heavily subsidized subscriptions due to the support of our sponsors and advertisers. We have a large cohort of willing and capable reviewers drawn from the Canadian Academy of Urology who continue to donate their time and expertise generously. Shifting to electronic publishing will diminish geographical barriers to our readership and our contributors, and increase the diversity and depth of our journal. We are optimistic about the future.

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