We are taking over the reins of an important journal at a difficult time for scientific publishing, indeed for all of science. Exploding knowledge with its concomitant specialization, tougher and leaner funding, decreases in the subsidization of basic research from shrinking clinical resources, questions about tenure and job security as well as increased competition from other journals for the best articles are just a few of the problems facing us (1–3). Although we can't make these things better, we also cannot allow them to distract us from our primary charge: disseminating solid and exciting advances in basic or clinical research that provide new insights into human physiology and disease. We are in service to good science, and want to fulfill the "desire-to-know" that attracted us to these endeavors in the first place.

Our task is made easier by our predecessors. We are grateful to be taking over a smoothly running, professional operation. Consistent quality of research, unprecedented attention to the peer review process, fairness, and speedy publication are just portions of the legacy of the previous administration. We intend to continue these improvements, but we also want to pull the *JCI* even further out in the front of the pack of journals crowding the field. We want to make the *JCI* the flagship journal for worldwide biomedical research. The editorial by Varki et al. reviewed the many areas in which the *Journal's* impressive gains could, and will continue to be, measured (3). We, in turn, want to address some of the intangible—and not as easily measured—issues that bear on the *Journal's* future.

A primary issue is the *Journal's* continued comprehensibility to a broad readership in the face of a virtual explosion of knowledge-building in the biomedical sciences. But for all this building of knowledge, we seem to be busily reconstructing a virtual tower of Babel. A recent editorial decried the "withering exclusiveness" that is growing as the languages of specialties and subspecialties gets more impenetrable to nonspecialists (and sometimes, even specialists) (4). This is a problem we too want to address. One concrete thing we intend to do is to expand the use of the Perspectives series as an educational tool for our readers. In conjunction with the authors, we hope to use them to illuminate new breakthroughs published in the Journal or elsewhere, with a minimum of the language of the specialty (or at least defining our terms). This will not be a "dumbing down," but an "opening up." We will also pay increased attention to article titles and abstracts, so that JCI readers from different areas can understand any paper's primary conclusions. In addition, we hope to make editorials what their name implies: insightful, accessible commentaries not simply exhaustive reviews—on new issues, discoveries, and controversies with direct bearing on biomedical research.

Another hard-to-measure, but sensitive, issue is the editorial policy used in accepting or rejecting manuscripts. How does one weigh "sexy but risky" against "safe but boring"? There is a growing concern that the power of methodology-

driven research has become so seductive and the standards for the interpretation of data so stringent that we are stifling creativity and innovation (5, 6). No journal has a magic formula for balancing artistry, novelty, and rigor, but we are going to try to walk that line. Similarly, we are sensitive to issues regarding perceived battles for space between the new versus the traditional approaches to science. The plaintive comment that "there is nothing very clinical about the JCI any more" is not a new one (the quote actually comes from a history of the Journal by former Editor-in-Chief, Philip Bondy in 1959!) (7). As in the past, the JCI will make every attempt to preserve a balanced representation of all facets of research relevant to human biology and pathophysiology. "Excellence and originality are the major criteria for acceptance rather than trends and fashions" was a key statement-of-purpose in Ajit Varki's inaugural address as Editor-in-Chief in 1992 and we see no reason to deviate from this stance (8). We are scientists after all, and know the excitement of that first glimpse of something new. But if we err, it is going to be on the side of solid science—basic or clinical.

We also want to address the question of public presence. Too often, the public press gets things wrong. But we can't hide from the public press: science is not done in a social vacuum. Like it or not, we rely on the good will and the understanding of the public to support our research. Therefore, we plan on focusing additional attention on our interactions with the press. Press releases will be written in conjunction with the authors whose work is cited, and aimed at select writers in the biomedical community. Scientists have the primary responsibility for communication of science, not the science writers. If they get it wrong, it is largely our fault, so we have to work to make sure they understand.

Well, how do we intend to enhance the Journal's stance and impact over the next five years? Can we really improve on its already high standing in the field while simultaneously playing a stronger role in the scholarly education of its readers? We believe the answer is a resounding yes. Indeed, some of the pieces that we need to do so are already in place. A recent notable success for the *Journal* is the rapid transition to electronic publishing. Finances permitting, we intend to keep online access free-of-charge to everyone. As our readership increases and new marketing opportunities avail themselves, we hope to take every advantage afforded to us by this powerful medium. With this end in mind, we have selected a new Managing Editor for the Journal who has an extensive background in electronic publishing and marketing. Leah V. Blackburn, M.Sc., is the former Managing Editor for Blood and Clinical Chemistry and will oversee the stabilization of the administrative Editorial Office as the *Journal* moves further into the electronic era of publishing.

At the same time, we have also made every effort to assemble an Editorial Board that reflects the far reaching and expanding interests of our readership. The selection of these individuals—active clinicians as well as basic scientists—reflects our desire to continue to encourage submissions from every field of biomedical research. To take further advantage of our increased visibility, we have also expanded the *Journal* staff to

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include a Senior Science Editor: Fintan R. Steele, Ph.D., a former science writer for the *Journal of NIH Research* and more recently, the *News and Views*, and *News* Editor for *Nature Medicine*. We believe that by working in concert, the newly expanded Editorial Office and Board of Editors will play invaluable roles in guiding the *Journal's* future course.

Finally, we want to stress that this is not the *editors*' journal, it's *your* journal. We rely on you to send us your exciting research, to help us evaluate the manuscripts we receive, and to also share your expertise with us by suggesting perspectives and editorials. Indeed, as we prepare to select our next Board of Consulting Editors (the new list will appear in June), we invite all of our readers to submit names of any individuals that you feel would balance or extend the *Journal*'s ability to judge new submissions from this country as well as abroad. As indicated in the recent editorial by Varki et al. (3), the *JCI* has truly evolved into an international journal and we want to make certain that all of our contributors have a voice in our future development. Above all, we want the *JCI* to continue to play a major role in biomedicine as one of the strongest and

clearest voices of the scientific truths that we all seek to understand.

Stephen J. Weiss, M.D. for the Editorial Board

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