



**SOUTH AFRICAN MEDICAL JOURNAL –
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120 years young

The human biological clock is set at about 120 years, though most succumb long before and it is quite exceptional for anyone to get to strike this time. Having been established in 1884, the *SAMJ* now celebrates reaching this milestone. The energetic and outspoken editor of the first South African Medical Journal, Dr W Darley-Hartley from East London, understood how important it was for the profession to have a recognised organ of its own. He aimed 'to record the result of scientific and clinical observation on the one hand, and on the other to fearlessly, as far as in us lies, guide, direct and defend the common interests of the profession and the ethical properties of its individual members'. How does today's *SAMJ* compare with the past, what major issues does it face and what lies in store?

At the journal's centenary celebration in 1984, the editor, Stuart Gilder, was struck by the similarity between problems exercising the medical profession in those days and at the time of his review. They are still with us! High on our agenda are the ongoing arguments about the fee tariff, the relationships between doctors and pharmacists and our right to dispense, and problems with the general public and the media. While smallpox which at times swept the country, has been conquered and polio is also about to disappear off the planet, we are still plagued with sexually transmitted diseases, tuberculosis and resistant forms of malaria and now have the ghastly new addition of an infectious disaster, HIV/AIDS.

Since our centenary the journal has undergone many evolutionary changes, some with unanimous support and others despite vigorous resistance. The changing health care environment, political and medicopolitical revolution and money, so often the final arbiter, have all played their roles.

Increasing competition with an increasing number of specialist journals, the successful launch of *CME* which celebrates its 21st birthday this year, and many new commercial offerings required continual adaptation of the *SAMJ* to meet new needs and challenges.

Editorial independence is a concept which editors and it is to be hoped most readers value highly. However, even in what are regarded as the most open societies this can be a fragile value easily shattered by external forces. The most shameful example in the history of the *SAMJ* was the withholding, at the behest of the then Chairman and the Secretary-General of the Medical Association, of correspondence critical of the authorities for acts such as those leading to the death of Steve Biko, and of the medical profession for failing to make its voice heard adequately on such important issues. There were of course political differences within the Association, but a significant viewpoint was nevertheless denied a voice in the columns of the journal. The price of democracy is eternal vigilance, and the present editor, Dan Ncayiyana, has had reason from time to time to remind us of the importance of editorial freedom. Lest we be misunderstood, there is an important distinction between editorial independence and

licence, which only fools would support.

Organisational independence is a broader issue, at the heart of which are the very different management requirements for catering for the professional needs of the membership and for running a competitive publishing business. These have at times become painfully obvious, recently and notably when advertising market share for the publications plummeted precipitously despite their demonstrated influence and largest circulation when responsibility for the advertising team was removed from the publishing division with the worthy, but as it turns out misguided, vision that they could also be responsible for all marketing functions of the Association. In moving towards an independent business unit we are in excellent company, as the *BMJ* has moved swiftly and more comprehensively to embrace good governance of this kind.

The **contents** of the journal have moved with the times. Gone are contributions such as those boringly presented 'from the Secretariat' sections, unsigned editorials and other material that earned the journal the pejorative title 'his MASA's voice'. Following a spat in the 1980s in which an editorial with a political message, to which several members took exception, seemed to originate from the Executive Committee of the Association, all contributions now carry the name of the contributor(s). The addition of skilled investigative reporters to the editorial team has resulted in vastly improved coverage of the medico-political landscape. The recent march by doctors on parliament, led by the chairman of SAMA, Kgosi Letlape, and covered by Chris Bateman in this issue, is likely to be judged as one of the most remarkable demonstrations of unity across political lines in the history of medicine in this country.

The use of **language** in the *SAMJ* has been one of the most emotive issues in its history. Even the innocuous proposed change in 1987 of the Afrikaans 'Tydskrif' to 'Joernaal', with full support of the Afrikaans-speaking medical schools, had Marais Viljoen, Secretary-General of MASA, rallying the troops in strong opposition. An editorial in 1984 noted the worldwide increasing dominance of English as the most important scientific language. South Africa has marched increasingly in tune with the world on this issue, not because of *SAMJ* policy, but because of the choice of its contributors and its readers.

At 120 years young the *SAMJ* now competes in the age of space and electronics. Its next challenge is to make our **online** presence more readily accessible to members and to the world at large, thus building on the fine foundations laid by our predecessors.

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Deputy Editor

