

A Farewell Message from the Retiring Editor-in-Chief

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In September, I attended my medical class reunion in Nova Scotia. I am a graduate of Dalhousie University Medical School in Halifax, Nova Scotia, Canada. Each reunion (now yearly) includes a half-day scientific/academic session. I had been tasked to give a presentation. Looking for a topic, I settled on my experience as a medical journal editor. I chose the following title: *My Long But Unspectacular Life as a Medical Journal Editor*.

I was tempted to use it as the title for this editorial.

You might recognize part of the title from the popular *PBS NewsHour* interview segment entitled *Brief But Spectacular*, which features a subject's personal take on a defining theme.¹ The segments are produced by Steve Goldbloom, the grandson of the late Dr Richard Goldbloom, one of Canada's most famous pediatricians and former head of pediatrics at Dalhousie University Medical School when I worked there as cardiologist. The origin of the series title, *Brief But Spectacular* came from Goldbloom's grandfather, who, after his grandson went into a synagogue service and abruptly left, quipped, "You made a brief but spectacular appearance." In his early 90s, Dr Goldbloom himself had

been interviewed in one of his grandson's segments. I remember attending a presentation by Dr Goldbloom on medical writing in which he introduced me to *Strunk and White's Elements of Style*, the classic book of American writing style. I still keep it nearby.

This editorial will be my last as editor-in-chief of the *Journal of Insurance Medicine* (JIM).

At the 2022 Fall AAIM Meeting in Boston, I informed the Executive Council that after 17 years at the position, I planned to retire in a year's time at the 2023 Fall AAIM Annual Meeting in Washington.

In a 1988 editorial, John Elder, a former editor of the *Journal* and president of AAIM captured the essence of the specialty of insurance medicine:

"Insurance medicine is a broad discipline; its scientific basis is the study of mortality and morbidity. Its practice requires experience in clinical medicine. Its domain or environment is the business world. Its responsibilities are to the individual who applies for insurance, to the company who employs its services, to the insurance industry and to society at large."²

The *Journal* serves as the most visible representative of our medical specialty and



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makes a unique contribution to the world of medical science. The utility and intellectual state of a professional society, like the American Academy of Insurance Medicine (AAIM), depends significantly on the quality of its journal. The quality of a medical journal is directly related to the viability of the discipline it serves and the organization it represents. In turn, a scholarly journal's most important function is to provide a vehicle for intellectual exchange among the members, creating within them a sense of belonging to a community of shared interests. In many respects, the *Journal of Insurance Medicine* is like any traditional scholarly journal. Its readers are united by a common interest in insurance medicine.

The *Journal* has faced some unique challenges that still need to be considered as we look at its future direction. These challenges include: a relatively small subscriber base, a small pool of potential contributors (many

of whom do not have in-depth training in academic research), a small pool of potential peer reviewers for articles and too much reliance on a few people to produce the *Journal*. This has made the *Journal* very vulnerable should these individuals be unavailable for any length of time related to illness or change in employment status. Any future changes in the *Journal* must be made in the context of these realities.

Producing a medical journal regularly every quarter in a business environment often as a sideline to the demands of a full-time job is a challenge. Adding to this challenge, the insurance industry continues to go through upheavals of restructuring the way it works to become more efficient and reduce the cost of doing business. Some companies are employing fewer doctors, which leave their medical directors less time for professional interests outside their companies.

Thus, in addition to recruiting a new editor-in-chief my decision provided an opportunity for the AAIM leadership to review the editing and production processes of the *Journal*. To maintain this relationship in healthy balance is not easy, especially when limited resources must be shared among all the other tasks an association must address. A key objective has been to find ways to lighten the editorial tasks so that they are more manageable for individual medical directors to do in addition to their normal work and more acceptable for their company to support.

Under the leadership of President Tim Steffen, initial consultation with a large group of senior AAIM members, previous authors and associate editors resulted in the formation of a smaller *Journal Advisory Group (JAG)* to advise and facilitate the appointment of a new editor-in-chief and the transition process.

Under the chairmanship of Michael Moore, the JAG met regularly over the past year. Areas reviewed included: current challenges for AAIM to continue producing a medical journal, the role of the editor-in-chief and sectional associate editors, the role of the

editorial assistant, the peer review process, the production process, the relationship with our publisher, and the requirements for indexing in MEDLINE/PubMed, the principal online bibliographic citation database of the National Institutes of Health/National Library of Medicine's MEDLAR's system.

Potential candidates for the editor-in-chief and deputy editor positions were identified and interviewed. Successors were chosen and agreed to assume the positions following the 2023 Fall Annual AAIM Meeting in Washington. Rod Richie will take over the position of editor-in-chief Michael Moore will become the deputy editor. During the transition, I have been invited to remain as editor emeritus. The *Journal* will also have a new set of associate editors representing the major specialty interests of insurance medicine. More about them from Dr. Moore in the next issue of the *Journal*.

Our new editor-in-chief Rod Richie brings a wealth of clinical practice, insurance medicine, teaching, and medical journal publication experience to the position. He is a graduate of Baylor College of Medicine. He is a Fellow of the American College of Physicians and the American College of Chest Physicians. He practiced for many years as a pulmonologist and critical care physician in Waco, Tex. Joining Texas Life as medical director, he soon became very involved in insurance medicine, obtaining his board certification, co-authoring the chapter on respiratory disorders in the 4th and 5th ED of *Medical Selection of Life Risks*, publishing 11 review articles in the *Journal of Insurance Medicine*, presenting on 8 occasions at AAIM's Annual Meetings and teaching Pulmonary Workshops at AAIM Triennial Courses over the past 35 years.

Our new deputy editor, Michael Moore is chief medical director of Nationwide Insurance in Columbus, Ohio. He is a graduate of The Ohio State University School of Medicine. He also has an MBA degree from the Fisher College of Business at Ohio State. He is board certified in both Internal Medicine

and Insurance Medicine and is a Fellow of the American College of Physicians and the American Academy of Insurance Medicine. He is an associate editor and frequent author in the *Journal*. In 2001, he was awarded the W. John Elder MD award for his contributions to the *Journal*. Dr Moore was President of AAIM in 2017.

AAIM is very fortunate that Drs Richie and Moore have agreed to head the *Journal*.

During my time as a member of AAIM, there have been 5 editors in chief of the *Journal*: John Elder, Roger Butz, Nigel Roberts, Martin Engman, and Ken Krause. Each made important advances during their editorship.

I have tried to follow their example. Perhaps the biggest change during my tenure has been in the physical presence of the *Journal* as it transitioned from print to digital format. This new format includes not only the full text of everything that would have been published in the paper version but also has allowed us to use the remarkable capabilities of the Internet, such as increased production and distribution speed, worldwide reach, infinite capacity, searchability, interactivity, the ability to link, and so on. Now when a manuscript has completed the editing and production process, it is first posted in the *Journal's* ONLINE EARLY section on the AAIM website where articles ready for publication are posted while waiting for other articles for a specific issue still going through the editing process. When all are ready, the article is included in the complete issue posting. There remain several additional capabilities with the digital format awaiting exploration and possible adaption.

Associated with this process has been a review of the *Journal* by the National Library of Medicine (NLM). Because of our new digital formatting, and to maintain indexing of the *Journal's* articles with NLM/NIH/PubMed, we are required to save our articles in a NLM approved electronic archive site. We now use PORTICO, a digital preservation service for electronic journals, books, and

other content. PORTICO is a service of ITHAKA, a not-for-profit organization dedicated to helping the academic community use digital technologies to preserve the scholarly record and to advance research and teaching in sustainable ways.

Let me conclude on a note of thanks.

First, a thanks to you, my AAIM family of readers; it has been a tremendous privilege to lead the *Journal*, and a wonderful opportunity to serve you.

Secondly, a special thanks to all those who have submitted manuscripts to the *Journal*. Some of you are regulars. For others, it has been your first experience providing the editor-in-chief with a much-enjoyed coaching opportunity.

I would like to first express my debt of gratitude to President Tim Steffen, Chairman Michael Moore, and the members of the JAG committee for immediately and successfully tackling this challenge.

One of the most pleasant aspects of my time with the *Journal* has been working with those behind the scenes who continue to make it into a respected journal for insurance medicine. Obviously, many have played a part in making progress towards this goal.

I particularly want to thank Lara Burita, the *Journal's* editorial assistant who works from home in the Fort Wayne, Ind area. Her primary function has been copy editing where she transforms the manuscript into an article. Copy editing "make the manuscript say what it means and means what it says." Typically, this involves correcting spelling, punctuation, grammar, terminology, jargon, and semantics, and ensuring that the text adheres to the *AMA Style Manual*.

She is also responsible for adding "display copy," such as titles, standardized headers

and footers, figure captions and lining up tables. Although proofreading is a task distinct from copy editing, she also does this along with checking the references against PubMed and formatting the manuscripts for transfer to our publisher. She then coordinates the back and forth of the various proofs between our publisher, the authors, and me, leading to the final posting.

Alley Ulrich has been our account executive at the *Journal's* long-time publisher, Allen Press. She has coordinated everything from their end with Lara, the AAIM Executive Secretary's office and me. Alley has been invaluable in rapidly helping us sort out any publishing issues that arise. Recently Allen Press was sold to Knowledge Works Global Ltd (KGL), a member of the CJK Group, Inc, one of the largest printing and publishing services organizations in the United States. Alley continues her role there.

A special thank you to Ellyn Holzman and her staff at the AAIM Executive Secretary's office. It has been a special pleasure to work with Ellyn and her team. I don't have to tell AAIM members how valuable Ellyn is to all aspects of our organization. I like to say that since I found her, she is my legacy to AAIM!

Finally, and most importantly, my thanks go to the Associate Editors and many reviewers who committed much time and constructive effort to emphasize the 'peer' in peer review.

"MacKenzie foursome to the first tee please." Oops, got to go.

REFERENCES

1. Brief But Spectacular. Accessed at: https://en.wikipedia.org/wiki/Brief_But_Spectacular
2. Elder WJ. Editorial. *J Insur Med*. 1988;20(4):2.