

SMJ: Student Medical Journal

(Faculty of Medicine, University of Colombo). 2008; 1: Inaugural issue

Seasoned medical journal editors are reputed to be notoriously mordant, sometimes even acerbic. In actual fact they show albeit uncommonly signs of satisfaction and optimism with medical writing and research. And few things can rival the inauguration of a good quality medical students' journal when it comes to gratifying and gladdening the heart of someone who has savoured the pleasures and suffered the pangs of editing an international medical journal for 19 years.

When I consider that I am writing this review for a medical journal established way back in 1887 that is getting stronger with the passage of time, about a fledgling journal published by students of a historic medical school that can trace its heritage to 1870 with pride, with which I too have been associated for 46 years or so, I sense a thump in my chest which feels suspiciously like the textbook description of a benign ventricular ectopic beat.

"Getting emotional, hah? Get to the point, old chap", whispers in my ear a stern editorial voice, now somewhat enfeebled I fear by upward banishment to Emeritus status. To the point, then.

First impressions last. The first ever issue of the *SMJ* has an incredibly fetching front cover. The ruggedly enchanting and famous façade of our beloved medical school, masterfully photographed and set against a cloudy and slightly broody bluish sky, can hardly be bettered as an iconic image of Sri Lanka since 1870. The variety of the fare offered to the reader on the back cover contents page is enticing. The number of articles is promising for an initial effort at publishing a journal. The font and letter size (Times roman 10-point) are well chosen, the paper is of excellent quality, and not too shiny, which makes reading tiresome.

The research papers show what I regard as their mandatory features: they are relevant, imaginative and reasonably original. It's nice to see that two senior registrars have collaborated with two medical students to produce an innovative paper on cancer patients' awareness of their disease. Unsurprisingly, but sadly, the vast majority of cancer patients knew little or nothing. Now here is a forthright wake-up call to all doctors. The authors write, "... the involvement of a doctor in providing information about the prognosis **was poor**" (the emphasis is mine).

There are many more lessons. In the trail blazing paper on health problems of some largely forgotten Colombo Municipal Council employees, the authors make this trenchant observation: "Needle prick injuries, cuts and exposure to toxins were the major health hazards. The availability and use of safety equipment were unsatisfactory". The article on medical students' career

preferences was a complete revelation to me. Why for example did geriatrics, psychiatry, radiology and dermatology score so low, when about 20% of our population will be over 65 years old by 2015, when nearly everyone has a mental problem or skin disease of some kind (even if it is only mild depression or groin itch), and modern imaging techniques are essential for the diagnosis of all but the most self-evident conditions such as measles or paronychia? Besides, the scope is wide open in these four specialities for a relatively unstressful practice, in the government or in the private sector. And what's wrong with physiology, one may ask. If you become a Professor, and are lucky, you could be the Chairman of an important Corporation, President of the SLMA and SLAAS – oh, never mind.

The paper on depression among institutionalised elders is revealing too. Over half of them were found to be depressed. The authors' plea on behalf of these neglected people is at once both evidence-based and emotive: "Depression among institutionalised elders is an important timely issue often undiagnosed and untreated, which needs to be addressed. In the light of the results of this paper, a multidisciplinary approach is recommended for preparing social arrangements, enhancing family and community support and home care for elderly individuals". I congratulate the authors for that superbly worded succinct summary of their findings and conclusions, and their impeccable research methodology.

There are interesting contributions under "Student diary" (a slightly awkward label, needs to be changed in the next issue!) from Dilushi Wijayarathne, Sachitra Somarathna and Gina Hadley. And there is a characteristically outspoken article by Dr Sarath Gamini de Silva expressing his concerns – shared by many of us – about the new curriculum with its apparently endless barrage of SGDs and assessments, some of them seemingly pointless and badly designed, and the failure of many students to internalise the overarching importance of clinical experience that can be only gained from patients and clinical teachers in the wards.

There are a few minor points that need attention in future issues such as grammar, punctuation, consistency of style, subediting and more careful proofreading. I am sure these will come fairly soon. All in all, the first issue of the *SMJ* is a tremendously successful debut in medical journal publishing by students; and it radically changed a view I was tending towards, namely, that local medical doctors find research tedious and not worthwhile. If the *SMJ* is a valid yardstick for measuring talent and involvement in research and writing, research in the medical sciences is in secure young hands.

Colvin Goonaratna, Emeritus Editor, Ceylon Medical Journal.

E-mail: <si7np5e@gmail.com>.