



How a review in *Prescrire* is produced

***Prescrire's* reviews are produced through a complex, collective editing process, which has been fine-tuned over the years. With a very few exceptions (which are clearly indicated) the reviews published in *Prescrire* are all written and edited entirely by *Prescrire's* Editorial Staff.**

So-called "medical" publications include a wide variety of titles, whose purpose, financing and procedures are vastly different. It is customary to make a distinction, at very least, between continuing education journals such as *Prescrire*, publications reporting the results of medical research, also known as primary research journals (such as *The Lancet*) and news-oriented daily or weekly trade publications containing professional information and advertising.

There is a difference

These various types of publication have fundamentally different editorial procedures. The trade press contains many articles derived directly from press releases or press conferences, organised by this or that interest group (professional associations, industry or government groups, etc).

In primary research journals, manuscripts are generally submitted by outside authors; the "editors" make an initial selection; a few "reviewers" or "referees", specialists in the field, give their opinion on the quality of the manuscript, and the appropriateness of publishing it, with certain corrections.

The production of the reviews in *Prescrire* follows a complex, collective editorial process which has been progressively fine-tuned over the years. The articles published in *Prescrire* are written and edited by *Prescrire's* own Editorial Staff (with the exception of some texts in the "Outlook" section which are

written by persons from outside the Editorial Staff, and carry a clear byline as such).

An editor, part of a team

Prescrire's editorial process relies upon four types of actors: editors, literature search specialists, reviewers and quality controllers.

Almost all of *Prescrire's* editors are doctors, pharmacists, nurses or dentists. A few are economists or journalists, with particular expertise in the healthcare area. Most of the editors are healthcare professionals who spend a large part of their working time in active clinical practice. They have all received in-house training over a long period in *Prescrire's* editorial production process.

Several years of in-house training

No matter what their prior professional experience may be, candidates for *Prescrire's* Editorial Staff start off with a training period of around 6 months, which combines critical analysis of draft reviews with mastering the house styles and production methods.

They then try their hand as a "junior" editor, supervised by a "tutor", usually beginning with short texts for the "*Idées-Forces Prescrire*", "*Repères*" or "*En bref*" sections. To become a "senior" editor, it usually takes 2-3 years of writing under an editor's tutelage.

Some senior editors are trained to co-ordinate a section (section editor), or the publications as a whole (Editorial Director).

Technical skill, openness to criticism, long-term commitment

Over the years, *Prescrire's* Editorial Staff has observed the difficulty of working with outside authors. *Prescrire's* writing procedures are specific and demanding; they require both technical competence (up-to-date knowledge, a gift for critically analysing research materials, etc.); openness to criticism from others, and special skills which require

extensive on-the-job training and a long-term commitment. Today, it is very unusual for a text to be written by someone from outside *Prescrire's* Editorial Staff.

A collective editorial process

For each section, the choice of proposed articles is made collectively by a group of editors, coordinated by the section editor. Regular meetings are held to draw up a list of subjects, chosen first of all for their relevance to practitioners, and secondly according to how well they fit into *Prescrire's* database of reviews.

A detailed editorial plan

An editor is put in charge of each proposed subject, backed up by a referring editor (chosen from among the senior editors). Together these two develop a detailed editorial plan ("*calage*"), with input from the other editors, the section editor and the Editorial Director, either in writing or during a meeting. The editorial plan aims to define the objectives for the piece, the questions it will attempt to answer, the points which will deliberately not be addressed, and the initial avenues for the literature search.

Sorting the results of the literature search

The editor in charge of the proposed review puts together a request for a search of the literature, developed with *Prescrire's* Literature Search Department. The search strategy is adapted to the subject, in collaboration with the editor, who is provided with documents from *Prescrire's* Literature Search Department, a selection of documents available over the Internet, and lists of materials gleaned from searches of several data bases and from various organisations. The editor and information search specialists work together until they arrive at a search strategy that is perfectly adapted to the editorial objective. The literature search can also be supplemented later, according to whatever needs may arise as the article takes shape.

Editor in charge and referring editor

The first editorial stage consists of sorting through the results of the literature search and ordering the documents that appear to be pertinent, from among all the materials identified by the Literature Search department.

An exceptionally large number of persons are involved in rereading *Prescrire's* articles.

With the information thus obtained, the editor writes a first draft, which is then submitted to the referring editor, who is in charge of discussing its structure, checking on the intelligibility and solidity of its argumentation and the value of its bibliography, helping to better separate established facts from hypotheses, and requesting corrections or additions, etc. A standard list of the essential points to be checked by the referring editor has been drawn up, in order to ensure the quality of this work. The editor in charge and the referring editor continue to work together until they arrive at a text that satisfies the requirements at this stage.

Section editor

The version jointly produced by the editor in charge and the referring editor is then forwarded to the relevant section editor (along with the outline of the editorial plan, the literature search proposal, the materials utilised as well as the unused documents, in addition to the different preparatory drafts). The section editor carries out a preliminary check of the text, with the results of the literature search in hand, and makes any necessary corrections. The section editor then approves the draft to be submitted to outside reviewers' groups for quality control.

Numerous and multidisciplinary groups of reviewers

The draft article is submitted, anonymously, to a group of reviewers in charge of criticising both its substance (is it reliable, up-to-date, adapted to day-to-day practice, etc) and its style (structure, syntax, readability, etc).

A custom-tailored reviewers' group

The reviewers' groups, each made up of 10 to 40 persons according to the nature and the breadth of the proposed article, are specially put together on a "custom" basis for each text. Reviewers belong to three complementary categories: professionals from outside the Editorial Staff who are specialists in the subject at hand; methodologists; and practitioners representative of *Prescrire's* subscribers (namely, doctors and pharmacists, specialists and general practitioners, on hospital staff or in private practice). Members of the Editorial Staff are added to round out the reviewers' groups, both for their own expertise and to ensure proper coordination between the sections.

Many continuing education publications have a "scientific committee" or a "steering

committee”, which are often largely honorific. In primary research journals, the manuscripts submitted are analysed by a limited number of “reviewers” (the “peer review” system), often just two per article.

Throughout the world, a few publications who are critical of medicines, and some organisations that publish clinical guidelines, have reviewing procedures similar to *Prescrire's* and their articles are reread by a number of reviewers comparable to *Prescrire's*.

Contributors identified

The list of reviewers from outside the Editorial Staff who contributed to one or several articles in an issue are identified in the masthead, on the inside front cover (with the exception of a few reviewers who prefer to remain anonymous).

Prescrire does not generally rely upon university hospital specialists to write its texts. However these specialists on a given subject have a key role in the reviewers' groups, where their input often proves very useful.

Editing and quality control:
always collective

The importance of the reviewers' input in the end result published in *Prescrire* can vary. It may appear modest, when the draft sent to the reviewers is already very final (confirmation of the article's quality is none the less essential). It can be more significant, even decisive, especially for long and complex articles or controversial subjects, for which information is scarce and difficult to obtain.

Contributions analysed critically

The quality of editing also depends, of course, upon the reviewers, how up-to-date their knowledge is, how available and how critical they are. The editors analyse the outside reviewers' contributions, for each article, taking into account the breadth of their remarks on the style and on the substance.

Specialised reviewers who never or only rarely submit remarks, who offer unsubstantiated critiques, or whose contribution is limited or of little relevance, are left to one side. On the contrary, reviewers who frequently offer relevant and constructive remarks, who supply detailed references in support of their comments, or who root out significant errors, are called upon regularly.

The reviewers who are drawn from among the subscribers are rotated regularly, to allow for a “fresh eye” and to give those who have already done a lot of reviewing a break.

Rewriting by the editor in charge

Comments by the reviewers' groups allow the editor in charge (who once again has the entire dossier in hand) to establish a new draft, after an update of the literature search. Reviewers' comments are analysed and critically sorted by the editor in charge. It is not just a matter of compiling the remarks, but of taking in the constructive criticism, leaving aside unfounded suggestions, reworking passages that readers did not properly understand, etc.

Internal quality control supervised by the section editor

This revised draft is once again checked, with the entire dossier in hand (including the comments from the reviewers' groups), by the section editor, who submits a final draft to be read by the Editorial Director and by a person in charge of internal quality control, with the supporting materials in hand. This quality control is to ensure that the text matches the content of the supporting materials, to check the accuracy of the quotations and the sources quoted, and to make sure there are no inconsistencies between the text, the tables, the footnotes, insets and various figures (prices, staffing, percentages, etc). The section editor, after having taken in the proposed corrections and taken into account one last update of the literature search, circulates the article, laid out according to the section's design, and it is checked one last time by the editor in charge, the Editorial Director and certain other editors who are involved with the particular theme.

Layout and final corrections

To finish off, a proof-reader reviews the laid-out article in search of lingering “typos”, any misspellings which may remain, etc. The Editorial Director can then sign off on the collective effort, and give approval for the article to be printed in an upcoming issue.

A collective byline

The choice of the word “editor” rather than author serves to underscore the collective nature of the way that *Prescrire's* texts are produced, the fact that they are in no way an “author's opinion”. For the same reason, texts are signed collectively “*Prescrire*”.

Editors, not authors

Like everything about *Prescrire*, the byline is the subject of much thought and attention. The practice has evolved over time. In the early 1980s, when *la revue Prescrire* was created, the intention of the editorial team was to publish only unsigned texts, in order to underscore the collective production methods. But very quickly the question arose of authors' motivations for writing, especially those on hospital and university staffs.

Therefore, for a long while, a more or less detailed byline was adopted: the name of the author of the first draft of the texts for the "Reviews" and "Editorials" sections: while anonymity remained the rule for the "New Products" and "Adverse Effects" sections in order to emphasise the collective production process, and also to protect the editors vis-à-vis the pharmaceutical industry.

The *Prescrire* Team

Over the years, *Prescrire's* collective production process has been significantly reinforced, and the system of individual authors' credits became both unfair to the majority of contributors and misleading for subscribers. And so, since the autumn of 1996, the system of bylines has been changed, in order to clearly underscore the collective, multidisciplinary, sustained, precise and therefore exceptional manner in which *Prescrire's* texts are produced.

The list of the persons making up the editorial team, and in general everyone who took part in the preparation of each issue, is published in the masthead on the inside front cover.

Adapting *Prescrire's* reviews for an international audience

Prescrire International publishes translations of selected articles from the French edition. The translation process developed for *Prescrire International* is perfectly in line with the collective editorial procedures which have guaranteed the quality of the French edition over the years.

The French texts are translated into English by *Prescrire's* specialised translators. Texts are checked for accuracy by *Prescrire*

International's Managing Editor, a bilingual general practitioner. An English mother tongue medical editor checks the style and roots out any ambiguities and inconsistencies.

The relevant section editor and the editor in charge of the original article check the translation.

Final proofs are checked by *Prescrire International's* Managing Editor and the bilingual Coordinating Editor. A British proof-reader and an English-speaking Sub Editor check for any remaining typographical errors. *Prescrire's* Editorial Director reviews each issue of the international edition and gives the final go-ahead for publication.

The benefits of collective production come at a cost

Prescrire's collective editorial production system is a complex and demanding process. Its objective is to ensure the publication of reliable, up-to-date content that is adapted to subscribers' needs.

Production times

This production process has a cost in terms of the production times. The proper execution of the different stages in this process requires certain minimum time intervals between the planning of a text and its publication: a period of many months, reduced, with difficulty, when there is an urgent need.

Budget

This production process also has a financial and human cost, because of the in-depth literature search, the logistic costs (circulating drafts, etc), the training periods and the cost of compensating all the literature search specialists, editors, outside reviewers and quality controllers.

This monetary cost is entirely financed by *Prescrire's* subscribers, all of whom pay for their subscriptions (see the financial report published each year in the March issue). The cost is in keeping with what it buys: the guarantee of the most reliable information possible.

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