Prescrire International translation procedures

Team work and strict quality control procedures

Prescrire International is a bimonthly English-language journal containing translations of selected articles from the monthly French edition, la revue Prescrire. The international edition was created with two principal aims: first, to offer non French speakers access to Prescrire’s systematic assessments of health technologies, and especially medicines; and second, to provide a platform for texts dealing with European and other international medicines policies.

The articles to be translated and the content of each issue of Prescrire International are chosen jointly by the editor-in-chief of Prescrire International and members of the editorial team of la revue Prescrire.

The texts are first prepared by a professional translation team, and are then thoroughly verified by a painstaking quality control procedure.

The translation team. The initial translations are prepared jointly by a British translator and the bilingual editor-in-chief of Prescrire International, who have both held their positions since the journal was created in 1992.

The translation process

The French texts are translated into English by the permanent translator, and checked for accuracy by the editor-in-chief of Prescrire International. Each translation is then sent to a British medical editor, who checks the style and looks for ambiguity and inconsistency. Her recommendations are taken into account by the editor-in-chief of Prescrire International, who deals with possible ambiguities and accepts or rejects the proposed changes.

The translation is then passed on to the editor with overall responsibility for the initial text, and to the relevant section editor of la revue Prescrire. It is also verified by the Prescrire desk editor. It is important to note that the responsible editor and section editor also check that the texts remain up to date. Indeed, several months can pass between the final literature update for the original article, publication of the French text, and its translation and publication in Prescrire International. Publication of new data can require the English translation to be modified or even cancelled. The date of publication in la revue Prescrire (given in the header of each article published in Prescrire International), and the date of the last literature update (given in the Literature search section at the end of each article) indicate the temporal validity of the English text.

The texts are then page-set by the production team of Association Médecin Prescrire (owner-publisher of Prescrire International and la revue Prescrire), under the responsibility of the editorial assistant. The consistency of the final layout is checked by the editor-in-chief of Prescrire International.

The proofs of the entire
Outlook

Financial independence: the key to impartial continuing education

Only financial independence gives the freedom to act effectively. Thank you to la revue Prescrire’s 27,000 subscribers whose trust enables us to pursue and develop this collective enterprise.

“Thank you for maintaining your, and therefore our, freedom…” “The freer and more independent you are in your judgements, the stronger you will be in the current situation…”, etc. The messages of support from subscribers to la revue Prescrire illustrate the obvious fact that only financial independence gives the freedom to act on the sole criterion of quality, and to carry out a healthy mission honestly.

It is only thanks to its total independence, made possible by its 27,000 subscribers and a determined, well-organised team, that la revue Prescrire is able to promote quality health care.

In the late 1970s, the founders of the journal made independence the essential condition of their project. Financial independence vis-à-vis the pharmaceutical companies was a key condition from its inception. It took 12 years’ work (from 1980 to 1991) to achieve total financial independence; i.e. to operate without a subsidy from the French government, relying solely on subscription revenue. Since 1992, much work has been required to maintain this total independence, as witnessed by the budget presented each year in the journal (see page opposite).

In order to have the freedom to act in the collective interest, it is essential to refuse all industry funding. This basic rule should apply both to individuals and to institutions, to state or quasi-public organisations, to health professionals (academic and hospital based), to patients and consumers (patients’ associations, etc.).

We must say now: NO THANK YOU… I PREFER FREEDOM – the freedom to act in the best interests of patients.

Association Mieux Prescrire:
fiscal year 2002-2003


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