

A change in editorship

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Editorial

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This edition of the *Journal of Clinical Investigation* marks the transition to a new editorial team from Johns Hopkins University. It is with great humility and excitement that we assume the mantle of the leading translational science journal in the world and the flagship of the American Society for Clinical Investigation.

The preeminence and storied history of the *Journal of Clinical Investigation* are the product of continuous effort and excellence exemplified by the prior editorial groups and the dedicated editorial staff. There is no better example than the group from Duke and UNC–Chapel Hill led by Howard Rockman, whose tenure has been characterized by excellence and innovation. We sincerely thank them and hope to emulate and expand on the successes of Dr. Rockman and his superb editorial team. They are the most recent in a nearly century-long line of leaders who have continued to renew and build on their predecessors' legacies of distinction of the Journal.

What do we hope to accomplish in our editorial term? The major priority is the continued communication of world-class clinically directed fundamental science and cultivating novel ways to transmit this information. We will work with the ASCI leadership to develop the most efficient model for publishing and disseminating the *JCI*. As the Journal is a publication of the ASCI, it is important that we use the platform to support the mission of the Society and its foundational goals.

In 1909, the ASCI was born as the brainchild of Samuel J. Meltzer, a new society designed to encourage medical research by physicians engaged in the practice of medicine (1). A charge of Meltzer's opening address of the first scientific meeting was to devise new scientific methods to meet the challenges of the contemporary problems in clinical research. In his address, Meltzer codified the role of the physician-scientist. Today, our vision is to enhance the preeminence of the *JCI* and its role in the mission of the ASCI to

accelerate the distribution of scientific information to advance our understanding of disease and ultimately improve the lives of patients. This vision derives from a core commitment to the development of physician-scientists and their mission to improve human health. In this context, we believe the *JCI* should promote transmission of clinically directed fundamental science and serve as an interactive forum to discuss science and promote networking among colleagues in the field.

Arguably my most important task as Editor is the selection of the Editorial Board. We have assembled an extraordinary and accomplished group of Associate Editors from Johns Hopkins, to complement the outstanding editorial staff of the journals. The editorial group has the expertise to cover the breadth of science submitted to the journal and the innovative spirit required to assess the quality and importance of emerging areas. The Associate Editors will have autonomy in editorial decisions and responsibilities, including the evaluation of new and existing content, the Editorial Board, reviewers, and Journal operations. They will serve as the advocates for their scientific disciplines in the Editorial Board meetings and as advocates for the Journal and the Society. The composition of the Board will be nimble and adapt to the changes in science and submissions to the Journal.

A central goal of our editorial group is support of the ASCI. There are a number of opportunities for the journal to accomplish this objective. Fundamentally we aim to reinvigorate the original charge that catalyzed the creation of the Society—the joy of the hunt and discovery of new knowledge.

We wish to highlight the societal importance of work in the biomedical sciences. Importantly, we want to further engage ASCI members as well as physician-scientists in training. In this spirit, we will have MD-PhD student members of the Editorial Board; their role will be not only to help vet the science but, as importantly, to weigh in on platforms for delivery of the Journals and ancillary features.

The sine qua non of a *JCI* paper is that it changes the way we think about a problem in human biology and medicine. Achieving this goal requires a spectrum of approaches and data sources, such as simulation, molecular and cellular studies, animal models, and human data, in both individuals and populations. The most important drivers of content are the rigor and innovation of the science in clinically relevant biomedical studies of broad importance. The *JCI* has been distinguished by its publications in original science, clinical medicine, reviews and review series, and commentaries. We will build on the strengths of these components and expand the range of commentaries that put the original science in context. Commentaries have traditionally been authored by academic researchers in the field. We will continue to ask clinical investigators to comment on more basic work and basic scientists to comment on clinical studies, as well as seeking insights from scientists working in unrelated or complementary areas. We will commission commentaries from non-traditional sources, such as representatives from government weighing in on aspects of funding and policy and industry leaders discussing the commercial impact of the science. We hope commentaries from a variety of sectors will illuminate the general societal impact of biomedical science and contribute to the growth of support of science at the grass roots. We will use online surveys of readership and membership to continually assess relevance and utility of Journal features.

A traditional strength of the *JCI* is the review process, which we are committed to continuing. The initial reviews will be performed by experts in the field with considerable experience as reviewers. We will endeavor to ensure that reviews will be rig-

orous, fair, and rapid and will define a trajectory for the manuscript. We will strive to ensure that the critiques clearly define the requirements for a responsive revision without burdening authors with the need to decipher the critiques or perform unnecessary experiments. The merits and priority of submissions will be discussed in weekly face-to-face meetings of the Editorial Board. We recognize that not all decisions will be favorable, and that we may not always be right, but we are committed to a rigorous and fair review process.

A defining feature of the *JCI* and other top-tier journals is trust in content. As technology advances, we will employ new platforms to perform technology-enabled reviews. We will insist on clear descriptions of data provenance and access to all original data for the original reviews and subsequent inquiries.

We recognize the challenges of the ever-changing landscape of publishing and will endeavor to meet these challenges

through technological innovations in content delivery. We will strive to ensure that Web features, review articles, and commentaries both stand alone and drive readers to the full content. This content needs to be mobile device- and tablet-friendly, with regular evaluation and evolution as needed. We will build on the current features through the development of podcasts and other content focusing on prominent original papers, trends in biomedical science, and meeting highlights. To the extent possible, we would like the Journal to be more interactive, with discussion forums and networking opportunities. The delivery of Journal content should be mobile and seamless. We need to meet readers where they are, not where we want them to go, to ensure that the Journal remains modern and appeals to young biomedical scientists. We will strive for efficient communication of content, including enhanced and platform-appropriate graphical abstracts, as well as delivery of table of contents and

podcasts linked to ASCI membership. Ultimately, emerging publishing platforms will need to do more than inform; they should organize and integrate information, and serve to promote scientific and professional development.

We believe this an exciting time to be editors of the Journal, and there has never been a better opportunity to realize the goals of the *JCI* and the ASCI: the timely transmission of scientific information with the goal of improving human health and a celebration of the physician-scientist. We will work tirelessly to this end and, to paraphrase Churchill, will be easily satisfied only by the very best.

Gordon F. Tomaselli

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The Journal of Clinical Investigation**

1. Howell JD. A history of the American Society for Clinical Investigation. *J Clin Invest.* 2009;119(4):682-697.