

# THE EUROPEAN JOURNAL OF SURGICAL ONCOLOGY AND ITS CONTRIBUTION TO CANCER SURGERY

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The *European Journal of Surgical Oncology* (EJSO) is a widely read, subscription-based English language journal of reference, education, and communication across the spectrum of interests of surgical oncologists. Its foundations are laid in the British Association of Surgical Oncology and the European Society for Surgical Oncology, but the authorship and readership of the printed and electronic versions is now truly international. The EJSO is expanding rapidly, with a rising impact factor, scale, and frequency of publication.

The EJSO was founded in 1975 as the house journal of the British Association of Surgical Oncology (BASO), which was itself founded in 1972. Until 1984, it was published as *Clinical Oncology*, when it transmuted into the EJSO. As of 2001, the title has been shortened to the acronymous EJSO. The European Society for Surgical Oncology (ESSO) was founded in 1981, and the EJSO became jointly owned by BASO and ESSO, under the auspices of Academic Press. It continues to be published by Academic Press under the Harcourt imprint, following the amalgamation of various publishing houses in recent years. It was initially published as a quarterly journal. The subscriber base of the printed journal is founded on the membership of BASO and ESSO. More recently, the journal has also represented the International Society for Regional Cancer Therapy (ISRCT) and the British Oesophago-Gastric Cancer Group (BOGCG). The circulation of

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SURGICAL ONCOLOGY CLINICS OF NORTH AMERICA

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VOLUME 10 • NUMBER 4 • OCTOBER 2001

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the printed journal continues to grow through affiliation with other international surgical oncology societies. Electronic access to the journal is now worldwide across the internet.

The editor is afforded full autonomy and independence by the proprietary associations, but reports back to each association on all financial and strategic matters. ESSO and BASO also provide editorial representatives to journal board meetings.

The editors and editorial board are drawn principally from the membership of BASO and ESSO by invitation and nomination. The Editor-in-Chief is supported by a small number of Associate Editors, with responsibility for coverage and development of the clinical trials, continuing medical education (CME), and information technology portfolios. Members of the Board of Reference are drawn from the International Surgical Oncology community to ensure a broad geographic and subspecialty representation.

Full editorial meetings have been held twice yearly, once in London and once in conjunction with the international ESSO or European Cancer Conference (ECCO) meetings held on alternate years in a major European venue. An editorial board meeting, under the guidance of an independent chairman, is also held annually, usually during the international ECCO/ESSO meeting. Editorial activity is at all other times coordinated through the Editor-in-Chief's personal office, in conjunction with the publisher's staff.

### THE CHALLENGE FOR SURGICAL ONCOLOGY PUBLISHING

Surgery remains the mainstay of treatment for solid tumors and offers by far the highest chance of cure and long-term survival to a substantial proportion of cancer patients across the spectrum of malignant disease. Other treatment modalities, including chemotherapy, radiotherapy, and novel strategies drawn from molecular and immunobiology, offer much smaller survival gains. Nevertheless, for many years surgeons have not communicated their message so well as have the medical and clinical oncologists, in consequence of which disproportionate resources and expectations have been heaped on the adjuvant therapy community, to the cost of cancer surgeons.

*Surgical oncology* is a term that causes problems of definition. Cancer surgery is represented across a variety of disciplines and subspecialties, as for example, gynecology, urology, thoracic surgery, endocrine, general, and plastic surgery. No one surgeon has the training or time to be skilled across this spectrum, and indeed few surgeons focus on cancer surgery alone.

The challenges for the various national and international associations and journals of surgical oncology are thus to represent the professional and disease-oriented interests of a broad spectrum of surgical cancer specialists, and to find common, disease-specific themes in

diagnosis, treatment, education, and training that transcend the subspecialty boundaries.

### AIMS, OBJECTIVES, AND CONTENT OF THE EJSO

The EJSO seeks to address these challenges in a number of ways. It aims to publish original scientific articles on any topic of research or clinical relevance in any subspecialty involving surgical oncologic practice, relating to tumors in their most general sense, whether malignant or benign. These original articles are supplemented by editorials, review articles, and discursive articles for debate. Table 1 gives an indication of the wide range of articles published in the EJSO in 2000.

BASO, ESSO, and the EJSO were founded with an important post-graduate and continuing medical educational ideal, which the EJSO addresses additionally through publication of an educational section. This section includes articles on the basic science of oncology, practical items to communicate technical excellence and new techniques to the readership, and philosophic treatises on aspects of cancer biology, therapy, and surgical practice of particular interest to the practicing surgical oncologist.

Clinical trials are an important device for the improvement of cancer treatment. The journal promotes the philosophy and practice of clinical trials through articles and reviews on a regular cycle.

**Table 1. EJSO CONTENTS 2000**

<b>Original Articles</b>	
Breast	31
Hepatopancreaticobiliary (mainly liver tumors)	15
Esophago-gastric	9
Sarcoma	9
Colorectal	9
Head and neck (mainly thyroid)	7
Peritoneal	5
Urological	3
Melanoma	3
Gynecological	2
<b>Review Articles</b>	
Total	11
<b>For Debate</b>	
Total	4
<b>Abstracts</b>	
BASO	British Association of Surgical Oncology
ESSO	European Association of Surgical Oncology
ISRCT	International Society of Regional Cancer Therapy
BOGCG	British Oesophago-Gastric Cancer Group
<b>Case Reports</b>	
Total (To be discontinued in 2001)	30
<b>Supplement</b>	
Intraoperative radiotherapy	7 articles

Impact factors and citation rates have come to play an important role in the life of any journal of reference. They are diluted by the publication of certain categories of article, such as case reports. The editorial board of the EJSO has taken the view that a readable and educational journal must be more than just a collection of original scientific articles, and that readability is not always reflected in the impact factor alone. The EJSO thus strives to entertain, stimulate, and challenge regardless of the constraints of impact factor publishing. This philosophy appears to be rewarded by the growth in demand, circulation, and submission rates, and the journal's impact factor has grown significantly in recent years.

The EJSO also hosts a correspondence section, and accepts web site and internet reviews. We also publish short items of educational value up to 500 words under the page filler imprint, to encourage new authors and to add offbeat material.

Finally, the EJSO publishes conference abstracts for BASO, ESSO, ISRCT, and BOGCG. We are happy to discuss the publication of abstracts for the academic meetings of other learned surgical oncology societies.

### **ENGLISH LANGUAGE, WRITTEN ENGLISH, AND EDITORIAL POLICY**

The EJSO is published in English, and the editors strive to attain clarity, conciseness, simplicity, and readability in the use of written English. These skills are hard enough to acquire for native speakers and writers and much more so for those for whom English is the second or third language. The editorial team thus adopts a generous approach to the interpretation and acceptance of manuscripts from our many international authors, subject to strict in-house editing and stylistic revision by specialists in written scientific English.

### **PEER REVIEW**

All submitted articles are sent out for peer review to a broad panel of international referees, according to their professional interests and expertise. Authors are welcome to suggest referees for specialized material. Articles are generally reviewed by three referees, including a member of the editorial team. Referees are encouraged to adopt a constructive and positive approach to their work and to suggest improvements and modifications which might render a weak manuscript suitable for publication. The journal currently receives some 300 manuscripts per year, and the rejection rate is of the order of 60%. This is a useful measure of the rigor of the editorial process and of the standards set by the EJSO.

### **ETHICS AND CONVENTIONS**

The EJSO subscribes to all current conventions in respect to ethical practice for scientific publications. It is a signatory to the principles of the

Committee on Publication Ethics (COPE), and every reasonable effort is made to ensure that published articles meet all the criteria.

### **EDUCATIONAL SUPPLEMENTS AND GUIDELINES**

The EJSO also publishes a series of supplements and guidelines on oncologic topics. These documents come with an authoritative imprint from various specialty groups, and are widely read and used as documents of reference. Recent publications produced under the auspices of the BASO Breast Group include: *Guidelines for the Management of Symptomatic Breast Disease*, *Guidelines for the Management of Screen Detected Breast Cancer*, and *Guidelines for the Management of Bone Metastases (from Breast Cancer)*. We have also published a supplement on intraoperative radiotherapy for ESSO.

The editors are pleased to discuss the publication of such guidelines for other cancers and cancer topics in discussion with the specialist groups.

### **ELECTRONIC PUBLICATION STRATEGY**

The Internet has revolutionized access to information and publishing strategies. It is not clear how far this revolution has still to run nor what the end result will be. The editorial board of the EJSO takes the view that the printed journal will remain the document of reference for the foreseeable future, and that the printed paper medium retains considerable advantages in usefulness, portability, readability, and survivability over the long term, over the electronic publication in its many and evolving formats. The production of a high quality printed journal thus remains our highest priority.

Nevertheless, we recognize the demand for electronic access to the material that we publish, and the benefits that flow to us from an open, innovative Internet strategy. Internet publication is with us, and many academic institutions are reducing their subscriptions to printed journals, so the market for printed copy is at best static.

In the past few years, the EJSO has sought to harness the information technology revolution to the objectives of the journal. To this end, we have published a series of articles to educate our readers about the form and opportunities of the electronic information age for surgical oncologists, against a background of rapidly evolving technology.

### **THE INTERNATIONAL DIGITAL ELECTRONIC ACCESS LIBRARY PUBLICATION STRATEGY**

Our publishers have explored models by which the distribution, reach, impact, use, and quality of the journal may be enhanced by the new electronic medium. Publishers are obliged to secure revenue streams

and make a commercial return, and our own publisher has introduced an electronic journal distribution service through a consortium licensing program. This allows full electronic access to the entire contents of the publisher's stable of journals, including the EJSO, to all members of registered organizations worldwide. At a stroke, this model has transformed the EJSO from a regional journal to one with worldwide coverage accessible online to millions of authorized academic and institutional users. The International Digital Electronic Access Library (IDEAL) and its licensing authority, the Academic Press Print and Electronic Access License (APPEAL), is the result. Institutions pay a fixed annual license fee for electronic access to all journals within IDEAL, and may also take the printed journals at a substantial discount. In return, all users within the institutions may download and print out any journal articles, subject to reasonable copyright constraints, and using conventional internet browser software.

IDEAL is distributed across the world wide web (WWW) from web servers in the United States ([www.idealibrary.com](http://www.idealibrary.com)) and Europe ([www.europe.idealibrary.com](http://www.europe.idealibrary.com)) and contents and abstracts are displayed in HTML, the current language of the WWW. Articles, figures, and tables can be downloaded in Adobe Acrobat Portable Document Format (PDF), a standard printing medium, to a quality as high as that of the printed journal. The content of IDEAL, which relates to all publications since late 1995, is displayed on conventional Web pages in a systematic way with word search facilities, such that all articles can be found and accessed readily. All users of the WWW, regardless of institutional affiliation or country of origin, can access the table of contents and the abstracts. The EJSO also has its own website hosted by the publisher that lists contents at [www.harcourt-international.com/journals/ejso](http://www.harcourt-international.com/journals/ejso).

IDEAL maximizes distribution, effective circulation, journal awareness, access to content, and additional income for the journal while improving citation rates and impact factors. We anticipate that further developments will enhance the use of electronic publishing, such as through electronic links to databases such as Medline, allowing seamless access through public sites to the full text of articles from within a Medline search strategy. Linkage of the journal to the Online Computer Library Centre (OCLC, formerly the Ohio College Library Centre), First Search Electronic Collections Online service, and similar organizations will allow libraries to search across many journals from different publishers using a single access point. New technologies should also allow online archiving in perpetuity, thus preserving electronic access across changing technologies for the foreseeable future.

One example of such incremental development that is being introduced in 2001 is the IDEALFirst tool that provides for immediate electronic publication. It allows us to unbundle the constituent articles in each issue without compromising the printed journal. IDEALFirst allows electronic posting of each and every article as soon as the final proofs of an article have been completed and authorized for publication by the editorial team. This is usually well in advance of the print issue. Each paper is then

published on the IDEALFirst website, where it can be accessed by IDEAL subscribers, abstracted, indexed, and cited with the same copyright status as has the printed version. Publication is not delayed by the preparation of other articles. The printed article appears in the journal in due course.

The key to this process has been the development of the digital object identifier (DOI). The DOI is a common and open international collaborative standard. It assigns each electronic item of intellectual property, such as an article, video clip, or sound sequence, a unique and permanent identifier code. It differs from an internet universal resource locator (URL) in that it identifies an object and not a location. This allows articles to be identified and tracked online, and may be used to cite and reference the article. The date of publication is the date of online publication. The DOI mechanism is of profound value to publishers and editors, who can identify the electronic use made each article or item, and the user, who can track down the article of interest regardless of its location or host computer on the WWW.

### THE FUTURE OF THE EJSO

So long as surgeons continue to play a major role in the treatment of cancer, so we anticipate the need for high quality specialist journals in which they can report and communicate their work and ideas. Future growth and success is anticipated for the EJSO as a vehicle of worldwide communication and education for surgeons with a responsibility for cancer treatment across the spectrum of malignant disease. The printed journal remains the bedrock of the work, but the reach and use of its contents is enhanced hugely by its projection across the WWW, thus broadening its scope from a European to a transcontinental publication.

In respect of content, the journal remains innovative and wide-reaching in its coverage of oncologic subjects. The modern cancer surgeon needs to work within a multidisciplinary team of cancer specialists, and thus to be broadly informed and knowledgeable about the biology and treatment of tumors and related issues. The EJSO is expected to further the projection of cancer surgery in all its manifestations to the community in general. The aim is to broaden the subscription base and the geographic range of the subscribers, and to work with national and international surgical oncology associations and organizations to promote the intellectual remit of the surgical oncology disciplines.

For the authors, the aim is to offer a timely, efficient, supportive and constructive and rapid editorial process, with immediate electronic publication and citation once a paper has been accepted and proofed, and prompt and courteous rejection where a paper is deemed unsuitable or inappropriate for publication in the journal.

Finally, for the readers, the authors' aim is to produce an authoritative, informative, stimulating, readable, and entertaining journal that is an enduring focus for clinical and academic interests and continuing professional development.

## SUMMARY

This article has described in brief the EJSO, formerly the *European Journal of Surgical Oncology*, its aims and objectives, and its conventional and electronic publishing strategy. It highlights the role of the journal in publishing original work and educational content in respect of the generality of the clinical and academic disciplines comprising modern surgical oncology. The journal is in a steady expansionary phase with a growing impact factor, and the editorial team aims to consolidate its place in the premier league of specialist journals through the merit and quality of its content and publication standards.

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