

# Transitions and New Beginnings at *Mayo Clinic Proceedings*



The beginning of a new year is always a time to look back on what was achieved in the prior year and to look forward to what may be accomplished in the year ahead. July 2017 saw the transition of editorial leadership at the *Proceedings*—I am doubly privileged not only by currently serving in this role but also by assuming it from William L. (Bill) Lanier, MD. Dr Lanier superbly led the *Proceedings* for 18 years, during which time the *Proceedings* established itself as the third largest indexed medical journal in the world; published seminal contributions that are highly cited; established a global reach and readership and a global provenance of submitting authors; successfully created in 2017 an online expansion journal (*Mayo Clinic Proceedings: Innovations, Quality & Outcomes*); and has now attained an impact factor of 6.686, as reported in the summer of 2017. Such a record of achievement by Dr Lanier and his team places the *Proceedings* on a bedrock on which the stature of the *Proceedings* can be further enhanced and provides a vantage point from which new features and initiatives in the *Proceedings* can be envisioned and introduced.

Two new sections are now in place, with each section led by a dedicated editor. The Women's Health section features original articles, thematic reviews, commentaries, and editorials on salient aspects of this vital field. The *Proceedings* is fortunate that this new Women's Health section is led by Vesna Garovic, MD, PhD, a nationally recognized expert in this field, especially as it relates to hypertensive, cardiovascular, and kidney diseases in women in general and the association of such diseases with disorders of pregnancy in particular. Dr Garovic currently serves as Chair of Research, Division of Nephrology and Hypertension and as Director, Office of Clinical Trials, Department of Medicine, Mayo Clinic. Also introduced is a new section devoted to guidelines, meta-analyses, and new methodologies. The *Proceedings* is again fortunate in that this section

is led by M. Hassan Murad, MD, MPH, a nationally recognized expert in evidence synthesis (systematic reviews, meta-analysis, network meta-analysis, meta-regression, and meta-narrative synthesis), methodologic research, and clinical practice guideline development. Dr Murad currently leads the Mayo Clinic Evidence-Based Practice Research Program and is a member of the Grading of Recommendations Assessment Development and Evaluation Working Group.

Two new types of peer-reviewed articles will be introduced this year, "Understanding Disease" and "Perspectives and Controversies." Authors of such articles are either invited by the *Proceedings* to provide such a contribution or may contact the *Proceedings* if they wish to submit such a contribution for consideration for publication in the *Proceedings*. "Understanding Disease" addresses an issue commonly experienced by generalists, specialists, and subspecialists—namely, a sense of incomplete and/or out-of-date knowledge regarding the pathogenesis of common diseases treated by other practitioners. For example, as a nephrologist, I often feel this way regarding so many diseases seen in other subspecialties—heart failure and its many subtypes, inflammatory bowel disease, chronic obstructive airway disease, the metabolic syndrome, demyelinating disorders, and rheumatoid arthritis, to name just a few. "Understanding Disease" will address this issue by providing a succinct and timely discussion of the pathophysiology and pathobiology underlying a specific, important human disease. Scientific terms and concepts are to be used and discussed in ways that are broadly understood by the clinical community. These articles are 3500 to 4000 words in length, include an unstructured abstract, cite no more than 100 references, and include 1 or 2 figures depicting key pathophysiologic/pathobiologic findings and concepts; 1 to 2 tables are recommended to summarize relevant information. Authors of this type of article should have relevant and up-to-date

knowledge of and expertise in the field. Studies and findings that are based on animal models should be referred to as “experimental” or “preclinical,” while studies and findings based on cell culture should be referred to as “in vitro.”

The second type of article, “Perspectives and Controversies,” provides a concise and engaging discussion of a topic that is either important, timely, broadly relevant to many disciplines, or controversial. This type of article in the *Proceedings* is intended to highlight and stimulate thinking and discourse on such a topic and may do so either by discussing and elucidating it, by challenging and refuting widely accepted views pertaining to it, or by combining both approaches. The topic may involve any aspect of current understanding of disease; biomedical and clinical research; medical treatment, care, and practice; medical education, ethics, and professionalism; and health care and public policy. These articles are less than 1500 words in length and include no more than 10 references. When relevant, the *Proceedings* may combine a given viewpoint with an opposing perspective, thereby providing a “point and counterpoint” on the topic of interest.

Past and current achievement often sets the stage for future accomplishment, and what better way to discuss such achievement than by the individuals who made them happen. To this end, a new feature, in an interview format, is introduced on the *Proceedings*’ website, “Pioneers and Legends in Medicine.” In these interviews, physicians of long-standing achievement, merit, and service share their stories, experiences, and insights emanating from their distinguished careers in medicine and surgery.

The January 2018 issue reaffirms our commitment to the enduring objective of the *Proceedings* to secure a broad appeal for its readership by its diversity of content; thus, in the editorial transition, all prior types of articles and features are, and will be, maintained. Although broadly based in general/internal medicine, the *Proceedings* welcomes articles in surgical disciplines that address issues or provide findings that are widely relevant. In this regard, this January issue contains articles based on neurosurgery<sup>1</sup> and orthopedic practice<sup>2</sup> that demonstrate broadly relevant findings. The former demonstrates how high patient volumes in neurosurgical practices promote good outcomes and how involving chief residents in a semi-independent fashion does not

detract from such outcomes; the latter applies a novel summary outcome determination scoring system in an orthopedic practice to evaluate the congruency of physician evaluation and patient evaluation, and is a scoring system that can be applied to other subspecialties.

This commitment to the long-standing objective of the *Proceedings* is also reflected by the cover image we have chosen for 2018. This composite cover image highlights 3 salient themes: the wide-ranging effects of human biomedical research and discovery in driving progress in understanding and treating human disease (symbolized, on the left, by a neuron and its ramifying dendrites and axons); state-of-the-art investigation in evaluating human disease (symbolized, in the middle, by a positron emission tomographic image of the brain); and the indispensability of teamwork and the coalescence of expertise in providing the best possible care for our patients (symbolized, on the right, by a collaborating surgical/interventional team).

At the beginning of this new year, and on behalf of all our staff and editors at the *Proceedings*, I extend our warmest appreciation and gratitude to you, our authors, our reviewers, and our readers—you make this journal a reality and then you refine this reality into a remarkable success.

## ACKNOWLEDGMENTS

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**Karl A. Nath, MBChB**  
Editor-in-Chief

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