Table 1. Times between publication and submission and acceptance of papers^a for the June 1991 and June 1992 issues of the *Journal*.

Paper	Times for June 1991 issue (months)		Times for June 1992 issue (months)	
	Between submission and publication	Between acceptance and publication	Between submission and publication	Between acceptance and publication
а	9	6	12	7
b	12	6	10	7
С	8	6	14	8
d	11	7	11	9
е	13	7	12	8
f	10	7	15	11
g	11	7	17	9
Mean	11	7	13	8

^aOriginal papers, review articles and discussion papers.

to articles previously published in the *Journal* that had appeared in February 1992 (four months earlier).

Using Statview with the Macintosh SE, contingency tables were calculated to assess the significance of changes over the year. There was no significant difference between submission dates for the June 1991 and June 1992 issues of the Journal. The difference for dates of acceptance was also not significant. However, a significant difference was found in the number of letters published in the June 1991 and June 1992 issues that referred to previous articles (chi square = 27; 1 degree of freedom, P < 0.001).

It would appear that the number of letters published referring to previous articles is significantly different to a year ago. It is not clear if this is editorial policy, or a feature of less doctors writing in to the Journal, but one possibility is that general practitioners see little point in writing to the Journal if their letter is going to be published so long after the article to which their letter applies. Although not a significant difference, it would seem that it is taking longer for papers to be published than it did 12 months ago. This means that the Journal is no longer able to provide the 'cutting edge' of general practice, but reflects what was happening some 12 to 15 months ago. Over the last 15 months enormous changes have taken place in general practice, which the Journal is unable to reflect in up to date research papers.

In the spirit of audit the following suggestions are made: the editor sets out standards for the time from submission to acceptance and publication for papers and letters; the editor publishes, at regular intervals, how successful the *Journal* has been in keeping to the standards; and the standards are regularly reviewed and new standards published.

Audit is, and should be, a routine part

of modern general practice; it behoves the *Journal* to lead from the front by its own example of standard setting.

Finally, judging from the correspondence in the June 1992 *Journal*, I would hope to see this letter published in the October or November edition.

ALAN COHEN

130 Pepys Road London SW20 8NS

Editor's reply

We are always pleased to have constructive criticism from readers, especially when it is based on the collection and thoughtful analysis of data and is accompanied by positive suggestions for change. Of course, we wish to remain part of the movement for regular audit and quality assessment which is becoming a routine part of modern general practice. You deal with several important points in your letter and I would like to reply to them in turn.

Delay between submission, acceptance and publication has always been of concern to the *Journal* team, and for this reason, data have been compiled on original papers since January 1984. Monitoring of papers through the system is a continuous process and any problems arising are discussed at the monthly *Journal* meetings.

Submitted papers are sent to two expert reviewers and to a statistician if appropriate. This peer review process takes time but is fundamental to maintaining the scientific quality and international reputation of the *Journal*. The detailed and thoughtful reports from our 900 reviewers are central to a decision to publish. Whether or not the paper is accepted, these reports are sent to authors

who find this a valuable service. Most published papers are revised by the author before publication, this process adding some months to the delay before final acceptance. However, with the cooperation of reviewers, the time from submission to Editor's final decision for accepted papers has been cut from 21 weeks in 1990 to 16 weeks in 1991. The time taken from submission to Editor's decision for rejected papers was eight weeks in 1991. Since the end of April 1992, it has been Journal policy to send all papers which have received at least one set of encouraging comments from assessors to the Journal's statistical adviser. He then decides if the paper requires full statistical assessment, and chooses an appropriate referee to do so. This new procedure is likely to increase the delay between submission and Editor's final decision but the statistical input will enhance the scientific rigour of papers.

The delay between acceptance and publication remains much longer than we would like, so four extra pages are currently being added to the *Journal* to help clear the backlog of papers.

Letters to the Editor are selected and usually processed within the month of receipt. The content of our correspondence columns depends at least as much on which subjects interest readers and when they decide to take pen to paper as it does on editorial policy. Letters containing data are listed by *Index Medicus*. During the sub-editing process many letters are found to contain ambiguities, insufficient data or incomplete references, and proofs have to be reviewed by authors before publication.

Peer review, careful revision and subediting are essential to produce a journal of high quality as expected by members and subscribers in 40 countries of the world. Time and care are taken by the Journal team but, to be fair, some authors take much longer than others to revise and respond.

The Journal aims to serve the needs of thinking general practitioners, researchers and academic departments. While we strive to minimize delay, the Journal is not designed to respond as a medical newspaper might, but as a journal recording advances in the discipline and adding the results of sound research to the knowledge base of medicine. Journals do not decide what research is to be done or when. Some scientific journals have found that hasty publication has led to quick retraction and that the cutting edge of medicine can be uncomfortable for the ill prepared. Most new ideas need time to incubate and all need to be evaluated by others before their place is secure.