

Use of downloads from the Journal

The *British Journal of General Practice* holds a special place in the scientific literature of medicine, as it was the first GP peer-reviewed journal in the world to be accepted by the scientific community when it was first included in *Index Medicus* in 1961. At that time the Journal was called the *Journal of the College of General Practitioners*.

This important achievement marked the emergence of general practice/family medicine as a discipline in its own right and was due to the Foundation Editor, Dr RMS McConaghey, and his Editorial Board. No other college of GPs/family physicians in the English-speaking world at that time went down the difficult road of seeking and publishing peer-reviewed original articles from general practice. The other family medicine journals mostly published review articles.

For years former Editors dreamed of electronic publication, now achieved under the present Editor, and this left open the question of access to all the previously published articles. Hopes of digitising them were too expensive for the College. Then along came the Wellcome Trust, the biggest charity in Europe, with its policy of enhancing the public understanding of science. This Trust generously decided to

digitise the back issues of all the UK's leading medical journals. The title, the *British Journal of General Practice* had been taken by the then Editor as a subtitle in 1976 and was adopted as the main title for the Journal in 1990. This Journal was selected for general practice for the digitisation project:

(www.rcgp.org.uk/publications/bjgp/login.aspx — click on Archive).

USE OF DOWNLOADS

The number of downloads from the Journal going back to 1953 is striking. In the 12 months ending 31 March 2009, 715 011 full text articles were downloaded from the PubMed Central site (Table 1). This covered all text between 1953 and March 2008; that is, ever since this publication began in the form of a *Research Newsletter* for members.

This very high use (M Walport, personal communication, 2009) means that, according to the Wellcome Trust data, since there were 15 009 articles at the mid-point of this year (progressively increasing), the average article was being downloaded 47.6 times. Many articles have very much higher figures.

Put another way, journal articles are being downloaded at the rate of 1959 a day. By March 2009, this Journal was

receiving 81.6 downloads per hour, from 149 different countries/territories. In 2008/2009 someone, somewhere in the world, downloaded an article from this Journal at the rate of one every 44.1 seconds, day and night.

Furthermore, these are early days. Many will not yet know of this relatively new facility. Indeed the Heritage Committee has only just written to all the Faculties of the College to inform them. In addition, computers are becoming progressively cheaper. Search engines, like Google, are now also identifying articles in the Journal. While for now, the UK is the leading country of use, soon millions in Asia alone will have access and international use is likely to rise considerably (Figure 1).

IMPLICATIONS

There is much to celebrate; for example, over 2.5 million hits on this Journal's archive between May 2006 and January 2009. General practice literature has never had the respect and understanding it deserves and many fundamental discoveries and insights are included in these older articles. They are an academic goldmine for medical historians.

The *Journal of the Royal College of General Practitioners*, as it became in 1967, held the world lead for general practice in academic standing for decades but was gradually overhauled by North American journals like the *Journal of Family Practice*. However it remains, measured on impact factors, one of the highest ranked general practice journals in the world, and the highest in Europe. Current issues are going online, in addition to the archive of older articles, and can be accessed worldwide at: www.rcgp.org.uk/bjgp.

New thoughts are emerging about the value of full downloads as they are now so much more easily counted and do form verifiable evidence of relevance and use.

Already, Perneger,¹ in a prospective study, has shown a relation between 'hit counts' and subsequent citations. It is not inconceivable that full downloads or even hits may come to be incorporated in new formulae for impact factors in the future.

Table 1. BJGP archive^a statistics on use: April 2008–March 2009.

Date	Articles available	Total items available	Downloads ^b	Other pages retrieved	Total use
March 2009	16 274	18 521	80 475	60 693	141 168
February 2009	16 246	18 492	60 852	46 996	107 848
January 2009	16 064	18 247	58 890	43 949	102 839
December 2008	15 916	18 059	49 551	38 322	87 873
November 2008	15 886	18 029	66 174	48 255	114 429
October 2008	15 793	17 912	62 875	49 071	111 946
September 2008	15 009	16 822	54 395	49 399	103 794
August 2008	14 986	16 797	45 638	41 670	87 308
July 2008	14 955	16 766	49 047	38 552	87 599
June 2008	14 926	16 735	58 824	42 483	101 307
May 2008	14 896	16 705	62 937	44 130	107 067
April 2008	14 857	16 666	65 353	47 261	112 614

^aArchive at PubMed Central: www.rcgp.org.uk/publications/bjgp/login.aspx — click on Archive.

^bFull downloads include PDF and HTML formats combined.

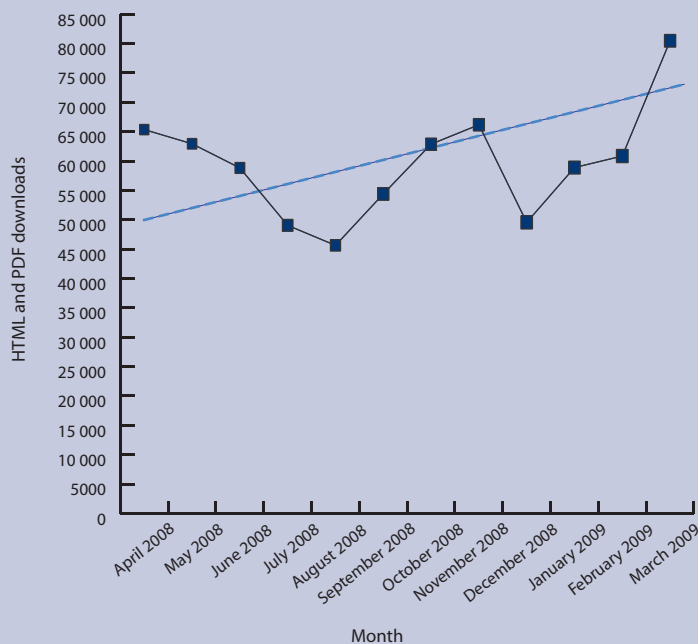


Figure 1. Number of full downloads, HTML and pdf combined, per month.

Meanwhile, every GP, every historian, and every social scientist around the world with internet access can read and/or download these articles from home or practice at any time of the day or night. For example, any reader wanting to look at or download McConaghey's article, from 1972,² can now do so at their personal computer and at their convenience. This facility is likely to lead to even more downloads in the future.

There are implications for academic general practice. As so many downloads are occurring from just this one journal, how soon can the other leading journals of general practice/family medicine be digitised? And who will pay?

Meanwhile, the College, and indeed the whole of general practice/family medicine, owes the Wellcome Trust, its Trustees, and Director Sir Mark Walport, a great debt. The Trust is also pleased with what it has called these 'splendid statistics'.

This was a visionary project doing much for the discipline of general practice, for medical science, and for the standing of the UK.

There are, of course, among any large group of people, some who live entirely in the present and think like Henry Ford that:

*'We want to live in the present, and the only history that is worth a tinker's dam is the history we make today'.*³

There are fewer such people among GPs than other groups for two reasons. First, the College of General Practitioners would not have been founded in the 1950s if its then leaders had not been acutely aware of the history of medicine in the 1840s.² When the attempt was made to strangle the College at birth,⁴ they decided to found the College in secret to circumvent that threat.

Secondly, the longer GPs are in practice, the more they come to realise how many of the problems they meet in the consulting room have links to the patient's past or family history.

These remarkable download figures demonstrate elegantly, and also quantify, some of the value of the College's heritage and its continuing relevance to today's doctors in the UK and around the world.

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Provenance

Freely submitted; peer reviewed.

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