EDITORIAL

Peer review –
a perfect process or semi-flawed?

Rigorous peer review of an article submitted for publication to a journal is considered essential practice prior to its acceptance. The Journal of Bone and Joint Surgery claims ‘Excellence Through Peer Review’ on its cover. In an editorial written by its Editor-in-Chief, Dr Vernon Tolo, he states that ‘peer review has no peer’, and concludes that their peer-review process is the best system available to ensure that the information the journal publishes can be used with confidence to optimise patient care. He describes their peer-review procedure in detail, and they now print a ‘peer-review statement’ with each article published in the journal.

Although one cannot disagree with his statement, I feel that the peer-review formula has some flaws that should be identified and discussed in order to decide if the process could be further improved. As Dr Tolo states in his editorial, submitted manuscripts are changed by the review system, and he asserts that this improves them. Nevertheless, potential authors do want their work published and, almost without exception, change their articles to please the reviewers and accommodate their criticisms and comments. They fully appreciate that to disagree with a reviewer, whom they do not know and with whom they cannot discuss the criticisms, is almost certain to result in rejection of the article. There are occasions when an article is changed to suit the reviewers’ whims to such an extent that the original message intended by the author is completely lost in the final published version. I have personal experience of this. As one frustrated author wrote: ‘We liked the paper much better the way we originally submitted it but you held the editorial shotgun to our heads and forced us to chop, reshuffle, hedge, expand, shorten and, in general, convert a meaty paper into stir-fried vegetables. We could not – or would not – have done it without your input.’

Dr Tolo maintains that ‘potential authors have an opportunity to address questions and concerns of the primary clinical reviewers’, but is this opportunity really genuine and meaningful? I feel that the selection of peer reviewers is one facet that can improve an almost perfect system. Experts in a subspecialty do have natural prejudices based on their own experience and years of practice, and perhaps these experts should at times be subjected to blinded reviews of their comments, and not only by the sub-editor or editor-in-chief.

I would like to take this opportunity to thank our peer reviewers for the excellent work and time they put into making the journal one of quality.

References