
The Journal of Family Practice 1974–1988

Window to an Evolving Academic Discipline

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This paper examines the spontaneous evolution of original work in family practice as published in The Journal of Family Practice over the 15-year period since it began publication in 1974. An analysis was carried out by principal content and type of paper for the last five years in a manner comparable to an earlier analysis of the journal's first ten years of publication. Trends that emerge from this reanalysis provide a window to observe the further development of family medicine as a scientific and academic discipline.

The last five years have seen a marked increase in clinical content of papers (from approximately 60 to 80 percent of published papers) together with continued emphasis on health services subjects. There has been a concurrent sharp increase in research papers, continued strong representation of case studies, and some decrease in both reviews and methods papers. Descriptive research continues to predominate among research papers. Although experimental research still represents only 5 percent of published papers, this percentage has more than doubled over the last five years. The reanalysis also revealed a substantial decline in the proportion of educational papers, as other journals in the field have assumed the primary role for this content area.

It appears that the manuscript supply represented by original work in the field is still limited and that there is at present adequate or even surplus journal capacity for publication of work carried out in family practice settings. The quality and type of work continue to mature consistent with the needs of family medicine as a scientific and academic discipline.

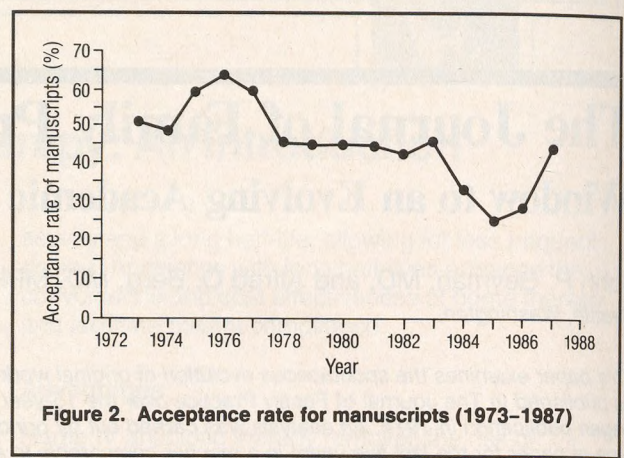
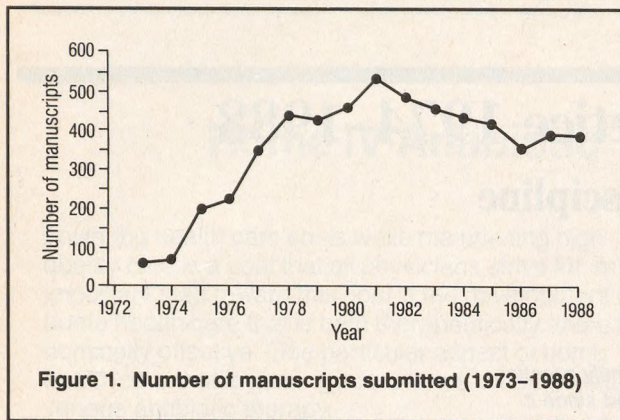
This volume marks the completion of the first 15 years of publication for *The Journal of Family Practice* and the start of its 16th year. Since the *Journal* was founded with the primary goal of publishing the spontaneous literature of record of original work in the emerging specialty of family practice, periodic analysis of its content over the years provides a dynamic perspective of the specialty's development as a scientific and academic discipline. This report includes further content analysis for the last five years and comparison with the first ten years in an effort to assess the progress of family medicine as a discipline.

Since the first content analysis reported in 1984,¹ other journals have further developed in the field. *Family Medicine*, the bimonthly official journal of The Society of

Teachers of Family Medicine and the North American Primary Care Research Group, has doubled its capacity and has been accepted for indexing in *Index Medicus*. The *Journal of the American Board of Family Practice* was initiated two years ago, and the *Family Practice Research Journal* has received sponsorship by the American Academy of Family Physicians (both are quarterly and, as is *The Journal of Family Practice*, are now also indexed by *Index Medicus*). In addition, the official journal of the World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians (WONCA), *Family Practice—An International Journal*, was initiated in 1984 as a quarterly publication devoted to original work in academic general/family practice. Although these journals expand the forum for publication of original work in the field, *The Journal of Family Practice* remains the principal repository of original work in the field in this country as the only monthly peer-reviewed journal in family medicine in the United States with a primary commitment to the literature of record.

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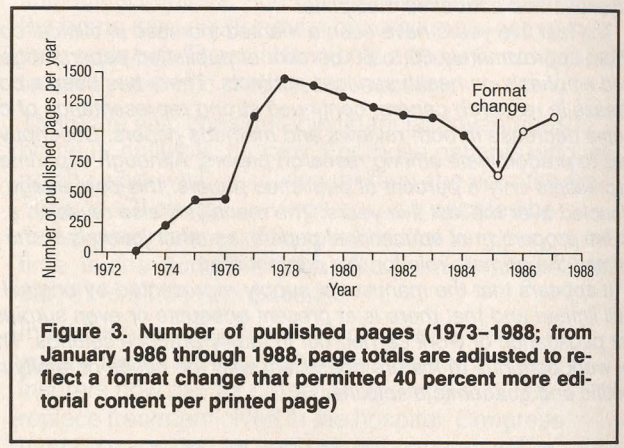


This reanalysis of the content of the *Journal* in the past five years is intended to further identify changing trends in the type and amount of original work in family practice as reflected by this journal's content during the period.

METHODS

The ten published volumes of *The Journal of Family Practice* for the years 1984 through 1988 were examined. This content analysis was identical to that carried out five years ago with only two exceptions. Previously, clinical articles were classified into one of three categories—biomedical, psychosocial, and biopsychosocial. For this review, the latter two categories were combined as biopsychosocial for both periods, 1974 through 1983 and 1984 through 1988. In addition, research papers were previously categorized as observational and experimental, and in this review, the term *observational* was replaced by the term *descriptive* for both study periods. Again, as with the earlier content analysis, all articles were included except for those in the departments of International Perspectives, Book Reviews, and Letters to the Editor.

In view of the initiation and expansion of other peer-reviewed journals in family practice in recent years, three new factors were examined in this review: (1) the "pipeline" of manuscript flow in terms of the number of submitted manuscripts, (2) the acceptance rates, and (3) the number of published editorial pages for this journal. Since recent acceptance rates are inaccurate to the extent that the disposition of many papers is not yet clarified (ie, papers in process of revision subject to further review), acceptance rates were not calculated after December 30, 1987. In addition, since a format change was introduced in January 1986 whereby 40 percent more editorial content could be published per printed page, the total of published pages for the years 1986 through 1988 was increased for the analysis by 40 percent to allow comparison with earlier years.



RESULTS

A total of 748 papers was published by *The Journal* over the last five years. Together with the 1,709 papers published during the 1974-1983 period, the cumulative total number of papers for the *Journal's* first 15 years is 2,457. Figure 1 shows the trends over 15 years of the number of submitted manuscripts, while Figure 2 presents the proportion of accepted papers by year, and Figure 3 shows the number of published pages over this period. Taken together, the three figures provide consistent information demonstrating a peak in the number of manuscripts and published pages approximately seven to ten years ago, followed by a modest decline in both. At a time of economic downturn of the *Journal* in 1984-1985, severe constraints were placed on the number of pages that could be published, marked also by an increase in the rejection rate. This situation was reversed after 1986, reflected in the rebound in both acceptance rates and numbers of published pages.

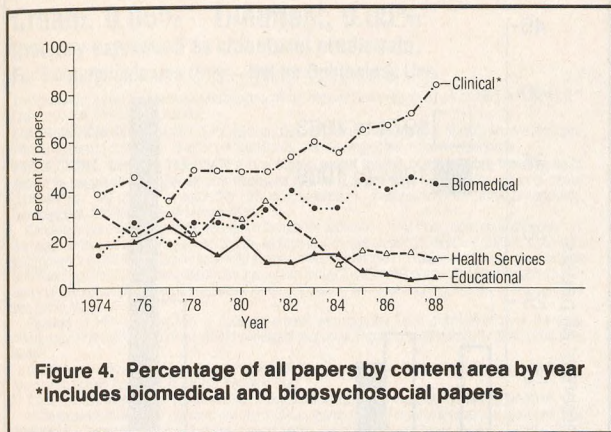


Figure 4. Percentage of all papers by content area by year
*Includes biomedical and biopsychosocial papers

The percentage of papers by content area by year is displayed in Figure 4, reflecting continued growth of clinical papers to a present total of 80 percent of published papers. It can also be seen that health services papers dropped from a peak of almost 40 percent in 1981 to their present level of about 15 percent of published papers. At the same time, educational papers decreased from a peak of about 14 percent in 1977 to their current level of about 7 percent.

Figure 5 compares the major content areas of papers published in the two study periods, 1974 to 1983 and 1984 to 1988. Significant gains can be noted in both biomedical and biopsychosocial papers over the last five years, with concurrent declines in both educational and health services papers.

The number of papers by type and by year is shown in Figure 6. Noteworthy is the increase over the years in descriptive research, together with concomitant declines in case studies, reviews, and opinion papers. A slump in the numbers of most types of papers is also apparent during the period of space constraints between 1984 and 1986.

Comparative trends for the overall proportions of papers by type is illustrated in Figure 7. Increases in both descriptive and experimental research are documented over the last five years, while case studies and opinion papers remained quite stable and both reviews and methods papers declined.

DISCUSSION

No data are yet available concerning the flow of manuscripts representing family medicine research to journals within the field compared with the flow to general and other specialty journals. There is some indirect evidence, however, that the family practice literature draws largely upon itself, such as an earlier citation analysis study of this journal documenting by far the largest number of citations ascribed to this journal.² Over the last ten years,

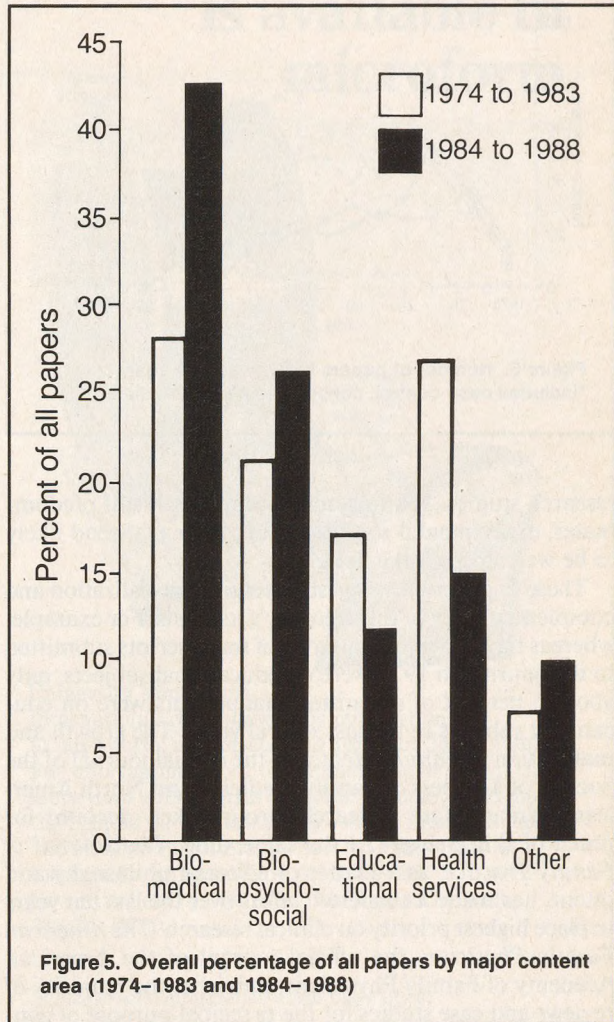
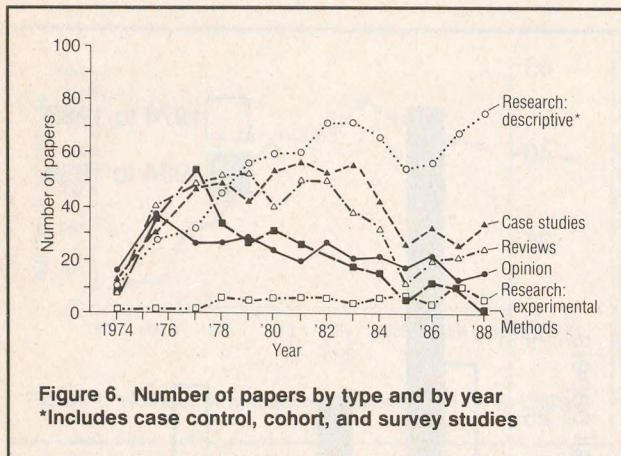


Figure 5. Overall percentage of all papers by major content area (1974-1983 and 1984-1988)

the *Journal* has accounted for the largest number of citations for any family practice journal, and in 1987 was the journal most frequently cited by both this journal and *American Family Physician*.³ In the absence of evidence to the contrary, it is reasonable to assume that the majority of family practice research is published within the field and, further, that such manuscripts are commonly submitted to this journal with its high priority for clinical research in family practice. The experience of this journal over time, therefore, offers a reasonable window through which to observe overall trends in the specialty's literature of record.

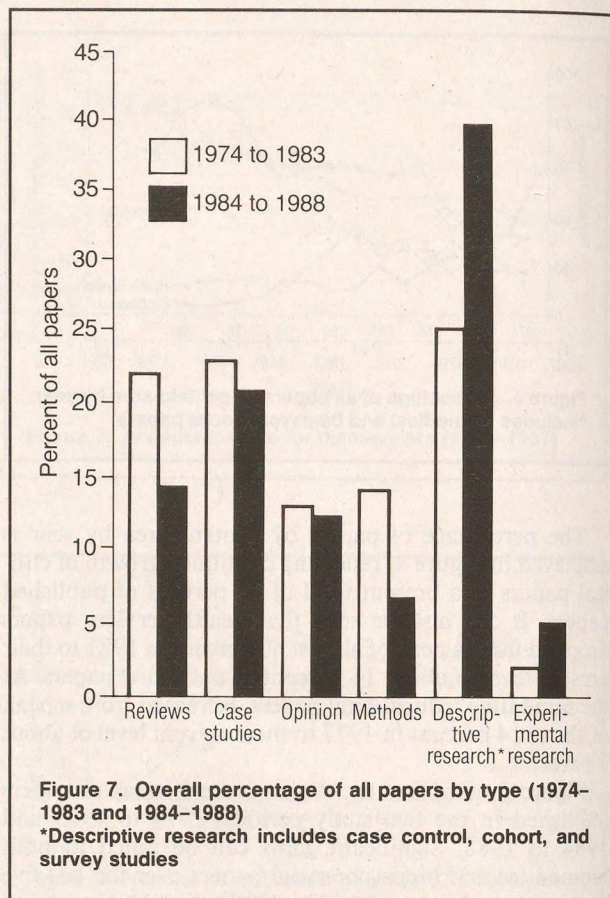
It is encouraging to see a continued growth in clinical research in family practice. Growth has been slow, but the trends are clearly shown in this study. The field's literature is moving past a preoccupation with case studies and smaller pilot studies to more sophisticated and larger



research studies. While descriptive research still predominates, experimental studies are increasing, a trend likely to be welcomed in the field.⁴

These findings also suggest increasing specialization and complementarity of the specialty's journals. For example, whereas more than one-quarter of manuscripts submitted to this journal in 1977 were on educational subjects, only about 5 percent of submitted manuscripts were on educational subjects in the last several years. The growth and maturation of *Family Medicine*, the official journal of the Society of Teachers of Family Medicine and North American Primary Care Research Group, likely account for much of this change. At the same time, *The Journal of Family Practice*, as a matter of editorial philosophy and intent, has made a concerted effort over the last ten years to place highest priority on clinical research. *The American Family Physician*, the official journal of the American Academy of Family Physicians, publishes the majority of reviews and case studies for the principal purpose of continuing medical education of family physicians. This diversity and complementarity of journal roles within the field is appropriate.

The issue of manuscript supply for research in the field is cause for both optimism and concern. On the positive side, that a monthly peer-reviewed journal devoted largely to clinical research in family practice has survived and matured over 15 years is heartening. In addition, although the manuscript pool is not yet what one would like to see, the quality of the manuscript pool is increasing yearly as the number of experienced, academically oriented clinicians and investigators grows within the field. On the other hand, one might reasonably expect that the amount of published research in family practice could well be expanding faster than it apparently is. One suspects that the competing priorities of patient care, teaching, and organizational and administrative tasks still preoccupy many academic family medicine departments and programs, many of which are below critical mass so that time and resources for research are not readily available.



In summary, the view afforded by this "biopsy" of the field's literature through the experience of *The Journal of Family Practice* documents continued maturation of the literature of record in family practice in the United States. This journal is firmly established as a principal forum for publication of original work in the field. At the same time, the lack of growth, even decline, in the manuscript supply raises serious concerns for the specialty. Despite the problems, the priority for research in the field needs to be increased. Compared with the need, only a small start has been made in developing the clinical and scientific base of family medicine as a specialty. Fortunately, a peer-reviewed forum of journals is now available for publication of this work.

References

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