

AJHP's clinical content

Among the comments *AJHP* receives from its audience are two common and related themes. First, some readers want more articles on clinical subjects. Second, some authors believe that *AJHP* would not welcome their manuscripts on such subjects. These remarks merit a discussion of *AJHP*'s attitude toward clinically oriented articles.

AJHP has been committed to providing readers with substantial clinical content since it and *Clinical Pharmacy* merged in 1994. During the past four years, for example, clinical review articles, studies, and case reports occupied 26% of *AJHP*'s pages, exclusive of columns and advertisements, and ASHP Therapeutic Guidelines and Therapeutic Position Statements accounted for another 5%. Given the pages that *AJHP* must devote to general topics relevant to health-system pharmacists, students, and technicians, to topics important to readers in specialty practice areas, and to ASHP governance and national meetings, it is notable that *AJHP* publishes as much clinical material as it does.

Should *AJHP* feature even more clinical articles? Possibly, but to do so it must have more good manuscripts to choose from. Despite *AJHP*'s efforts to obtain high-quality clinical submissions, several factors have contributed to a decline in their number in recent years. Many seasoned clinicians have become so burdened with administrative or teaching responsibilities that time for preparing manuscripts has all but disappeared. Others have taken positions in the drug industry and are no longer interested in publishing. Young practitioners with the time to write often have not yet developed the clinical acumen and evaluative skills that would make their submissions especially useful. Faculty members striving to impress tenure committees concentrate on research reports, which are often quite specialized, rather than review articles, which have been the major components of *AJHP*'s clinical content. Pharmacists hoping to satisfy physician coauthors, gain additional prestige or tenure credit, or reach a different audience often submit their best clinical research to medical rather than pharmacy journals. Authors also send many clinical papers to pharmacy journals other than *AJHP*, such as *Pharmacotherapy* and *Annals of Pharmacotherapy*, whose titles indicate clearly that the clinical realm is their mainstay.

AJHP is perceived by some to be intended primarily for managers and thus indifferent to clinical articles. *AJHP* does endeavor to feature material that is useful to managers, but it regards clinical articles as a vital ingredient of that mix. Furthermore, *AJHP*'s content is meant for and germane to all health-system pharmacists, whether they are managers or not. Even hard-core clinicians must be knowledgeable about pharmacoeconomics, medication errors, and ways to justify, establish, and receive compensation for clinical services; *AJHP* covers such topics extensively. The fact is that *AJHP* welcomes clinical articles, which are read not only by managers and staff pharmacists but also by well-rounded clinicians. The journal's emphasis on clinical review articles is appropriate for a publication with a diverse audience. Case reports, however, are also welcome, as is research whose applicability to clinical practice is apparent.

Publishing in *AJHP* offers distinct advantages. The journal's average print circulation, about 38,000, dwarfs that of other pharmacy journals with substantial clinical content—6,200 for *Pharmacotherapy*¹ and 5,300 for *Annals of Pharmacotherapy*.² Abstracts and the full text of *AJHP* articles are posted online several days before issues are mailed and are available to all visitors to ASHP's Web site (www.ashp.org), although the full text will be restricted to *AJHP* subscribers in the future. ASHP's Internet presence and efficient public relations efforts ensure that the attention attracted by *AJHP* articles extends well beyond the journal's print circulation. A recent *AJHP* research article on ephedra, for example, received prominent coverage by the *New York Times*, the *Los Angeles Times*, the *Washington Post*, MSNBC, and numerous other news sources. Many *AJHP* review articles, mostly on clinical topics, are accompanied by continuing-education credit—free to ASHP members and attainable online or by mail or fax—and thus draw extra attention.

AJHP's clinical content depends to a large extent on authors. Those who believe that *AJHP* should publish more clinical material are encouraged to make that possible by submitting clinical manuscripts or urging their colleagues to do so. Those who believe that *AJHP* will be unreceptive to their high-quality clinical articles are invited to test that theory personally.

1. Chella-Nigl AE. Statement of ownership, management, and circulation. *Pharmacotherapy*. 1999; 11(11):P-2.
2. Whitney HAK Jr. Statement of ownership, management, and monthly circulation. *Ann Pharmacother*. 1999; 33:1398.

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