EDITORIAL

Pull together to publish for the home team

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It seems that the desire to undertake and publish research is at an alltime high. For once, university departments are asking to guest-editor journal issues without my having to put out an SOS. As a matter of fact more and more registrars are signing up to write MMed dissertations and theses and I have many requests from registrars and registrar hopefuls to assist them in producing case reports and research papers.

At Stellenbosch University Radiology Department we initiated (a year ago) what we refer to as a research group composed of all the registrars and academically minded consultants in the department, to perform research and write up cases unrelated to the more complex MMed theses underway. We divided ourselves into 4 groups (about 5 members in each), with 4 consultant group leaders, and me at the overall lead. We meet each Tuesday morning partly prior to work hours and partly into work hours. At the meeting we review pending publications, completed work for submission, work in progress, new ideas, and keep a current list of work. Each registrar is delegated a new duty by the group leader and each group gets to meet me each week for motivation, advice and new ideas.

We have so far published 10 international articles and many more local articles, have had a further 10 international articles accepted for publication in the correction or proof stages, and have 80 more in other stages of development. That is 25 papers per group. This is an exceptional research result for a group of people who (apart from myself) had not published anything before. In 2005 the department had received research subsidy for only 1 publication. We expect between 10 and 15 times the amount of academic financial reward for our current work which we will pump into our new PhD candidates, into computers and other hardware for our research department.

The groups have become so independent that some have moved on from case reports and small series to planning complex prospective blinded work using CT and MRI. Other groups have ignored my hesitancy in writing up certain cases and have managed to have cases published that I insisted would not be accepted. Group members have learnt to work together by dividing the work, giving the less experienced members lighter papers to lead, and by contributing small components to each project so as to gain inclusion as authors on almost every paper. We have registrars who have 2 first-author publications in their first year of study.



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EDITORIAL

Our lessons learnt:

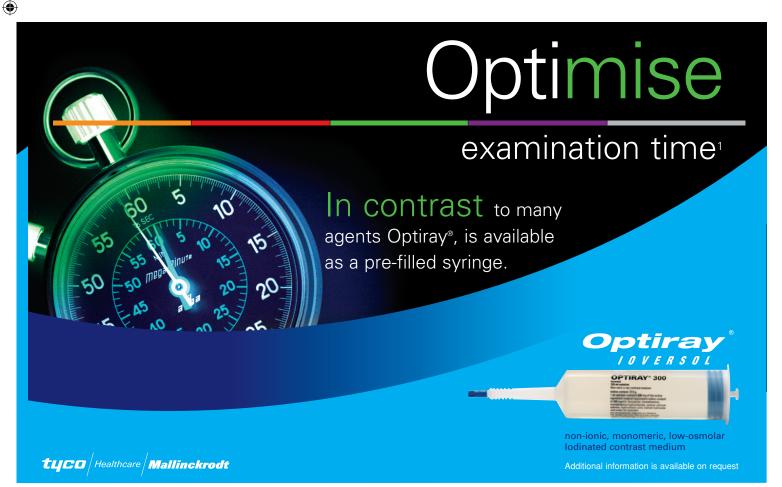
- With a proper structured and supervised system, all registrars and consultants are capable of producing publishable work in a fun environment.
- After some successes the morale is so high that research becomes not only a normal component of the department work, but also integral to job satisfaction.
- Successful publication results in financial gain that can be pumped back into producing a professional research outfit, which in turn attracts external and internal PhD candidates. (Remember that each paper published, each MMed thesis produced and each PhD graduate results in large sums of money from the government which filters down to the department as a research fund.)
- The least likely academics often become great paper writers who may need no motivation and who may in turn motivate others.
- Always write down interesting or baffling cases in a book at clinical meetings for later use.
- Always call on your clinical colleagues' guidance and co-operation to identify interesting patients, write up imaging findings for their papers, collect patient databases and plan prospective patient collection.
- There is always an angle if you have great imaging, e.g. submitting a common disease with great imaging to a GP interest journal such as

the *SAMJ*; or a new type of imaging for an old disease such as DWI for tuberculomas; or using known phenomena for a different population group such as children; and lastly by collecting a loose bunch of cases as a series by identifying a common denominator such as 'unusual involvement of the spinal cord and spinal column by TB identified on MRI'.

The possibilities are endless. There is no such thing as 'no time for publication'. There is no-one who cannot be published. There is always a journal somewhere that is interested in what you have and it's up to you to find it. It is a fallacy that there is no-one to ask or refer to....we are available and amenable and invite you to either form your own groups or join us! I have assisted in the writing of case reports for registrars in Bristol, Oxford, Edinburgh, Pietemaritzburg, Durban, Melbourne, Johannesburg and London all by long-distance communication. We can arrange workshops or visits and we even welcome Masters and PhD students to our new 3 Tesla Research MRI unit here at Stellenbosch.

Savvas Andronikou Guest Editor

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