

**Coeditors
Corédacteurs**

James P. Waddell, MD, *Toronto*
tel 416 864-5048
fax 416 864-6010
waddellj@smh.toronto.on.ca

Garth L. Warnock, MD, *Vancouver*
tel 604 875-4136
fax 604 875-4036
gwarnock@interchange.ubc.ca

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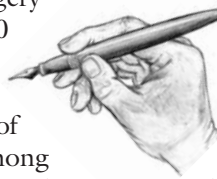
The *Canadian Journal of Surgery* (*CJS*) carries the mission “to contribute to the effective continuing medical education of Canadian surgical specialists using innovative techniques when feasible and to provide surgeons with an effective vehicle for the dissemination of observations in the areas of clinical and basic science research.” It is timely that we reflect on this noble mission, considering the inexorable change in the environment of modern surgery, and whether this mission has been achieved and is sustainable.

In this anniversary edition of the Journal, the nature of the changing environment in surgery throughout the past 50 years is well summarized by Dr. Schmidt in his summary of the on decades of change.¹ Highlighted among these have been seminal contributions by Canadian surgeons in the broad disciplines of congenital and adult cardiac surgery, organ transplantation, neurosurgery, innovative reconstructive plastic surgery and advances in joint arthroplasty. A survey among the Canadian Association of Surgical Chairs conducted by editorial board member, Dr. Edward Harvey reveals a number of “firsts” in establishing leading programs of surgical care throughout Canada’s major centres. Furthermore, Canadian surgeons have been at the forefront of original research in the fields of sepsis, cell transplantation, burn and wound healing and novel educational standards. The *CJS* throughout its 50 years has participated in the dissemination of such data through original scientific contributions, reviews and abstracts.

Many of these contributions originated from members of the Canadian general surgical community; however, the Journal prides itself on contributions from a broad array of surgical specialties including those of orthopedic, spine, vascular, trauma, oncology, thoracic and transplantation surgery. The challenges of sustaining the Journal throughout the years are vividly portrayed in this edition’s discussion with editors past and present.²

Although numerous outstanding accomplishments in Canadian surgery have been published in reputable surgical journals throughout the world, many have been initiated through the *CJS*. The Journal has opened its doors to international surgery by representing this growing area of interest on its editorial board. Additional accomplishments include basic science, surgical education and evidence-based surgical care. The outstanding development of systems of trauma care has been reflected in this anniversary edition in the article from Evans,³ which chronicles pioneering efforts to develop a sophisticated trauma care system in the setting of a wide and diverse geography.

Several qualities make the *CJS* unique among surgical journals. From its inaugural edition, the Journal has been found to be relevant to community surgeons as well as surgeons in university centres; this is well summarized by William Fitzgerald in this anniversary edition.⁴ A review of early editions of the Journal reveals some outstanding documentation of original events that shaped surgery in Canada’s early na-



tionhood. McAlister has summarized in this issue some little known facts about the origins of the Canadian school of surgery.⁵ Considering the early seminal contributions to surgery from surgeons in Quebec, the Journal initiated and has sustained an official bilingual status with contributions throughout the years from its colleagues in that province. From the perspective of surgical trainees, the MacLean–Mueller Prize has sustained a publication vehicle for recognition of outstanding trainees in various surgical training programs throughout the country through the presentation of their original research. Finally, the participation of multiple subspecialty surgical societies in sponsoring the Journal is truly unique.

As the Journal extends beyond its 50th year of publication, it is helpful to project some insights into the future of surgical care in Canada and how the *CJS* may play a role in shaping surgery through the support of its authors and readers. A current survey of the journal readers provides insight into the Journal's circulation, relevance and perceived value. Clearly, the Journal garners interest from practitioners in academic health sciences centres as well as those in the community with the readership by specialties well balanced with orthopedic and general surgeons. Evidence-based surgery appears to be the most widely read section of the Journal. Clearly, an authoritative voice on the best evidence by which practitioners choose surgical practice

is widely acknowledged. The rapid evolution of surgical care to embrace natural orifice therapeutic endoscopic surgery, minimally invasive approaches to surgery, cell-based therapies and robotics has numerous champions throughout Canadian surgical specialties and are future topics of interest in the Journal. In the future, the Journal will serve to improve publication turnaround for its contributing authors. A recent decision by the editorial board to accept publications online in preparation for the peer-review process should greatly facilitate the timely publication of data. For readers, the Journal will transcend the dissemination of observations in clinical and basic science research by providing a forum for new initiatives in quality of care, patient safety and delivery of health policy. For example, articles on wait-list strategies, quality monitoring after surgical care and maintenance of practice audits have recently been published in the *CJS* to improve awareness of the impact of these initiatives on the care of patients in our own health care system. The overall aim is to foster practice-based learning improvement so that data can be incorporated effectively into the surgeon's daily practice.

As this anniversary issue reaches readers, we sincerely hope that the collection of articles detailing the developments in Canadian surgery and the leadership role of the *CJS* in disseminating these advances will be of interest. It should be acknowledged

that the high quality of the Journal is the product of many efforts and strong credit is due to the managing editorial staff, the editorial board, the sponsoring societies, and peer reviewers who generously donate their time to review. As stated in the inaugural forward to the Journal by Robert M. Janes,⁶ "it is our hope that we may attract at least a reasonable share of the report of new Canadian work." We believe Dr. Janes would be impressed at the way in which *CJS* has become a first-class journal to inform us about the activities of our colleagues throughout the country!

James P. Waddell, MD
Garth L. Warnock, MD
Coeditors

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