From the Editor's desk

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THIS MONTH'S ISSUE – WHEN TO PUBLISH, THE EDITOR'S DILEMMA

I am not sure which is the best motto for an editor. 'Publish and be damned' is one of the most frequently quoted but the notion of triumph in the advice has more than a hint of masochism in it. The trouble is that editors are equally damned for both absence and presence of published material. Dr Roberts (this issue, p. 355) adds to the correspondence on case reports (Williams (2004), 184, 84; Bourne (2004), 184, 455) by praising the humanity of Bleuler, Jaspers and Jung and their tableless contributions to psychiatry, and comparing them with the current fare we serve up every month. The trouble is that the Journal receives literally dozens of papers every year that are full of humanity, warmth, and sensitivity, and which also have a complete antipathy to tables, but which add not one jot to psychiatric knowledge. (Please note that I add the adjective 'psychiatric' as I have considerable sympathy with Noam Chomsky's comment that 'It is quite possible - overwhelmingly probable, one might guess that we will always learn more about human life and human personality from novels than from scientific psychology'.)

However, every so often we receive a paper that is a genuine ground-breaker and the task of a good editor and reviewers is to detect this and nurture it to publication. Ground-breaking contributions are often like the articles that so impress Dr Roberts; they describe a psychiatric entity simply and with great understanding, so the careful reader thinks after reading it 'Of course that's right, why on earth didn't I think of that before'. A future editorial in this issue will be celebrating one of these: Gerald Russell's seminal paper on bulimia nervosa published 25 years ago in *Psychological Medicine*. But such articles only rarely brighten the average editor's firmament.

At the other extreme an editor can often publish a paper that looks like a fundamental advance but which in retrospect turns out not to be. I am sure that Dr Richard Horton, editor of the Lancet, frequently, or perhaps only occasionally in view of his journal's name, regrets publishing the putative association of autistic regression, intestinal complaints, ileal lymphoid-nodular hyperplasia and MMR vaccination in his journal (Wakefield et al, Lancet (1998), 351, 637-641), in view of the paper's subsequent negative impact on the public health of the nation. The trouble is that a good editor has to be a bit of a gambler. Primacy is all in publication, and a timid editor will not only avoid pitfalls but rarely be blessed with successes. The article by Morrison and colleagues (pp. 291-297) in this issue of the Journal, illustrates this dilemma. If their cognitive-behavioural intervention

genuinely prevents those at especial risk of schizophrenia from developing the condition, as their results suggest, it could prove to be invaluable for those involved in intervening early in treatment. However, if the recognised flaws in some aspects of their methodology turn out to be the reason why the results are not replicated, the paper will move to the sidelines of science. At this time we have no idea which way the dice will roll.

As for my motto, I think I will choose the one attached to the national emblem of the Isle of Man, the three legs of man. These are surrounded by the words *Quoconque jeceris stabit* – 'whichever way you throw me I shall stand'.

LABELS AND NAMES

I have always had the hypothesis that those with strange names are more likely to suffer from mental illness than those with common ones. The saddest example was the poor man whose parents had christened him Laughen B in a temporary episode of post-partum insanity that they must have regretted. As his surname was Jollev it is not hard to guess the nature of his mental problems later in life. However, the deed poll has allowed patients to get their own back. So a scatty clown is now called Solomon and another of claimed royal blood has made sure his new name begins with the first names His Royal Highness. One possible advantage of changing your name to Count Dracula, James Bond or Joseph Stalin (all of which have come my way in the past 20 years) was expressed by the holder of one such new name: 'Do you think it has changed things for you?' I asked him gently. 'Oh yes', he answered, 'people now look at me very differently when they call out my name at the DSS'.