Pakistani Medical Journals: Issue is Readership not the Revenue

Sir,

The issue of increasing cost of publications and shortcoming of revenue resulting in financial constraints has recently been raised in editorials of JCPSP and Canadian Journal of Surgery. Despite all the financial constraints and administrative shortcomings, some journals have maintained their quality for many years like the Journal of Pakistan Medical Association, which has been ranked as the top most Pakistani medical journal.

Many international medical journals of high impact factor are associated with professional organizations and earn a substantive revenue from the membership subscriptions. Journals, belonging to medical colleges, universities and postgraduate institutions, have got an advantage of subscription fee paid by their members and fellows of the organization and are often receiving special governmental grants to their parent institutions. Journals, which are related to speciality organizations, are fully supported by specialists.

Revenue, earned by advertisements of the industrial products, is considered a moral and ethical issue by the editorial board of some medical journals. However, there are many indexed journals of very high repute and Impact Factor that actively pursue advertising revenue through both corporate and classified advertisements.

The readership of the journal is pivotal in meeting the cost and balancing the budget. Readership will increase with the quality of the journal. The quality of a journal is mainly dependent on the amount of the academic and educational material it provides to the readers. There is, therefore, a serious and urgent need to improve original research work in Pakistan and its publication in Pakistani journals. I fully agree and endorse the views of Dr. Saeed Farooq that we need to improve the quality of our published material.

Government, through its various research organisations, should provide adequate funding for the original research work which will become the main source of good quality publications. Local research should be published in Pakistani journals. It is a tragic fact that good number of Pakistani authors producing good quality material, are preferring to publish their papers in foreign journals rather than locals. Personal communication with many senior clinicians in Pakistan has revealed that they consider publication in foreign journal, with a recognized Impact Factor, carries more weight, that are more effective and authors receive tremendous feedbacks. There is a need to change the attitude of such authors by providing them extra-incentives and rewards in terms of academic promotion, if their original work is published in local journals.

Readership is more important than other issues and should be considered pivotal. Once the readership of a journal increases, so reciprocally rises sponsorship and advertisements and journal would no longer rely on government funding but on their own quality and resources to compete in the international market.

REFERENCES

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Isolated Bony Metastasis of Malignant Pheochromocytoma: A Rare Clinical Entity

Sir,

Pheochromocytomas are rare catecholamine secreting tumours. They arise from chromaffin cells mainly of the adrenal glands which synthesize, store, metabolize and secrete catecholamines. Pheochromocytoma occurs in about 1-2/100,000 adults/year. Although a majority of pheochromocytoma is benign, malignancy can occur in 5-26% cases.

A 45-year-old woman presented with uncontrolled blood pressure and vomitings for 4 days. This was accompanied by headache, palpitations and dizziness. Her blood pressure had ranged from 220-240 mmHg (systolic) and 120-140 mmHg (diastolic) during the period. Blood pressure was 180/100 mmHg with regular pulse of 130 beats/minute at the time of presentation.
Rest of the examination was unremarkable. Initial laboratory work-up showed haemoglobin of 13.6 mg/dl, serum creatinine of 2.3 mg/dl and rest of the electrolytes were normal. Urine analysis showed trace of proteins and 24-hour urinary Vanilmandelic Acid (VMA) was 175 mg/24 hours (normal range 1.9-9.8 mg/24 hours). Work-up for Multiple Endocrine Neoplasia-II (MEN-II) was negative. Computed tomography scans of abdomen revealed a tumour of right adrenal gland, measuring 11.3 x 8 cm, which was abutting the right lobe of liver with bony metastasis to left acetabulum, both iliac blades, sacrum, lumbosacral spine and dorsal spine (Figure 1). Further metastatic deposits, as lytic lesions, were found in skull and thoracic cage. Mammograms, CEA, alfa-feto protein, beta-HCG and ultrasound of thyroid were all normal.

CT guided bone biopsy from left acetabular lesion revealed metastatic deposits; histological and immunohistochemical features were compatible with metastatic pheochromocytoma (cytokeratin AE 1/AE 3 positive; Chromogranin-A positive, Figure 2). A diagnosis of metastatic pheochromocytoma was made and she was started on phenoxybenzamine 10 mg b.i.d and propranolol. She was then started on chemotherapy with cyclophosphamide, vincristine and dacarbazine for the disease.

Metastatic pheochromocytoma is an uncommon condition. Pheochromocytoma can metastasize to lymph nodes, liver, lungs and bones.4 This case is unusual in that there were widespread bony metastasis without other organ involvement. Pheochromocytoma with primary metastasis to bones has been reported but very rarely.5 Metastatic pheochromocytoma to bones may or may not present with hypertension. Pheochromocytoma should be considered as differential in patients with uncontrolled hypertension and bone pains.

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