Open Letter to Reviewers

Why an open letter to reviewers? And not a letter to authors or to readers, without whom no journal could exist? Because reviewers not only contribute a huge amount of work and expertise to the body of scientific evidence designed to benefit practitioners, researchers, and patients worldwide – but they do so in the shadows.

In most cases, reviewers’ names are concealed and public recognition of their work is minimal. A reviewer receives a manuscript from an editor, spends many hours combing through the relevant literature and dissecting the strong and weak points of the paper and, finally, translates these efforts into critiques, thus helping authors improve their work and learn valuable skills that will benefit their future studies. This painstaking exercise of solid competence is performed several times a month, in
addition to the heavy schedule of usual duties, for no pay. 'Improving peer review depends on making its human aspects more humane', according to Trish Groves, Deputy Editor at the BMJ and Editor in Chief of BMJ Open.

At ICM, we agree fully with this statement. We want to make life better for our reviewers. So how? We need you – our current and potential reviewers – to help us answer this question.

Much has been written over the past two decades about peer review, its drawbacks and advantages, the thankless nature and herculean proportions of the task, and possible solutions. Some of these suggestions have already been adopted in ICM's new editorial policy: For example, only the most promising papers are sent for review; other submissions are rejected without review to avoid creating an unmanageable workload for our reviewers. This initial rejection is made according to predefined criteria by two or three Editors. Furthermore, the most committed reviewers are invited to sit on the board of reviewers, and their names are printed at the beginning of each issue. Finally, the most committed reviewers are invited to submit editorials or 'what’s new' papers, when their expertise is so considerable that it needs to be shared.

Several other ideas are being considered; some intended to improve recognition of reviewers and some to improve quality of reviews. These suggestions are open to discussion and if you want to participate in the debate, please contact the ICM editorial office. Let us know what might help, what might harm, and what you want.

• Publishing a footnote in accepted papers with the names of the reviewers would constitute an acknowledgement of their work.
• Drafting letters for very active reviewers, as a form of recognition for the quality of their reviews. These letters can be part of the academic curricula and are much appreciated by our Deans.
• Increasing feedback from editors to reviewers about the quality of reviews.
• Empowering peer group review, facilitating discussion among reviewers, and perhaps involving young researchers and grad students in the process, with mentoring from more experienced reviewers.
• Creating an online meeting place for reviewers, authors and editors to discuss difficult decisions about manuscripts, share their experiences and communicate on topics of common interest, with the ICM editorial office acting as an ombudsman and 'stirring the pot'.

These ideas are merely a small selection among countless options. If enough people join the debate, and reach a consensus on new policies to be created, the results of the discussion will be compared to what peer review research has shown. The resulting document will be made available to all of you – and we hope it will result in substantial ICM policy changes that will make your job as a reviewer more pleasant and more rewarding.

Just one more thing: Thank You!

Best wishes for the new year,

Élie Azoulay
Editor in Chief, Intensive Care Medicine