

# Practical Neuro

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One year on from our birth, this is the seventh issue of *Practical Neurology*. We should celebrate this first birthday and reflect on what we are trying to do and whether we will survive to celebrate future birthdays. The concept is simple enough: a review journal that is easy to read on the train or in a deckchair, understandable, attractive, reliable, unbiased, relevant to ordinary neurologists doing ordinary neurology anywhere in the world – and fun. In fact the original title was ‘The Journal of Jobbing Neurology’ to reflect the intended readership of jobbing neurologists (I liked the way *J Job Neurol* tripped off the tongue!). But this was regarded as a bit too facetious, and anyway the word ‘jobbing’ may not be familiar to those whose first language is not English (it has come to mean run of the mill, routine, something other than an expert, although I have to say the jobbing plumber is certainly much more expert than me, at plumbing).

We have known for years that none of us can keep up with the burgeoning numbers of medical and neurological journals. The Internet is making matters worse by allowing more and more to be published – thousands of supplementary tables, figures and interesting data taking up just a tiny corner of cyberspace, so billions more can be accommodated. We cannot possibly read all the scientific material relevant to our everyday practice, or even our special research or practice interest. In any event, so many papers are totally irrelevant to day-to-day doctoring, and so often what we do read is impossible to understand without quite specialised knowledge of the methodology. So why bother if we cannot then assess the reliability of the conclusions? Personally I may be able to spot the errors in an epidemiological paper, but have no chance when it comes to molecular genetics, or even, dare I admit, neurophysiology. I don’t even understand most of the titles! For our daily clinical practice, most of us need straightforward reviews and educational material, not

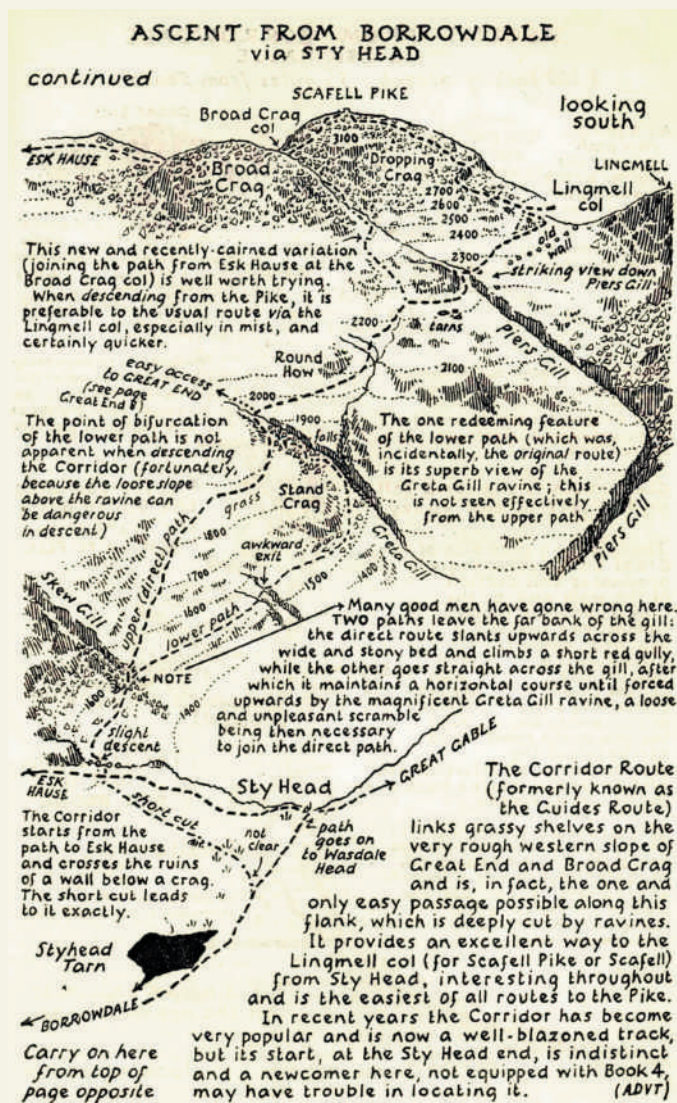
primary science with hundreds of references that even the authors may not have read.

Someone has got to digest all the primary science and even the systematic reviews, make sense of it all, and distribute the chunks that should influence clinical practice (and small bite-sized chunks please, not so large that my brain chokes on them). And someone has got to demystify neurology so it can be applied to patients with common neurological problems by those of us who do not fit the stereotype so wittily described by Richard Smith, the editor of the *BMJ* as ‘a brilliant and forgetful man with a bulging cranium, a loud bow tie, who reads Cicero in Latin for pleasure, hums Haydn sonatas, talks with ease about bits of the brain you’d forgotten existed, adores diagnosis and rare syndromes, and – most importantly – never bothers about treatment’ (Smith 1999).

In *Practical Neurology*, we are attempting to guide neurologists in their routine practice, like the Wainwright guides have guided walkers in the English Lake District for half a century. These guides are so successful because they are simple and accurate. They have taken the tension out of map reading in thick cloud, blinding rain and gale force winds (using them is regarded as cheating by some, but actually they make mountain walking safer, and we are after making safe neurologists here). And, very importantly, the guides are attractive and easy on the eye because each page is different to the next, and is illustrated with the author’s own drawings (even the text was written in his own hand). He didn’t just know how to get from A to B, he could tell the rest of us how to get from A to B, and he could even draw the way for us. A perfect example for *Practical Neurology* – experts showing the less expert the way in a simple and reliable way, with pictures.

I hope we have been successful in our ambitions. Although some people have groaned ‘oh no, not another journal’, most have been kind, even enthusiastic, like the neurologist who

# rology, our first birthday



A page from one of Wainwright's seven guides to the Lakeland Fells. He knew how to get from A to B, he could tell the rest of us how to get from A to B, and he could even draw the way for us. This is what we aim for in *Practical Neurology* – an attractive guide to neurological practice.

emailed me to say this was the first journal that he could read cover to cover and understand every word. Praise indeed, although the cynic might believe we are pitching our level too low. The *BMJ* has also been enthusiastic and even claimed that more can be learned from us than from *Brain* (Kale 2002). But then, for some reason, they have had it in for *Brain* which they regard (tongue in cheek I am sure) as 'forbidding' and 'a long march' from the 'froth and colour of *Cosmopolitan*' (Smith 2002). Indeed it is, but then *Brain* has a different readership, and so I suspect do we.

Will we survive to celebrate future birthdays? I hope so, but we only deserve to do so if we are fulfilling a need. We are not alone. *Current Opinion* has been around a long time, as has *The Neurologist*, mostly in North America, and there are various free journals such as *Advances in Clinical Neuroscience and Rehabilitation* (ACNR) which is widely distributed in the UK. Recently the *JNNP* have started an educational supplement, supported I am pleased to say by the Association of British Neurologists. Even more recently the *Lancet* has launched *Lancet Neurology*, which I wish well, having a soft spot for the journal that was reckless enough to publish my first paper. But the *Lancet Neurology* has got neurologists wrong, thinking that to make a diagnosis we need just a hammer and a pin (Anon 2002). I would happily trade my hammer and pin for a decent history (and trade my tuning fork, cotton wool, ophthalmoscope, orange stick and pen torch as well).

There are more journals doing roughly what we are trying to do, and so more competition, but the market is large and probably getting larger as we leave primary science journals to a few experts, and as the number of neurologists must increase to meet the needs of patients with neurological problems, particularly in the developing world. There is room for all these journals. After all, most neurologists are desperate to get clinically useful information that is easy to assimilate, wherever neurology is practised.

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