

One Referee Constitutes a Poor Method of Assisting the Editor to Assess Epidemiologic Research: Should three not be the Standard?

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Abstract

Epidemiology has been defined as a branch of medical science that deals with the incidence, distribution, and control of disease in a population. Introduced into the English language about the year 1860, the author has from the early 1970s been involved in research on it with special reference to the Igbo ethnic group in Nigeria, West Africa. Despite my wide experience, a paper on Wilms tumor in Igbo children was rejected by the Editor of International Journal of Cancer and Clinical Research on the opinion of one referee who stated that "There are many different tribes in Nigeria," adding therefore that "A better paper would survey the entire country, comparing different groups and areas." Accordingly, this referee's opinion is falsified on several grounds, including the fact that 36 editors had between 1974 and 1978 accepted such papers of mine. Indeed, the paper has since been accepted by the Editor of "Archives in Cancer Research." Accordingly, it is hypothesized that at least three referees should be a standard practice in evaluating not only epidemiologic but also other scientific communications worldwide.

Keywords: Epidemiology; Igbos; Wilms tumor; Analysis, Referees; Number; Publishability

Introduction

The Merriam-Webster's Collegiate Dictionary defined "Epidemiology" as "a branch of the medical science that deals with the incidence, distribution, and control of disease in a population" [1]. Interestingly, this word was described as having entered the English Language since about the 1860s. Therefore, as a Nigerian scientist, who believes strongly in the lingua franca status of the English language [2]. I have written on the epidemiology of many diseases among my own Ethnic Group, the Igbos or Ibos of Nigeria. Incidentally, an anthropologist, Basden [3] wrote a book on them. The present paper merits exemplification.

Original submission of Wilms tumor

As advised by a British group [4] establishing a histopathology data pool is useful in analyzing epidemiological materials. Therefore, from 1970 to 2000, 58 cases of Wilms tumor were accumulated. The data were analyzed and compared fruitfully with an English series [5]. The findings were submitted to the "International Journal of Cancer and Clinical Research." Unfortunately, the Editor rejected it on the advice of one referee who argued thus:

"There are many different tribes in Nigeria. A better paper would survey the entire country, comparing different groups and areas."

Resubmission to "Archives in Cancer Research"

Without taking any iota of notice of the above referee's misgivings, the manuscript was wholly submitted to the above indicated Journal. It was nicely accepted and printed [6].

Demolition of the rejecting referee's grounds

The vast Nigerian country has numerous ethnic groups numbered in hundreds.

There is no evidence that each has a person of my stature, let alone the collected data extending over the years.

Must an author anywhere in Nigeria publish by first conducting research throughout the entire country? Certainly not!

The existence of 36 journals that accepted my works

Incidentally, these constituted my entire Doctor of Medicine Thesis of Glasgow University (1980). They were written only from 1974 to 1978. Not one of them followed the above referee's injunctions. Their titles suffice thus:

1. Obstetrics and Gynecology, 1974; 44: 769-770.
2. Tropenmedizin und Parasitologie, 1974; 25: 433-436.
3. Bulletin, Sinai Hospital of Detroit, 1975; 23: 113-114.
4. British Journal of Plastic Surgery, 1975; 28: 114-117.
5. Journal of Laryngology and Otology, 1975; 89: 657-661.
6. American Journal of Tropical Medicine and Hygiene, 1975; 24: 708-709.
7. British Journal of Clinical Practice, 1975; 29: 290-291.
8. Archives of Surgery, 1975; 110: 349.
9. Oncology, 1975; 32: 145-150.
10. International Surgery, 1975; 60: 410.
11. Journal of the National Cancer Institute, 1976; 57: 1191-1192.
12. International Journal of Dermatology, 1976; 15: 432-437.
13. International Journal of Fertility, 1976; 21: 186-188.
14. Journal of Pediatric Ophthalmology, 1976; 13: 165-167.
15. Archives of Dermatology, 1976; 112:1405-1407.

16. *Gynecologic Oncology*, 1976; 4:255-258.
17. *Indian Journal of Dermatology*, 1976; 21:36-39.
18. *British Medical Journal*, 1977; 1: 22-23.
19. *Tubercle*, 1977; 58:113-115.
20. *Journal of Neurology, Neurosurgery and Psychiatry*, 1977; 40:726.
21. *Diseases of the Colon and Rectum*, 1977; 20:679-680.
22. *American Journal of Surgery*, 1977; 134:564-565.
23. *Digestion*, 1977; 15:353-355.
24. *Acta Hepato-Gastroenterologica*, 1977; 24:24-26.
25. *Angiology*, 1977; 28:803-805.
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28. *Medical Journal of Australia*, 1977; 1:886.
29. *Papua New Guinea Medical Journal*, 1977; 20:78-79.
30. *South African Journal of Surgery*, 1977; 15:67-69.
31. *Journal of Oto-Rhino-Laryngology*, 1977; 39:247-250.
32. *British Journal of Oral Surgery*, 1978; 15:223-226.
33. *International Journal of Oral Surgery*, 1978; 7:73-75.
34. *Journal of Pediatric Surgery*, 1978; 13:129-130.
35. *Journal of Reproductive Medicine*, 1978; 21:249-250.
36. *Nigerian Medical Journal*, 1978; 8:270-271.

Proposed 3 minimum referee system

Coming to brass tacks, as the English would say, I herein conclude that with regard to the smallest number of referees that will provide positive or negative answers, it should indubitably be three! Surely, this would make not only the life of authors easier but also the furtherance of knowledge faster! Indeed, it is hypothesized that this is one step which will significantly foster the advance of scientific communication worldwide!

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5. Marsden HB, Newton WA (1986) New look at mesoblastic nephroma. *J Clin Pathol* 39: 508-513.
6. Onuigbo WIB. Comparative approach to the epidemiology of Wilms tumor. *Arch Cancer Res*, In press.