What will drive new editor-in-chief’s approach at JAMA

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**JAMA**® is a revered source of peer-reviewed medical research and discussion of critical health issues, but to keep its leadership, it must continue to build trust and emphasize diversity, according to the journal’s new editor-in-chief, Kirsten Bibbins-Domingo, MD, PhD, MAS.

“It means bringing more people to the table to talk about those factors that impact health. It means being more conscious about the types of science that are important at the times when we’re thinking about the health that we’re trying to improve,” she said in a recent interview with Nobel laureate Harold E. Varmus, MD, her former mentor and thesis adviser at the University of California, San Francisco (UCSF).

Appointed in June, Dr. Bibbins-Domingo is the Lee Goldman, MD, Professor of Medicine at UCSF. She’s also a practicing internist, professor of epidemiology and biostatistics, the outgoing chair of that department at UCSF, and a National Institutes of Health-funded researcher who works on the prevention of cardiovascular disease.

In the interview with Dr. Varmus, Dr. Bibbins-Domingo discussed the U.S. health system and the role that medical journals need to play in its development.

JAMA Network™ journals and other medical journals must play a positive role in improving U.S. health care, she said.

“We have in many ways, a fabulous health care system ... that benefits from the translation of our enormous biomedical research enterprise into new scientific discoveries, translating into better health for many who have access to our health care system, even for those who have access to our health care system.”

However, she said, the U.S. has an extraordinarily fragmented system “that doesn't operate quite as efficiently or as effectively as we might like.”

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“We spend an enormous amount in health care, but don’t often have the health outcomes that we would expect for the amount of money that we spend,” she said. “We all have a broad appreciation of both the inequities that happen within the health care system, the inequities that are caused by the lack of access, and then the fact that as much as health care is important for ultimate health, the broad context in which we all live, the social factors, the structural factors, the environmental factors that influence the life around us, all have an influence on our health.”

Learn how Dr. Bibbins-Domingo’s career as a first-rate physician-scientist prepared her take the helm at JAMA.

**Continuing mission at JAMA**

Medical journals have a particular opportunity to both to shape the discussion, the context and the types of science that are important to improve both health and inequities in health care, Dr. Bibbins-Domingo said.

“Medical care is fragmented in and of itself. It’s certainly completely fractured from public health, which is underfunded. And then we criticize when public health doesn’t operate in the way it should. ... So, not surprisingly, in this time of the crisis, public health has had really brilliant moments, but not functioned the way we would expect, especially in the U.S.”

In her first editorial, Dr. Bibbins Domingo outlined the continuing mission of JAMA and the JAMA Network journals.

“The critical role of scientific publications has never been more important,” she wrote. “The true power of a scientific journal stems not from its scores on the proliferating comparative metrics, but rather from the trust that it engenders. Clinicians trust that they are gaining important knowledge, vetted by the review process, and as transparently free from bias and conflict of interest as possible. Authors and scientists trust that their work will be impartially reviewed, ideally improved, and promptly and widely disseminated.”

*JAMA* must be on guard against “insularity and parochialism,” she wrote, and journals must avoid any bias that that may inhibit the recognition of scientific content with potential to change practice and translate research into improvements in health.

“It is paramount that the voices in the room where decisions are made represent diversity of thought, expertise and backgrounds. The voices of those historically marginalized and excluded from science and medicine have also largely been absent in scientific and medical publishing, to the detriment of all,” Dr. Bibbins-Domingo wrote.
Ensuring diversity accelerates advances in science, produces better medical journalism and is fundamental to the trust readers place in a journal to deliver the highest-quality content and most complete context to advance health, the editorial says.