

In this number

Abortion, breast cancer, and impact factors – in this number and the last

It is not an everyday occurrence for articles in this Journal to be discussed in national media. The paper in our last number by Brind and colleagues,¹ relating to breast cancer risk in women who have had an induced abortion, was the subject of intense interest in several countries – especially Britain and the United States – even if briefly. The paper was a meta-analysis of the literature since 1957; in line with our editorial policy the authors detailed how the literature was searched and the criteria for including and excluding articles from their meta-analysis. The editors did not attempt to censor or modify the views of the authors which may have been interpreted or stated differently in the related press conference or press summaries. The article was presented as a collaborative funded study whose authors held differing views of abortion.

Comments in, for example, the *British Medical Journal*² suggested there could be sources of bias, while acknowledging that there may well be a real effect none the less. The risks of other events leading to pregnancy and childbirth were also mentioned in many comments. Coincidentally, a very similar article appeared shortly before our article, namely a paper in *Epidemiology* entitled, 'Does induced or spontaneous abortion affect the risk of breast cancer?'³ The authors (from Harvard) reviewed substantially the same articles, although each paper included a small number of articles which were not included in the other. The paper in *Epidemiology* was rather shorter, and it presented in tabular form rather more information about subcategories of case and reference groups. No overall estimates of risk based on the total numbers of papers studied were made. The final sentence of the summary of Michels' and Willett's paper read, 'Studies to date are inadequate to infer with confidence the relation between induced or spontaneous abortion and breast cancer risk, but it appears that any such relation is likely to be small or non-existent.'

Some readers may consider that the calculation made by Brind and colleagues of possible numbers of breast cancers following – conceivably caused by – induced abortion is alarmist. It is certainly true that a relative risk of only 1.3 adds up to a large absolute increase in risk with a very high prevalence of the underlying factor. However, in the light of recent unease about appropriate but open communication of risks associated with oral contraceptive pills, it will surely be agreed that open discussion of risks is vital and must include the people – in this case the women – concerned. I believe that if you take a view (as I do), which is often called 'pro-choice', you need at the same time to have a view which might be called

'pro-information' without excessive paternalistic censorship (or interpretation) of the data.

Perhaps only the most cynical of readers would connect the publication of somewhat controversial articles with the controversial topic of impact factors. In this number a colleague from Spain will guide you through some of the exotica of the calculation and possible meaning of impact factors as far as they affect journals such as this one. Of course there are much more radical critics of the whole exercise of citation indices and impact factors than the article in this number. For example, Seglen has published in this area and gave a powerful presentation at the recent workshop for editors of journals hosted in Oslo by the Norwegian Medical Association, the *British Medical Journal*, and the European Association of Science Editors.⁴ Among many other points, he emphasised (from analysis of the relevant database) that journal impact factors are heavily dependent on specific research areas, are not representative of individual journal articles, and do not determine the citedness of individual articles. He said that journal choice is not determined by impact factors – but was prepared in discussion to agree that this statement might need to be put into the past tense; perhaps impact factors, despite their lack of meaning, are being used in decisions about journal choice for publication. I think that this story will run and run.

As we come to the end of our 50th volume we plan to continue our historical articles for another year. The proportion of articles related to health service research and to methods continues at about one third. An article early in 1997 will describe in detail the way in which the journal has changed over the years. We trust that the international mix and topic mix will continue to maintain readers' interest.

Electronic publication is still on the agenda. In principle, we can put all our articles onto a Web page but the practical problems relate, first, to synchronising electronic and paper publication (it is much quicker and easier to put articles on the Web!) and, second, to the vexed question of subscriptions. More about that next year.

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Editor

- 1 Brind J, Chinchilli VM, Severs WB, Summy-Long J. Induced abortion as an independent risk factor for breast cancer: a comprehensive review and meta-analysis. *J Epidemiol Community Health* 1996;50: 481–96.
- 2 Goldbeck-Wood S. Researchers claim abortion increases risk of breast cancer. *BMJ* 1996;313: 962.
- 3 Michels KB, Willett WC. Does induced or spontaneous abortion affect the risk of breast cancer? *Epidemiology* 1996;7: 521–28.
- 4 Seglen PO. Causal relationship between article citedness and journal impact. *Journal of the American Society for Information Science* 1994;45:1–11.