Twenty years young

Twenty years ago, there was no scholarly discipline of rural generalist medicine, and there was no dedicated place to publish such literature in Canada. In response to such need, CJRM was started 20 years ago. Since then, we have created a go-to space for rurally relevant scholarship. CJRM is open to all at no cost online, and, by our quality, we have earned our right to be indexed in Index Medicus.

The audacious idea of starting our own journal came to John Wootton in 1994. It fell to him to become our inaugural scientific editor, and he convinced Suzanne Kingsmill to become the associate editor. The editorial board consisted of other notables, including Gordon Brock, Stuart Iglesias, Robert Martel, James Rourke, Jim Thompson and Carl Whiteside.

We continue to publish our “Occasional” practitioner series, which addresses the issues of rural generalist physicians who have little experience with the rare conditions they face, but are both capable and obliged to stretch a bit to meet patients’ needs. I recollect the seminal article by Keith MacLellan, “The Occasional Burr Hole,” by which someone with an epidural bleed might be saved if you have but the courage.

The themes in CJRM of courage and meeting the needs of the rural population are also highlighted in the concern for women’s health. Women in rural areas get pregnant too, regardless of where specialists want to practise. CJRM has published definitive literature reviews and policy papers on rural maternity care, including on training rural generalists to perform cesarean deliveries.2

I feel particularly proud of the issue we dedicated to Aboriginal concerns (Fall 2014). In this issue, we collected diverse, original material on pneumonia, the evolving nature of narcotic use in northwestern Ontario and the Aboriginal curriculum of the Northern Ontario School of Medicine.

CJRM has published multiple articles on the lived experience of rural physicians. This body of work is a virtual treasure trove of information that may have been too eclectic to be published elsewhere.

There have been obstacles along the way. Most recently, CJRM is facing the twin challenges encountered by the entire publishing industry: dwindling advertising revenue and a readership that has moved online. We have been offering the option of electronic subscription since 2010, and we will soon be moving to an electronic distribution, with only 1 print version annually.

Whatever the future brings, we plan to continue the work of building the knowledge base for rural medicine.

REFERENCES