



Therapy – validation of hybrid-access publishing in medicine

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Open access to primary literature is reshaping the scientific technical and medical (STM) publishing landscape. Initiatives such as BioMed Central and the Public Library of Science have arisen in recent years to challenge conventional publishing models, first in biology and more recently in medicine. Whilst the implications, advantages and drawbacks of open access publication continue to be debated widely, it remains clear that, where publishers do add value, they will need to cover costs, and more, in order to survive. This tenet is widely accepted, and it is our belief that a significant differential in publishers' added value exists between the publication of original research data and that of reviews, commentary, news and analysis. There is a huge need for such added-value synthesis, addressing as it does the explosion of original research findings entering the literature (by whatever publishing model). This need for diversity of content is leading to the emergence of new hybrid models in STM publishing.

Hybrid models enable publishers to offer a mixture of 'free' and 'fee' material, and the format varies widely between publishing organizations. This in itself may present difficulties for librarians in terms of management of variations of free backfiles, specific issues or individual articles. Nevertheless, with diverse models emerging to support the publication of high-value content, we may need to learn to live with a diversity of access options. Not only are different access models available, but access models to the same publication(s) may change over time due to changing circumstances. For example, after several years of free online access, the *BMJ* was driven to curtail the initiative because of changes in the commercial environment.

Therapy draws upon funding related to the added-value content elements, in terms of reviews, commentary and analysis to support the publication of original research within the journal. By controlling the ratio of added-value content to original research information, we believe we have a sustainable platform to offer authors the opportunity to contribute their research for dissemination without charge on a global basis. At the same time, we can offer high-value commentary on topical issues in medicine together with assessment of new therapeutic agents and approaches, with industry-leading standards of peer review and publication time, on a conventional subscription or pay-per-view basis.

This issue sees the publication of our 670th page within *Therapy*. We are delighted to have been able to offer this critical mass of content in such a short space of time since our launch in September 2004. Any new publishing initiative is likely to be met with some nervousness by authors who, justifiably, seek the best possible forum for publication of their research findings. We have been delighted, therefore, with the response of the clinical community in contributing to this venture, and we have now established a steady flow of original research manuscripts for review through the editorial office.

The level of interest shown by authors has been very rewarding, and I would like to thank our Senior Editors – Greg Lip and Joseph Jankovic, Associate Editors, the Editorial Board and contributors for their full support in the development of *Therapy*. We believe this early success provides ample validation of at least one hybrid publishing model in a new environment of access to information in medicine.

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