Walter Somerville: a tribute

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It is my privilege to join in this tribute to Walter Somerville who has capped his career by his outstanding achievements as editor of the *British Heart Journal*, the distinguished emblem of British cardiology. Notwithstanding his reputation as a clinician, investigator, teacher, and scholar, I believe that Walter's character and sense of duty are the basis of his success as an editor.

My association with Walter dates back more than 10 years. We would meet at the annual meetings of the American College of Cardiology, where I considered Walter and Jane Somerville to be unofficial ambassadors of the British Cardiac Society, of which he later became president. I was very pleased when Walter informed me in 1972 that he had been invited by the British Cardiac Society to succeed K Shirley Smith as editor of the *British Heart Journal*. It was then that I became aware of Walter's character and devotion. He felt honoured by the appointment but had many doubts about whether he had the ability to be a successful editor (though he had already served as assistant editor for 12 years), whether he could maintain the high standards and reputation of this Journal, whether he could allocate enough time and energy from his busy schedule in his hospital, medical school, and rooms to carry out his job and, most important, what effect his duties as editor would have on his family responsibilities as husband and father.

I did not paint a rosy picture for Walter. I tried to give him a factual description of the life of a busy editor and touched on the many problems he would encounter with authors, publishing and editorial staff, reviewers, and readers of the Journal. I noted ruefully that they would take up a substantial amount of his work schedule seven days a week. I stressed his role in making decisions on acceptance or rejection of submitted manuscripts based not only on the reviews by expert members of his editorial committee and outside reviewers, but also on his own innate knowledge and expertise as the editor. His decisions would shape the character and image of the Journal and it would be his responsibility to maintain its high standard of scholarship and medical writing. Finally, I emphasised the necessity of assuring co-operation from the members

of his family since they would bear the brunt of his busy schedule and loss of time and company.

Nevertheless, I urged Walter to accept the appointment because these problems and sacrifices would be outweighed by the sense of achievement in editing a successful journal respected all over the world by the cardiology community. It gave me great pleasure when he told me that he would accept the position and to see his name listed as editor in the January 1973 issue of the *British Heart Journal*.

It is evident that Walter has done an outstanding job as Editor and has maintained the Journal's high standards for original clinical research, medical writing, and scholarship. Since my fledgling years as a clinician and editor, I have always looked upon the *British Heart Journal* as a model of medical journalism and as a source of the latest advances in cardiology. American authors have always vied for acceptance of their papers by the Journal, considering such acceptance a mark of achievement. It is still a journal of first choice for submission of important papers and I believe Walter has maintained its high reputation.

An important attribute of a good editor is his selection and choice of papers for publication. The increasing number of submitted papers has required a high rate of rejection which does not endear the editor to authors and investigators. Walter has a reputation for being a good "rejector". Several colleagues have informed me they have received the nicest rejection letters from the *British Heart Journal*, and that reading Walter's explanation of why their papers were rejected has eased their disappointment and they are ready to try again. His reputation has even spread to his household. Jane Somerville relates that when Walter is working on manuscripts in his study, his family says that he is in the "rejector room".

I have been fortunate in being able to see Walter regularly at the annual meetings of the American College of Cardiology, of which he is a Fellow, where he has honoured us by his presence as a distinguished guest at the meetings of the editorial board of the *American Journal of Cardiology*. He took part in our wide-ranging discussions and shared

experiences concerning editorial matters pertaining not only to our Journal but to the *British Heart Journal*. His charm, élan, elegance, and good humour helped to set the tone for our meetings. To quote from a recent note from Walter, our last "editorial meeting was a glass of champagne". I hope that Dennis Krikler, Walter's eminent successor as editor, who also attended our last meeting, will continue this tradition of British-American collaboration.

Walter's collaboration may have been a form of reciprocity. After the second world war he continued his medical training at several hospitals affiliated with Boston University and Harvard Medical School. I like to feel that American medicine contributed a little to his subsequent distinguished career in cardiology.

Our most recent meeting was in Houston, in March 1980, when we were joined by Elliot Rapaport, editor of *Circulation*, in a "Meet the experts" session on the topic of "How to get your paper published". During the very intense and exciting discussions with the audience, Walter outlined his philosophy of the attributes of a good scientific paper, one that would be considered acceptable by the three pre-eminent journals that the three editors represented. To paraphrase Walter, there must be an original idea for study; the results and information should be collated accurately; the paper should be organised in a logical order and should be in good English. Above

all, it should be as brief as possible, compatible with clarity, understanding, and readability. Following this prescription has made it possible for Walter to become the great editor that he is. His editorial philosophy should be a guiding light for all potential investigators and medical writers.

After this "experts" session, I received an entertaining letter from Walter which points to his continuing concern about the misuse of the English language in medical writing. The letter deals with the recent spread of the use of "dysrhythmia" in place of "arrhythmia". I am pleased that both Walter and Dennis Krikler have rejected "this badly derived neologism by someone with an unfortunate smattering of classical education". Walter further states "if one of our editorial objectives is better communication, would we not serve it by asking authors to use only arrhythmia to describe disorders of rhythm and allow dysrhythmia to undergo verbal atrophy of disuse?" Certainly this is excellent advice that we should all heed.

And so, dear Walter, I salute you but ask that you do not rest on your laurels yet, for cardiology needs you; I and many others intend to call on you for guidance, advice, and exchange of ideas. I will always treasure your friendship and personal kindnesses to me.

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