

Many of the statements made in those articles, and in articles referenced therein, reflect my opinions as well. One of the cited works was an editorial that I liked very much and would refer anyone to it who is interested in this topic.³ Among other things, this editor said: "What I find most disturbing is the uncritical acceptance of the 'refereed is best' philosophy in a profession that places such a premium on validation of all its processes. Validation, within this context, would call for data proving that the refereed journal does indeed serve its readers better than the non-refereed one. Is there objective evidence, for instance, that the content of the refereed journal is more informative, more useful, more responsive to readers' needs and interests (the ultimate test) than the nonrefereed one? To the best of my knowledge, there is no such evidence; more appalling, no one seems even to have looked for any. The refereed journal, for many, is taken as an article of faith, in the interests of academic respectability."

In the two articles mentioned in Ms. Pirwitz's letter the discussion is about "refereed" journals.

I have some disagreement with the use of the word "refereed." To me this implies two antagonists (Author versus who? Editor?) and that the referee is assuring that the rules of the combat are observed.

In the editorial I quoted above,³ Editor Lewis discusses the fact that the concept was "initially characterized as peer review." Subsequently this concept has changed so that the reviewers are thought to be "authorities." Certainly many of those people who are reviewers are considered experts. It is interesting to speculate on why they are considered experts. Could it be because they are widely published in "peer review" journals?

In examining this issue Drs. Clayton and Boyle sent letters to 30 journals.¹ The editors of these journals themselves were to respond as to whether the journal was refereed or not. Of the 25 which responded, 23 said they were refereed journals. It was said that, "the editors reported by a two-to-one ratio that exceptions are not made to the stated review procedure." However, this means that about one-third of the so-called refereed journals sometimes published articles that were not refereed.

FIGURE

**VANDERBILT UNIVERSITY
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INFORMED CONSENT FOR RUBELLA IMMUNIZATION**

Rubella (German Measles) is usually a mild illness, but when a pregnant woman gets the disease serious malformations can occur in the baby. To prevent this, Rubella virus vaccine has been developed. Because it is a live virus it should not in any circumstances be given to a pregnant woman. The woman should also absolutely not become pregnant within 3 months following the injection. If she did become pregnant during this time, the baby could get the disease and the resulting birth defects. The vaccine should also not be given to anyone with an altered immune state (ie, leukemia treatment with steroids), a severe febrile illness (fever), or hypersensitivity (allergy) to vaccine components.

Side effects which the person receiving the immunization should be aware of include joint pain and inflammation which may begin 2 to 10 weeks following the injection. This generally may last for long periods of time. No permanent joint problems have occurred.

I certify that I have read the above and understand the potential dangers to the fetus if I am pregnant and have taken appropriate measures to prevent pregnancy.

Date _____ Results of HI antibody titer _____

Date of Immunization _____

Date of last menstrual period _____

Signature _____

Witness _____

On the other hand, the two journals who said they were not "refereed" would probably have been called "refereed" by others. "These two editors excluded their journals because of the decision-making practice that follows the review by experts."

In the article by Professors Swanson and McCloskey, they mailed 135 questionnaires to journals. There were 100 usable responses but only 49 were nursing journals. Of these, 46 responded as to whether the journals were refereed or non-refereed. Thirty-four (74%) replied that they were refereed.

Although these articles do provide some information as to whether certain journals are refereed, from my viewpoint this designation is still not very useful. The editors of the journals determined and provided the information on whether their journals were refereed or not. If one is going to look at the journals, I would have preferred to see some objective standards that were applied by an outside, impartial observer to the process by which a journal selects articles. Then those journals which met those objective standards applied by an outside, impartial observer might then be said to be a "refereed" or peer review journal.

An interesting Letter to the Editor which has just appeared touches on this subject in passing.⁴

I think it is a mistake to focus on the journal. I still think that one cannot, and should not, evaluate the quality of an article based on the journal in which

it appears. This is illogical. I think the emphasis and analysis should be on individual articles. Each article should be evaluated on its own merits.

ACKNOWLEDGMENTS

I would like to acknowledge the help provided me by Mrs. Lynne Turman and Mrs. Carol W. Boyd in locating the references and articles mentioned above.¹⁻³

REFERENCES

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Rubella Vaccination Program for Employees

To the Editor:

We at Saint Joseph Hospital are considering the adoption of an obligatory rubella vaccination program among our employees. Some of the issues that have

arisen are the following:

1. Review of applicable state and local statutes and regulations.
2. Wording of informed consent forms that specifically address potential side effects.
3. Questions of potential liability arising from either hospital administration of the vaccine or the hospital requirement of immunization as a condition of employment.
4. Adequacy of present hospital liability insurance coverage.
5. Possible applicability of the state worker's compensation law to any claim that arises.
6. Potential religious objections that might be raised requiring vaccination.
7. Employees' sick days with regard to any reaction to the vaccination.

We would certainly appreciate the use of any information that you might be able to send us concerning these issues.

Mark Vialpando
Administrative Resident
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The preceding letter was referred to William Schaffner, M.D., for his reply.

I congratulate the infection control team and administration of Saint Joseph Hospital in their commitment to provide a rubella control program for the benefit of their patients and employees. Hospitals across the country have recognized this as an important aspect of their infection control efforts.

Hospital rubella vaccination programs have potential medicolegal ramifications, especially *obligatory* programs such as the one proposed. Many of the issues raised in the letter are of this type. Adequate responses are dependent on local circumstances and are best addressed by the hospital's attorney. Indeed, the American Hospital Association has recommended that the hospital's legal advisors be consulted before a rubella vaccination program (voluntary or obligatory) is initiated.

At our hospital, potential vaccine recipients are counselled individually by nurse practitioners in our Occupational Health Service regarding the benefits and risks of the vaccine. If they elect to receive the vaccine, employees sign the

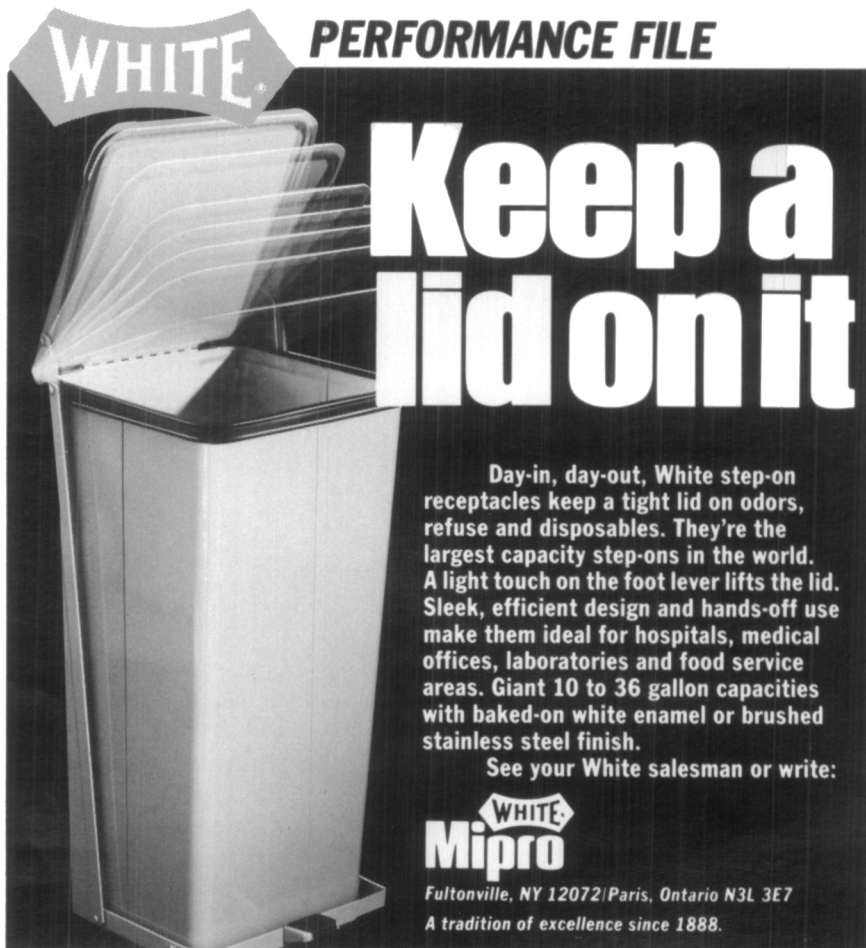
consent form (Figure).

All vaccination programs of which I am aware permit individuals to be exempted for reasons of religious belief.

The vaccine currently used in the United States is quite safe. Although arthralgia and arthritis occasionally result from rubella vaccine administration, this now is a low-frequency event and has not occurred in our program. Should this complication arise and oblige the employee to be absent from work, we would not charge this time against the employee's "sick days."

A final thought: one of the characteristics of infection controllers is their cheerful willingness to share information. Denver has many hospitals with vigorous infection control programs. I am sure that if you would personally contact their infection control practitioners, the design of your rubella vaccination program would benefit from their experience.

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