

Journal stewardship: Walking the surgical editorial tightrope

JEJ Krige,  SR Thomson 

Editors Emeriti: SA Journal of Surgery

Corresponding author, email: jej.krige@uct.ac.za

The South African Journal of Surgery (SAJS), established in 1962, is the official publication of the Association of Surgeons of South Africa. As a quarterly, peer-reviewed journal, the SAJS plays a vital role in disseminating surgical research, clinical insights, and commentary relevant to South Africa and the broader continent. The journal is listed and indexed internationally on MEDLINE and locally for academic subsidy purposes on the Scientific Electronic Library Online (SciELO SA). At its helm, the editor, deputy editors, and editorial board serve not merely as administrators, but as custodians of academic integrity, scientific rigor, and editorial quality.

The role of the surgical journal editor is undergoing profound transformation. At first glance, editorial responsibility may seem straightforward: uphold international standards of peer review, publication ethics, and scientific excellence. Yet behind the scenes lie hurdles that threaten efficiency, credibility, and relevance. In an era of technological disruption and ethical complexity, editors must straddle twin roles: guardians of scientific rigor and curators of inclusive, contextually relevant scholarship. Globally, rising submission volumes, mounting pressures to publish, and threats to research integrity have intensified demands on editorial boards. For the SAJS, these challenges are shaped by regional realities, institutional legacies, and persistent healthcare inequities.

Safeguarding rigor requires vigilance against misconduct. Authorship disputes, guest or ghost authorship, plagiarism, and data fabrication remain pressing concerns. Advances in detection have helped, but algorithmically generated content – AI-assisted writing and automated data synthesis – now complicate traditional notions of scholarship and review. Conflict-of-interest management, once peripheral, is now central to credibility, particularly in large, multi-author collaborations.

Peer review remains the cornerstone of academic publishing, but reviewer fatigue poses a global dilemma. Clinicians balancing academic duties with heavy surgical workloads often struggle to deliver timely, consistent feedback. Delays and variable quality of reviews slow the editorial process, particularly where administrative support

and funding are limited, and where editorial labour is voluntary and undervalued. Added to this are the pressures of rapid publication. Authors increasingly expect swift decisions, but high-quality peer review and ethical oversight demand time and reflection. Journals are experimenting with flexible timelines and mentorship structures, echoing international calls for improved communication and transparency.

Technological and financial shifts have further complicated editorial stewardship. The dominance of metrics – impact factors, citation counts, h-indices – risks prioritising prestige over clinical relevance. Open-access publishing democratises knowledge but shifts financial burdens to authors, raising equity concerns for under-funded researchers in low- and middle-income countries. Mega-journals expand dissemination but risk diluting rigor by privileging volume over value, placing traditional journals at a competitive disadvantage. Meanwhile, predatory publishers mimic legitimate journals while bypassing peer review, eroding public trust in surgical science and siphoning submissions from reputable journals. Sustaining credibility demands more than evidence alone—it requires transparency, clarity, validation, and uncompromising ethical assurance.

In South Africa, global challenges intersect with local realities. The SAJS must balance international standards with research that reflects local needs: trauma care in resource-constrained systems, rural surgical demands, neglected infectious diseases, and training models suited to African realities. Representation remains uneven, with women and rural surgeons underrepresented in authorship and leadership. Ensuring diversity in authorship and peer review is both a moral imperative and a logistical challenge, but one essential to equity and relevance.

Editors of surgical journals now occupy the nexus between innovation, integrity, and public trust. The SAJS carries both privilege and responsibility, with historical affiliations to well-funded academic institutions and symbolic weight within South African surgery. Yet in a landscape of uneven postgraduate funding and fragile infrastructure, editorial oversight requires not only intellectual discipline but also institutional and technological support. The journal must

continue to champion studies on rural surgery, trauma care, and resource-limited protocols with the same rigor afforded to multicentre urban trials.


The editorial board is committed to positioning the SAJS as a trusted destination for relevant surgical research. Priorities include strengthening editorial processes, supporting authors – particularly second or third language English speakers – improving reviewer capacity, and enhancing visibility and reach. Above all, the SAJS aims to foster clinical excellence,

innovation, and inclusivity while safeguarding the ethical standards that underpin surgical scholarship.

For the SAJS and its global peers, the evolving editorship role and responsibility now is as both sentinel and shepherd: guarding standards of academic excellence while guiding the profession toward equity, relevance, and renewal.

ORCID

JEJ Krige  <https://orcid.org/0000-0002-7057-9156>

SR Thomson  <https://orcid.org/0000-0002-9485-997X>