

Farewell to a true generalist

Grant Russell

*No man ever steps in the same river twice,
for it's not the same river and he's not the
same man.*

– Heraclitus¹

There is a flow to the work of general practice. Flu vaccines in April, allergies in October, and in January, we juggle holiday rosters, track down non-general practitioner (GP) specialists, take children to swimming lessons and try to get a bit of a break.

It is also a time when jobs change – GPs in training are starting new terms, some are relocating, and many of us are looking for new challenges. It is such a time at the *Australian Journal of General Practice (AJGP)*, with the Journal's long-term Editor-in-Chief, Professor Stephen Margolis OAM, stepping down.

Stephen could be described as Australia's pre-eminent generalist practitioner. As well as being Editor-in-Chief of the *AJGP*, he has worked as a GP in metropolitan Melbourne, rural Queensland, County Cork, Brunei and the United Arab Emirates. He has a doctorate in medicine and qualifications in general practice, occupational medicine and aeromedical retrieval. He has been an emergency department physician and spent years working with Aboriginal and Torres Strait Islander people in rural Queensland. He has been an academic, held National Health and Medical Research Council grants and led research for the Royal Flying Doctor Service in Queensland.

And he has brought all those generalist skills to the *AJGP*. As Stephen said himself, 'I've had a lifetime of clinical work, and this is a way of giving back something to the system and the community, and doing something that's of value'.²

His broad clinical background has given him insights and often first-hand knowledge

into just about any issue faced by Australian GPs. His educational background has helped authors and editors untangle occasionally complex clinical content, and his experience in governance has helped him get the best from those working for and collaborating with the *AJGP*.

The *AJGP* is both valuable and highly visible. It is widely used by GPs in training as they are building their knowledge base and seen by many as a point of reference for standards in the discipline in Australia. The Journal has a passionate and thoughtful readership, who regularly provide input, sometimes strident, on journal content and delivery.

Medical editing is one of those dark, mysterious medical arts. The editor has responsibility for all journal content. They need to follow complex international guidelines and work with the board of the parent organisation, the publisher and the team of medical editors. Readership needs to be monitored, research ethics overseen, and sometimes, the editor needs to deal with disappointed potential authors. And not surprisingly, sometimes passionate members of the GP community challenge editorial decisions.

As Chair of the *AJGP*'s Editorial Advisory Committee, I have observed Stephen and the editorial team take the Journal from strength to strength. During Stephen's time as Editor-in-Chief, the *AJGP* has changed its name, refined its format and achieved a better than 200% improvement in its impact factor (a measure of how widely journal articles are used to inform new scientific work). It continues to be widely accessed by general readers, with Google Analytics showing 2,772,100 online page views in 2022.³

The *AJGP* editorial team has never shied away from challenging topics: the 36,000 regular GP readers have,³ in the past year, read content focusing on aggression in the GP workplace,⁴ managing common skin conditions in those with skin of colour⁵

and strategies for GPs to address the effects of climate change.⁶

These articles are reflective of how working in, and training for, general practice is challenging, dynamic and ever-changing. As a flagship for the College and a guide for the profession, *AJGP* is well placed to build on Stephen's legacy. I hope that it will continue to challenge its readers, authors and correspondents and pursue its mandate of providing *relevant, evidence-based, clearly articulated information to Australian GPs to assist them in providing the highest quality patient care*.³

Through his work at the *AJGP*, Stephen Margolis has made a major contribution to the Australian community. I wish him a successful and fulfilling retirement. He will certainly continue to be a true generalist but now one that might have time to spend on some of his other passions – his family and his quest for the fastest triathlon and the best possible scale model of an 18th century ship.

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