

Why write a letter to the editor?

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INTRODUCTION

Recently we read an editorial on a topic that has been confusing to many in the nursing profession and out. There were statements in the editorial that we felt further conflated the issue. As such, we decided that it would be helpful to the dialogue on this topic if we wrote a letter to the Editor-in-Chief (LTE) of the journal, respectfully disagreeing with these statements and providing evidence to support our point of view. Our LTE was sent to the editorial's original authors for comment (2 associate editors of the journal). These comments were provided to us, and our LTE was rejected without explanation. Of course, publishing or rejecting a LTE is the editor's prerogative. However, after writing several LTEs together, this was the first time one was rejected. We respect the editor's decision (being editors ourselves) but were curious about the rationale. We respectfully queried the editor and were told it was the decision of this editor and the journal's editorial board to put forth their perspectives in their journals, and we (as journal editors) could do that too in our own journals.

This is a different interpretation of what we have always believed the purpose was for LTE. Collegial interactions have exemplified our experience despite differing opinions, such as the one in the Figure 1. In this time of online publications, this crucial form of professional dialogue may not receive the same attention it has in the past. Therefore, we decided to investigate the evidence behind LTE and the purpose they have historically served in professional discourse.

REVIEW OF THE LITERATURE

A search was conducted in PubMed and the Cumulative Index to Nursing and Allied Health Literature with the terms "letters to the editor" as the title (not article type) with no date limit. Reference lists were also reviewed for additional article inclusion. There has been little published in the last 5 years, and maybe we (nurses, authors, and editors) need to be reminded about the importance of this professional discourse. Of the 18 articles that were found and that we had access to the full text, ranging from 1981 to 2021, only two were from nursing journals, with three published since 2020. Most ($n = 17$,

94%) were editorial or opinion pieces; only one (Tierney et al.¹) was a study wherein LTE were analyzed among four otorhinolaryngology journals. All articles discussed the purpose of LTE, along with do's and don'ts for consideration by authors as well as journal editors.

DISCUSSION OF THEMES

Readership of LTE

Because LTE are generally brief, and most readers are interested in others' opinions on topics they are interested in, they tend to be well read, at least when journals were in paper form. As we have evolved to online publications, it is essential that LTE are linked to the original article so that the conversation can be viewed in context. LTE provides a voice to the scientific community at large by allowing interaction between authors and readers.^{2,3}

Purpose of LTE

In the literature reviewed, the 2 main purposes of LTE were: (1) to provide support, criticisms, opinions, or reflections; seek clarification; offer a different perspective/position; and/or stimulate debate and intellectual discussion about a previously published article in that journal²⁻¹⁸; and (2) to present brief scientific or clinical communication that does not warrant a full formal manuscript.^{10-12,14} Many journals now may have article types that align with the latter purpose (e.g., columns, departments, brief reports); as such, LTE are generally focused more on the former purpose, and may sometimes serve as a form of post-publication review.

As nursing editors can attest, finding credible and reliable peer reviewers is challenging. Whereas some reviewers may request substantial changes and be overly critical of a manuscript, other reviewers may not provide a thorough critique and have a less-than-critical lens when providing peer reviews.¹⁵ Allowing journal readers to submit LTE provides another layer of peer review, allowing for additional checks and balances of not only the original author(s) but also of the peer reviewers.

Subject: Loved the Letter to the Editor Dialogue!

Dear Editor,

I so appreciated your editorial “dialogue” in the recent journal issue. Much to think about from your excellent writing on this in the journal! Thank you both for not being afraid to tackle the hard (and important) topics in nursing!

Reader

Subject: Re: Loved the Letter to the Editor Dialogue!

Thank you, Reader,

It is always gratifying when a reader lets you know that they actually read your editorial!

Editor

FIGURE 1 Example of dialogue between the editor-in-chief and reader of a letter to the editor.

Tips

We identified several tips in how to write an effective LTE. As published letters are considered scientific articles and are indexed, the content should be taken seriously.³ First, LTE are meant to be short, concise communications, ranging from 150 to 800 words, depending on the journal. As with any other submission, authors of LTE should follow the instructions/guidelines for authors and may consider reaching out to the editor prior to submission. Next, LTE should focus on 1–3 main points that add to the discussion. Tangential comments, simply agreeing with an author, or stating limitations that have already been noted in the original publication do not add to the scholarly conversation. One of the most important tips is to remain professional, objective, constructive, and courteous; emotive language, including defensiveness, anger, and sarcasm, should be avoided.⁹ As LTE often stem from disagreements or criticisms of an original article, authors should sleep on their LTE and re-read before submission to ensure it is not overly harsh or critical.^{8,12}

Next, authors should support their statements with current evidence (not just their opinions); as such, conducting a literature review is warranted. Whereas LTE provides a venue for authors to highlight their expertise, they should avoid citing themselves too often, as an LTE is not an exercise in self-promotion.⁶ Lastly, LTE should be submitted shortly after the initial publication; the literature reviewed suggested anywhere from 3 weeks to 6 months.

LTE editorial process/protocol

Following guidance provided in the literature, editors who choose to entertain LTE submissions should allow the initial author the

opportunity to respond to the LTE. In many instances, the LTE and the initial author's reply are published in the same journal issue. However, with article-based publishing, this may require diligence on the part of editors to be sure that the LTE is also indexed so that it is electronically linked to the original article—this ensures that the conversation is visible to future scholars. Inadequately linking LTE to the original paper leads to the effect of the relevant comments not enduring. This concern was identified in 1955 by Thomasson and Stanley, noting, “Buried in scholarly journals, critical notes [e.g., LTE] are increasingly likely to be overlooked with the passage of time, while the studies to which they pertain... are apt to be rediscovered.”^{19(p611)}

RECOMMENDATIONS

As noted by Ross,⁷ a published article should not be “frozen in time.” Rather, it is the readers' responsibility to continue the dialogue within the scientific community.

Ultimately, we respect editors' decisions about whether they will entertain an LTE submission, if they choose to send it out for peer review, and if they accept or reject an LTE. In the setting of “publish or perish” we understand that some individuals may seek to inflate their publication status by submitting multiple, frequent LTE, as noted in the case study by Neghina and Neghina¹⁷; as such, editors must do their due diligence in reviewing the credentials of individuals submitting LTE.

However, based on our experiences, we recommend nursing editors seriously consider accepting LTE submissions. This aligns with the International Committee of Medical Journal Editors that recommended “all biomedical journals should have a section carrying comments, questions, or criticisms about published articles and

where the original authors can respond... The lack of such a section denies readers the possibility of responding to articles in the same journal that published the original work.”^{16(p934)} Editors of prominent medical journals also support this view.^{11,12} In 1981, Spodick also noted, “Serious journals without a letters department or with a restrictive letters department do their readers a disservice...Absence of a letters department is tantamount to declaring ‘our reviewers are final authorities.’”^{15(p1121)} Our medical colleagues are open to discussing criticisms within publications through intellectual conversations with peers, journal clubs, and LTE; as a nursing profession, we must continue to guard against restricting scholarly conversations, one avenue of which is the LTE. Indeed, nursing editors should cherish such LTE submissions, as this means the journal is being read and taken seriously.⁸

CONCLUSION

Our experience with having a LTE rejected caused us to pause and reflect on the rationale for why writing a LTE is important. Through this exercise, we uncovered numerous articles that support our recommendations that journals, if they don't already, should consider accepting LTE submissions to help strengthen the science through post-publication peer review and open up dialogue between colleagues.

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CONFLICT OF INTEREST STATEMENT

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DATA AVAILABILITY STATEMENT

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