

Clinical Biomechanics is 35 years old: Protecting and growing a legacy

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- **Amit's foreword:**

Clinical Biomechanics, which had turned 35 this year, is among the oldest biomechanical journals. Since its founding by Professors Kim Burton (United Kingdom) and Paul Brinckmann (Germany) in 1986, when I was still in high school, the journal had served the growing biomechanical community in disseminating the latest research and working with international and national societies worldwide to promote this field of science. By the time that I became a graduate biomedical engineering student at Tel Aviv University, the journal was already one of the most reputed sources in the field and it kept its standing as I climbed the academic ladder to the full and chair professor level. Hence, the journal with its powerful standing in the field was a consistent presence throughout my career, and it is in *Clinical Biomechanics* where I published some of my most important papers. Accordingly, when I took over from Kim as Editor-in-Chief of *Clinical Biomechanics*, about 5 years ago, I understood what a great privilege it is to continue this legacy and not only to protect it, but to grow it further, as our community expands and becomes more diverse. The diversity is both geographically and in terms of new and emerging fields relevant for *Clinical Biomechanics*. For this special occasion of the 35th anniversary of the journal, I had asked people who were there from the very beginning and whose names appear on the Editorial Board page of Issue no. 1 in Volume no. 1 of the journal, to provide their perspectives on how being one of the founding fathers of the journal had impacted their career and on the lessons they had learned that can serve the biomechanics community going forward. Their views are provided below.

- **Kim's brief history of *Clinical Biomechanics*:**

When my colleague, Jon Thompson, and I decided to launch a new journal, the vision was so much less than what actually happened. We envisaged a small journal to serve the clinical musculoskeletal professions - osteopathy; physiotherapy; chiropractic - we chose the name *Clinical Biomechanics* to appeal to those professions. We knew that we needed scientists from other disciplines on the editorial board to advise us. Fortunately, a few international scientists shared our simple vision and agreed to join us on our first steps. Interestingly, along with Jon and I, most of those were clinicians, not biomechanists. The key to the biomechanics community was Prof Paul Brinckmann, who kindly agreed to serve as Consultant Editor from the very beginning, and without whom the journal would not be here. The next step was to find a publisher. John Wright & Sons in Bristol UK agreed to help us. But, they wanted a guarantee of sufficient subscribers, so we negotiated for *Clinical Biomechanics* to be the official journal of the British

Osteopathic Association for a few years. It soon became obvious, though, that the majority of submissions were coming from the biomechanics community, not the musculoskeletal professions: we had, it seems, found a gap in biomechanics publishing, and all those scientists who focused on the clinical relevance of their biomechanics research now had a journal they could call their own. As the journal grew, our publisher changed, finally finding a great supportive relationship with Elsevier. Thirty-five years on, clinical relevance remains the core focus, as indeed it should.

For me, the first 30 years (until Amit took over as Editor-in-Chief) were an amazing journey of discovery and enjoyment. I quickly had to learn all about science editing, how to develop the editorial board, and how to negotiate with publishers. Back then my office was awash with paper manuscripts and envelopes going back and forth across the planet. The world changed and the journal changed with it to take advantage of email and online systems for greater diversity and publishing efficiency. The Editor often gets the credit, but in reality nothing happens without a great team. There is the office team (Debbie McStrafick was always amazing and, I gather, still is!); there is the scientific team (I was most fortunate to have Paul helping at every turn, along with a host of scientists around the world); there is the publishing team (without them there is no dissemination). Many of those who served on the Editorial Board became firm friends, from whom I learned so much, not just in terms of my biomechanics education but also on a cultural level. Editing a journal is fun and rewarding on many fronts and, in my case, widened my life beyond my wildest dreams. It was an absolute privilege to be trusted to run your journal for all those years: thank you for letting me play in your yard!

- **Mark's memories:**

I remember meeting this enthusiastic young guy at a discussion in London who was developing a new journal and was looking to build an editorial board – how could anyone refuse! Kim's vision of an international journal dedicated not just to biomechanics but to clinically relevant biomechanics was exciting as my research was and continued to be in collaboration with medical practitioners wherever I was during my career. Those large envelopes with manuscripts arriving in the post were always an excitement as they were a chance to see who had been doing what new innovative things! I have to admit that once we transitioned into electronic submissions the buzz at receiving new papers wasn't quite the same. But that may have been because the number of journals increased and so did the number of requests for reviews! However, my heart belonged to *Clinical Biomechanics* and I always looked forward to seeing its new submissions.

Being a member of the Editorial Board was a great privilege as it provided a window into the latest research and research methods from around the world which I'm sure helped me to develop my own understanding over the years of what good research looks like. It also provided an international network of like-minded researchers who became friends and the occasional collaborator over the years. In the later years of my tenure on the Board I did reduce the amount of reviews I undertook but Kim used me to render another opinion if there was disagreement between reviewers. Understanding the reasons for the differences of opinion was a fascinating exercise which caused me to reflect on how authors would sometimes not communicate what they had done well and leave the reader to infer information. I think this is often because the authors are so involved in their work they don't appreciate that factors that are obvious to them

are not obvious to others! There is a lesson here in what good communication of research requires.

It is interesting to reflect that *Clinical Biomechanics* has been a constant companion, source of knowledge and go to reference throughout my career. I am sure it will remain an exceptional journal as the next generation lead it forwards and I wish *Clinical Biomechanics* well for the next 35 years!

- **Alan's reflections:**

The advent of *Clinical Biomechanics* in the 1980s, was to me, the icing on the cake of what seemed to be the dawn of a golden age of understanding for the musculoskeletal professions, whose practice seemed to depend so much on biomechanics. As a chiropractor with a fascination for explanatory research, I felt privileged to be invited to join the first Editorial Board. The multidisciplinary focus of the journal added to my joy and anticipation as I looked forward to progressive enlightenment through a fusion of knowledge from a range of clinicians and bio mechanists. Unfortunately, it did not work out that way, as most clinicians cannot handle added biomechanical complexity when layered upon the rest of the Biopsychosocial Model of health that emerged soon afterwards. Practitioners seemed to have a greater desire for instruction in what to do and what would happen than for explanation of the mechanisms in play. Nevertheless, my memories of the early days of *Clinical Biomechanics* are far from depressing. As real bio mechanists like Paul Brinckmann, Mark Pearcy and Amit himself brought the full force of the science in biomechanics squarely before us, I came to understand what we were up against! However, instead of suppressing interest in the clinical aspects of biomechanics, this was followed by a flood of submissions to the journal that never abated. Thanks to the energy and rigor of Kim and Debbie, the Journal was up to it and once published, these have helped to bring biomechanics into sharper focus for the wider audience that the journal serves. Thank you for letting me be a part of it!