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SPECIAL ARTICLE

Rafael Casas Morales Oration

Writing surgery: History, memory and legacy of surgical journals

Escribir la cirugía: Historia, memoria y legado de las revistas quirúrgicas

Mónica Bejarano, MD, MSc, MACC

Department of Surgery, Fundación Valle del Lili; School of Health Sciences, Universidad ICESI, Cali, Colombia. Editor, Revista Colombiana de Cirugía.

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Introduction

To the President and past presidents of the Colombian Surgical Association, members of the Board of Directors, mentors, colleagues, future surgeons, and friends:

It has been a source of great pride for me and my family to receive the honor the Colombian Surgical Association bestows upon me today.

For three decades, I have had the privilege of pursuing two activities that have defined my professional life: surgery and research. That is how I came to be involved with the Colombian Surgical Association. I remember—as if it were last week—that day in 2001 when I was on call in the emergency department and received a phone call from Dr. José Félix Patiño; he wanted to speak with me about an article I had submitted to the Journal... It felt as though a god were calling me.

Then, in late 2007, during another phone conversation, he expressed his wish for me to join the Journal's editorial team as an associate editor. Since then, I have held a position less visible than the operating room or the emergency department: that of an editor of a scientific journal.

That experience has allowed me to observe the evolution of our profession in this country from a unique perspective.

Keywords: scientific communication and dissemination; scientific publication; journal article; electronic journals; history of medicine; general surgery.

Palabras clave: comunicación y divulgación científica; publicación científica; artículo de revista; revistas electrónicas; historia de la medicina; cirugía general.

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Corresponding author: Mónica Bejarano, Carrera 59 # 11B-56, Cali, Colombia. Tel.: +57 3155574039. E-mail: monicirugia@gmail.com
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We surgeons tend to admire those who perform innovative procedures, develop new techniques, or lead transformations in patient care. Yet, we rarely pause to consider how that knowledge manages to survive the passage of time.

Surgery progresses because someone operates. But surgery endures because someone writes.

So today, I would like to invite you to explore a little-known story: the history of surgical journals and the role they have played in shaping our profession.

When knowledge died with the master

For centuries, surgical training relied on direct transmission from master to apprentice. Knowledge was localized, and the experience accumulated over a professional lifetime could vanish upon the death of the individual who possessed it.

The advent of scientific publications radically transformed this reality. For the first time, it became possible to share clinical observations, surgical techniques, and outcomes beyond the confines of a single institution or country. Scientific publishing allowed knowledge to shift from individual possession to collective heritage. Since then, the history of surgery can also be read as the history of its publications; thus, journals became the written record of surgery.

History of surgical journals

No one knows when surgeons first felt the urge to write about their craft, but the ***Edwin Smith Papyrus***—an Egyptian medical document dating back 3,500 years—is the oldest known work dedicated to surgical treatment. Imhotep (2600 BC) is said to be the original author of the papyrus, although evidence suggests that the copy of the original text found in Luxor was transcribed around 1600 BC by scribes (not physicians) from different eras (Figure 1).

It details 48 cases of war wounds, describing—in the second person—anatomical observations, examinations, diagnoses, treatments, and prognoses with exquisite detail. Given the vast amount of information it contains, it is presumed to have been used by Egyptian surgeons in their daily practice or as a teaching manual for surgeons instructing their students [1].



Figure 1. Edwin Smith Papyrus. Photographs of the copy of the original text found in Luxor, Egypt.

Source: United States National Library of Medicine.

Arguably the first and oldest scientific journal is ***Philosophical Transactions***; its inaugural volume appeared on March 6, 1665, as a personal project of Henry Oldenburg (1619–1677)—the first secretary of the Royal Society of London and the journal's editor (Figure 2). Part journal and part newspaper, *Philosophical Transactions* was far more than either. It featured letters, book reviews, and descriptions of experiments, but—as a key innovation—it also allowed individuals to pose their own questions about the world around them, breaking free from ancient dogmas. It marked the beginning of scientific research as we know it today [2].

Specialized medical journals soon appeared, although most were short-lived and had limited intellectual or professional impact (Figure 3). The first was titled ***Nouvelles Découvertes sur Toutes les Parties de la Médecine*** (New Discoveries in All Branches of Medicine) and was published in Paris in 1679 in the vernacular; it was the brainchild of Nicolas de Blégny (1652–1722), an enterprising rogue who was also an apothecary, surgeon, pill vendor, venereologist, court physician, truss-maker, chemist, obstetrician, and frequent defendant or litigant in court. Faculty members loathed his populist appeal and succeeded in having his license to publish the journal revoked, forcing him to move the publication abroad. It survived for just over six years, during which time it went through six different titles and two publishers; in a final indignity for a man of Blégny's radical sympathies, it ended its run in the language of learned medicine: Latin [3].

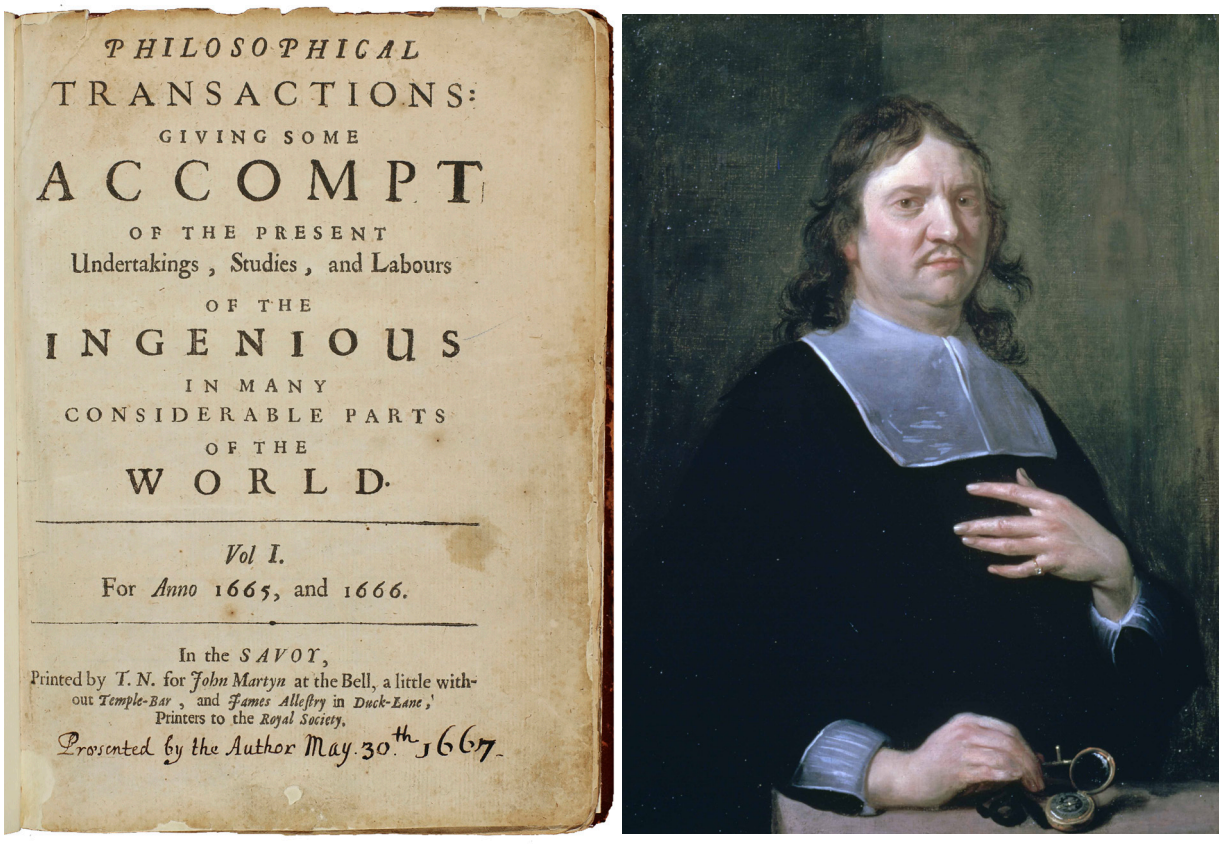

PHILOSOPHICAL
TRANSACTIONS:
GIVING SOME
ACCOMPT
OF THE PRESENT
Undertakings, Studies, and Labours
OF THE
INGENIOUS
IN MANY
CONSIDERABLE PARTS
OF THE
WORLD.
Vol I.
For Anno 1665, and 1666.
In the SAVOY,
Printed by T. N. for John Martyn at the Bell, a little without Temple-Bar, and James Allestry in Duck-Lane,
Printers to the Royal Society.
Presented by the Author May. 30th. 1667.

Figure 2. First volume of *Philosophical Transactions*, published in 1665, and its first editor, Henry Oldenburg. Source: Wikipedia.

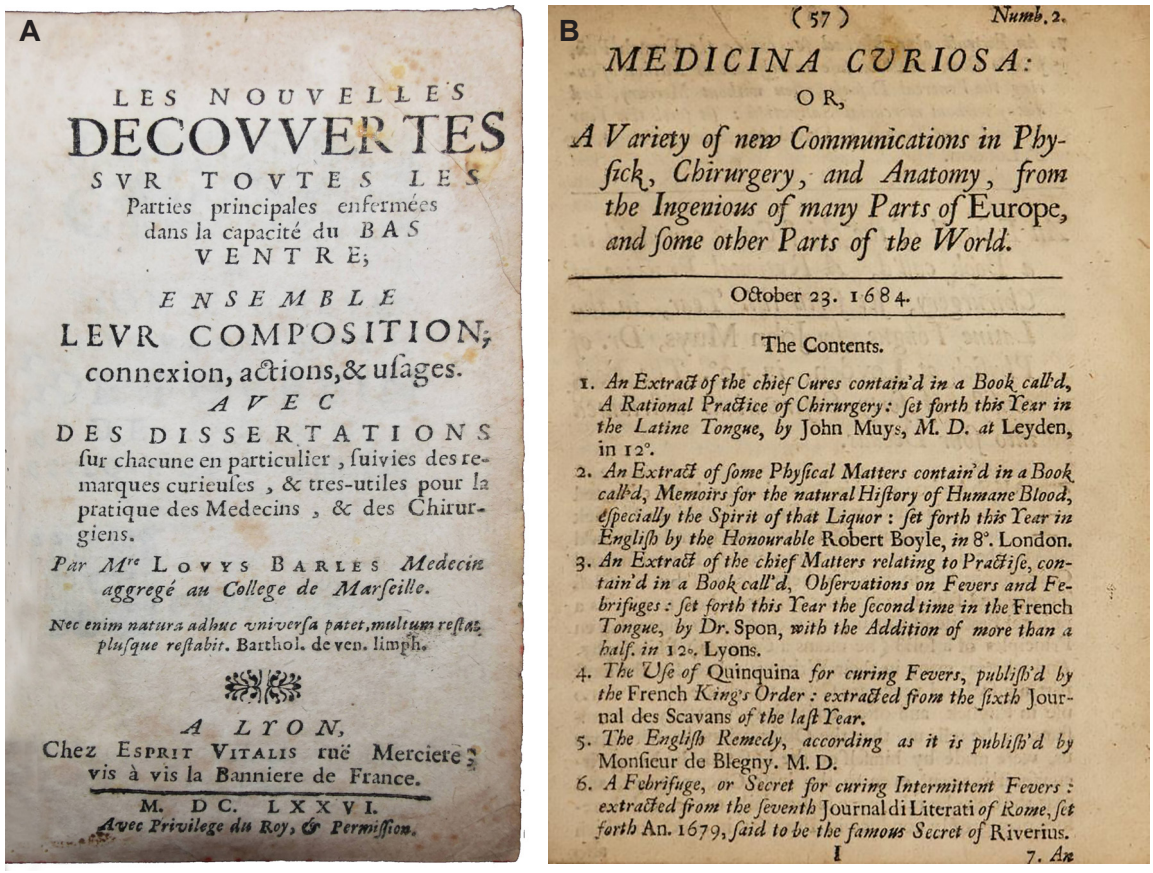


Figure 3. First medical journals. **A.** *Nouvelles Découvertes sur Toutes les Parties de la Médecine*. **B.** *Medicina Curiosa: or a Variety of New Communications in Physick, Chirurgery, and Anatomy*.

Sources: Gallica, *Bibliothèque nationale de France*. United States National Library of Medicine.

The first medical journal in English, ***Medicina Curiosa: or a Variety of New Communications in Physick, Chirurgery, and Anatomy***, published only two issues between June and October 1684—a fate shared by the other eight medical publications that appeared in Europe during the seventeenth century.

Several journals from the late eighteenth century were largely the products of medical elites operating within an unregulated medical marketplace; consequently, they were concerned with distinguishing themselves from the medical underworld, a group they defined as charlatans, impostors, empirics, and ignorant purveyors of secret and dangerous remedies.

Publication represented a way to open up the field of medicine, report new results or observations, and subject them to peer review. The collective—and generally cooperative—activity that produced many of the medical periodicals of the era can be identified as a key attribute of emerging medical professionalism.

Modern medical journals first appeared in the 19th century. These journals were of general interest and did not separate medical topics from surgical ones. However, both the ***New England Journal of Medicine and Surgery*** (published in 1812) and ***The Lancet*** (published in 1823) were founded by surgeons: John Collins Warren (1778–1856) and Thomas Wakley (1795–1862)[4] (Figure 4).

Journals as community builders

We often think of journals simply as collections of articles. Yet, there are much more than that.

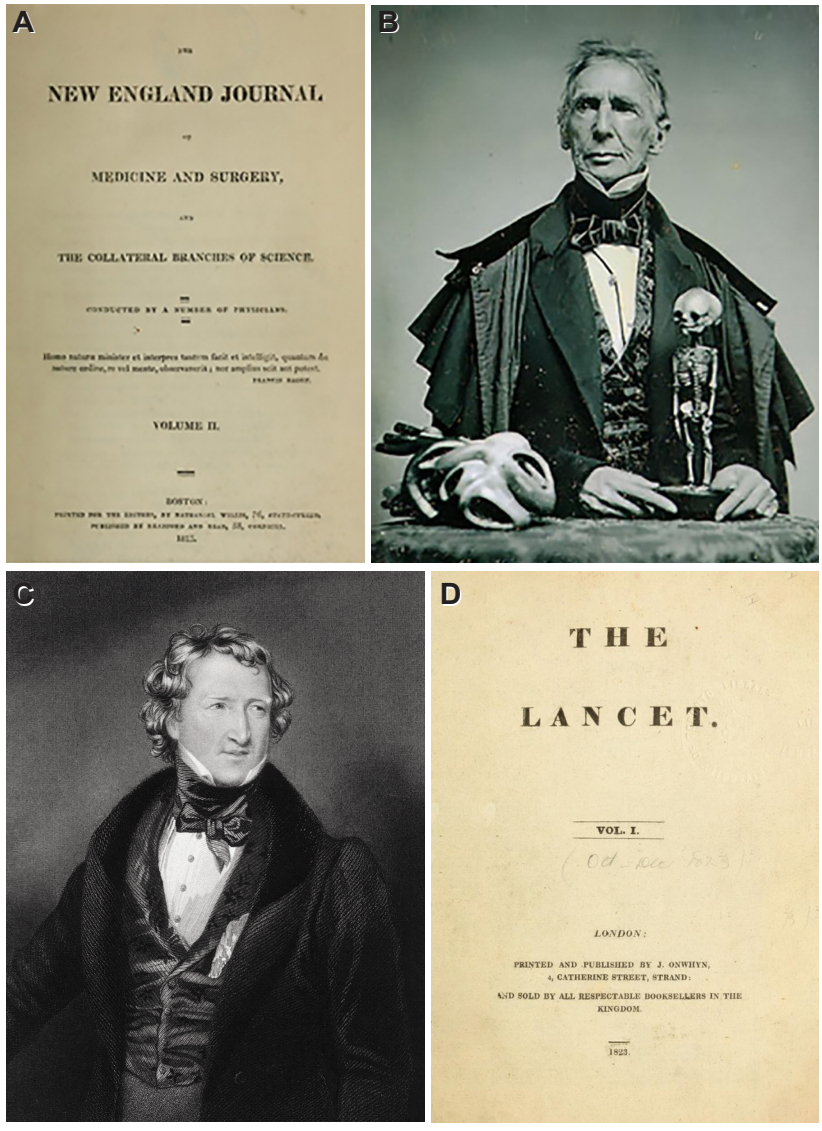


Figure 4. A. First issue published of the *New England Journal of Medicine and Surgery*. **B.** John Collins Warren. **C.** Thomas Wakley. **D.** First issue published of *The Lancet*. Sources: New England Journal of Medicine, internet archives. United States National Library of Medicine.

Journals serve as the space where a scientific community engages in a dialogue with itself. Their pages record the concerns of each era. Which diseases were considered priorities? Which techniques sparked controversy? What issues weighed on the minds of residents? What challenges did hospitals face? The answers lie within them.

A case in point is the situation in early 19th-century Boston—a rapidly growing urban center that lacked its own medical journal, even though much of the region's medical knowledge and practice was considered unique to the area. The prospectus for ***The New England Journal of Medicine and Surgery, and the Collateral Branches of Science***—a call for papers issued

in late 1811—outlined the objectives of John Collins Warren (1778–1856), the renowned Boston surgeon who, thirty-four years later, would perform the first recorded operation using anesthesia; James Jackson, the founder of Massachusetts General Hospital; and a small group of distinguished colleagues:

> "*The publishers have been encouraged to attempt this publication by the view that the taste for medical literature has grown considerably in New England. New methods of practice, time-honored ones that are not sufficiently known, and occasional inquiries into common practices—when thus shared among our medical brethren across the country—will foster a spirit of inquiry and reflection that cannot fail to yield happier results*" [5].

The Massachusetts General Hospital case records are that journal's invaluable treasure; some say they are better than Sherlock Holmes stories—filled with mystery, drama, divergent paths, and sophisticated details, leading to a true solution at the end of the long labyrinth of medical knowledge [6]. The journal's first article was *Observations on Angina Pectoris* by Dr. Warren himself [7], and that inaugural volume featured a remarkable variety of surgical techniques, including procedures for the removal of renal, bladder, and urethral stones; dilation of the male urethra narrowed by the passage of stones; ligation of iliac artery aneurysms; burn treatment; and the use of leeches for bloodletting [8].

At a time of intense debate and controversy regarding the causes of disease, the nature of therapeutics, and the basis of professional authority, the fledgling journal strove to chart a middle course. This was certainly advisable from a commercial standpoint, as endorsing any particular therapeutic system or theory could easily alienate various segments of the medical readership. Yet, this approach also established the journal's ecumenical character, grounding its early publications in a commitment to empirical observation and a skeptical view of conventional medical wisdom. As the editors explained in 1837:

> "*It has been our ambition . . . to make these pages a vehicle for useful information rather than a battlefield. . . . The Journal is, to all intents and purposes, designed to be a record of medical and surgical facts. It is the medium through which the profession can exchange views and publish the results of its experience*".

This journal survived changes in name, editor, and publisher for over a century, until it was rescued from bankruptcy in 1921 by the Massachusetts Medical Society. It is not merely a window into clinical medicine and scientific advancement; it serves as a foundation for researching the history of medicine in all its complexity, reflecting the interplay of culture, society, the economy, and politics with medical knowledge, practice, and the organization of healthcare.

Another example is ***The Lancet***, a publication that arguably should not have survived. Nothing about it seemed right. It was a commercial venture founded by Thomas Wakley (1795–1862)—a surgeon with no established reputation and a center-left agenda—operating within a conservative profession [3].

Wakley named it after the surgical instrument known as a lancet—a term that also refers to a pointed arched window, symbolizing "letting in the light of wisdom". He apparently intended to eradicate the corruption and various forms of fraud then rife in London's hospitals and medical schools, as well as to enlighten both the general public and the medical profession by reporting on advances in clinical practice [9].

Before textbooks became an aid to medical study, students in London had to present certificates of attendance at lectures given by leading physicians and surgeons in order to apply for examinations by medical corporations. Since these lectures were a lucrative source of income for the professors, many were reluctant to publish them as textbooks. This defined Wakley's target

audience as medical students and young doctors; consequently, he initially focused on reproducing lectures delivered by the elite consultants of London's teaching hospitals. However, this very practice alienated many of the lecturers and even led to legal action when John Abernethy, a surgeon at St Bartholomew's, challenged Wakley's right to publish verbatim transcripts of his spoken words—complete with grammatical slips, incoherent sentences, and extraneous material [10]—precisely what we would call plagiarism today.

For three-quarters of a century, *The Lancet* was a Wakley family enterprise. It remains an anomaly: a commercial journal with no affiliation to any medical or scientific organization, exerting its influence by attracting prominent contributors and fiercely guarding its independence [3].

Specialized surgery journals emerged later in the 19th century; the first was ***Archiv für klinische Chirurgie*** (now ***Langenbeck's Archives of Surgery***), published in Berlin on February 25, 1860, by renowned surgeons such as **Bernhard von Langenbeck**, **Theodor Billroth**, and **Ernst Julius Gurlt** [4,11] (Figure 5). It was established as a German-language scientific forum for the exchange of ideas among European surgeons and rapidly became the leading journal for thyroid surgery prior to World War I, serving as a focal point for the emerging discipline of endocrine surgery [12].

Revista Colombiana de Cirugía (Colombian Journal of Surgery)

With a similar history, the first issue of the journal **Cirugía** (Surgery) was launched on May 6, 1986, as the official organ of the Colombian Surgical Society (now the Colombian Surgical Association) [13], in fulfillment of the first statutory objective approved by the Constituent Assembly, in the following terms:

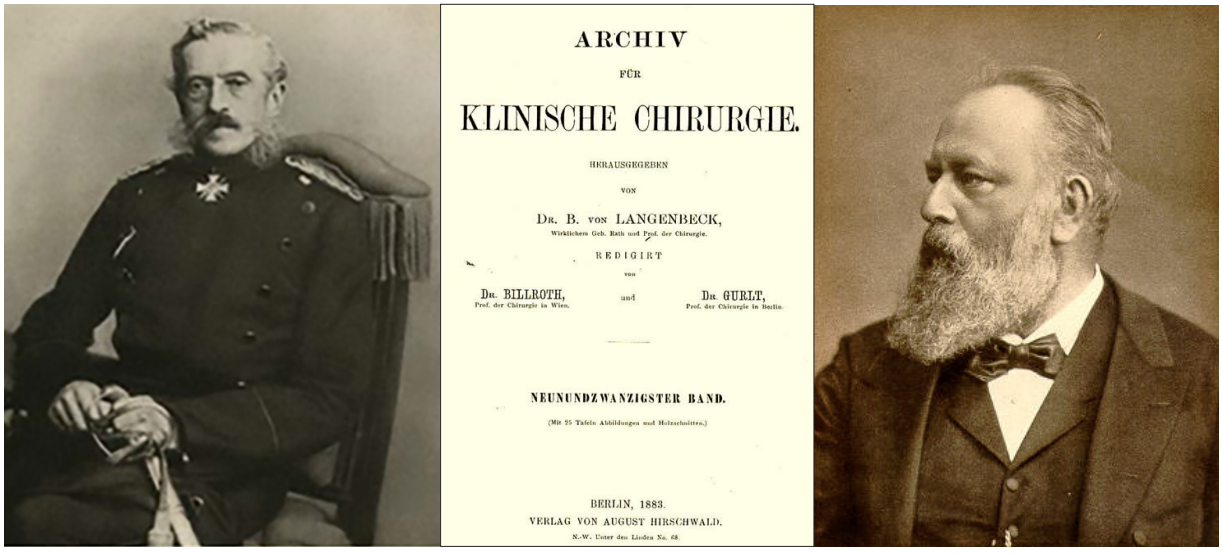


Figure 5. The renowned surgeons Bernhard von Langenbeck and Theodor Billroth, who published the *Archiv für klinische Chirurgie* in 1860.

Source: Beger HG. From Archiv für Klinische Chirurgie to Langenbeck's Archives of Surgery: 1860–2010. Langenbecks Arch Surg. 2010;395(Suppl 1):S3-S12.

"To strive to ensure that the practice of general surgery throughout the country maintains the highest ethical and scientific standards, and that such practice is also humane and inspired by a clear sense of social benefit".

Since its first issue (Figure 6)—published at a time when regional research faced structural limitations and limited dissemination channels—the journal has maintained an uninterrupted quarterly publication schedule, upholding editorial continuity and an open-access model. Its mission has been to showcase surgical output from Colombia and the region while serving as a tool for the training and professional updating of Spanish-speaking surgeons [14]. Over the past decade, there has been a steady increase in the number of articles submitted annually for the editorial process; reflecting this growth, the journal began publishing six issues per year in 2024.

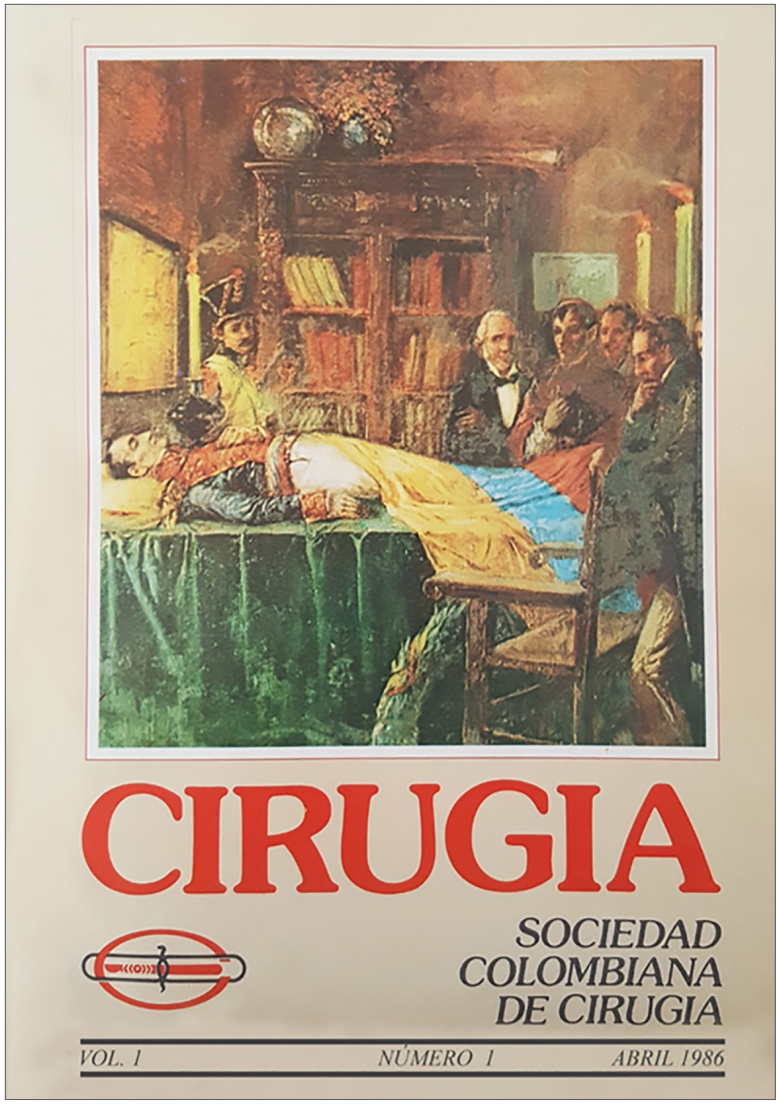


Figure 6. First issue of the *Revista Colombiana de Cirugía* (Colombian Journal of Surgery).

Source: Journal archives.

It could be said that much of a journal's history is revealed through its editorials. I once wrote that indexing is a priority because it "signifies recognition as a scientific publication that is current, reliable, original, competitive, and globally relevant, while simultaneously increasing the visibility of its content" [15]. Currently, our journal is indexed in SCOPUS, SciELO, LILACS, Latindex, SIIC, REDIB, MIAR, EBSCO, and—recently reinstated—Publindex.

From print to open science

When we review past issues, we find much more than scientific information; we find the intellectual history of a profession. Journals have helped build professional identity, a sense of belonging, and intergenerational continuity. In a sense, they serve as the collective memory of surgeons.

Indeed, were they the only source available to a medical historian, one could still glean a great deal to reconstruct this era of seismic, revolutionary change in knowledge and practice.

Recent decades have brought about an extraordinary transformation. Many of us remember print journals distributed by mail; today, we inhabit a completely different ecosystem. The digital transition has altered how knowledge is produced, distributed, and consumed. Digital identifiers, structured metadata, platform interoperability, digital preservation systems, and alternative metrics have all emerged.

International indexing has shifted from an aspiration to a requirement. Editorial quality has gained a level of importance comparable to scientific quality.

Behind every published article today lies a complex technological and editorial infrastructure that ensures visibility, traceability, transparency, and preservation. Scientific publishing has evolved into a specialized discipline—a transformation that has enabled Latin American journals to meet increasingly high international standards.

The **Revista Colombiana de Cirugía** (Colombian Journal of Surgery) ventured into the realm of digital journals in 2018. A year later, it migrated to the Open Journal Systems (OJS) management platform, providing the journal's website with a new platform and a matching design. The journal began registering Digital Object Identifiers (DOI) and joined the Initiative for Open Citations (OC)—which promotes the unrestricted availability of open citation data—by ensuring that all its references are deposited with Crossref.

Our journal follows the recommendations of the International Committee of Medical Journal Editors (ICMJE), adheres to the Committee on Publication Ethics (COPE) guidelines, embraces the Budapest Open Access Initiative (BOAI, 2002), and is a signatory to the Declaration on Research Assessment (DORA) and the Manifesto on Science as a Global Public Good: Non-Commercial Open Access (Toluca, 2023). Through these commitments—and thanks to funding from the Colombian Association of Surgery—we have achieved "Diamond" status, a model for open-access journals that charge neither authors for publication nor readers for access.

Over the past four decades, the journal has evolved in tandem with advancements in the specialty. Every major transformation in general surgery has been reflected in our pages, which have served as a space for dialogue and the collective construction of knowledge.

The journey to our current standing has not been easy. We faced challenges inherent to professionalizing editorial operations, the need to internationalize the journal, the transition to digital manuscript management platforms, and the adaptation to global indexing standards. It is thanks to the dedication of our editorial team, the commitment of our peer reviewers, and the trust placed in us by authors that our journal has secured a prominent position. In the latest Google Scholar update, with an h5-index of 20, we rose to second place among general surgery publications in Spanish, surpassed only by *Cirugía y Cirujanos* of the Mexican Academy of Surgery.

The Latin American challenge and the role of our journals

For a long time, Latin American scientific output was considered peripheral. However, our journals have demonstrated that it is possible to achieve international recognition without losing our regional identity.

Latin American journals fulfill a mission that no other publication can fully undertake. They bring visibility to our patients, our health systems, our research questions, our educational challenges, and our social and economic realities. They are spaces where Latin America can speak with its own voice; as such, they constitute a scientific asset that we must protect and strengthen.

This year, as we celebrate the 40th anniversary of the ***Revista Colombiana de Cirugía*** (Colombian Journal of Surgery), we reaffirm our commitment to excellence, openness, and rigor. We pledge to continue strengthening editorial quality, promoting evidence-based research, and supporting the professional development of surgeons—both those in training and those in practice. We aspire for this journal to remain a benchmark for general surgery in the Spanish-speaking world and a bridge connecting our region's scientific output with the global community.

Conclusion: The written legacy of surgery

After a long professional career, we surgeons tend to look back on complex procedures, memorable patients, the mentors who shaped our path, and colleagues who walked that path with us or helped us grow.

Yet, there is another way to leave a lasting mark. Every published article represents a conversation with the future. Every journal serves as a bridge between generations. Every issue preserves a part of our profession's collective memory.

Operations transform our patients' lives. Publications transform the future of surgery.

The scalpel saves lives in the present. The written word ensures that this knowledge continues to save lives long after we are gone. That is why scientific journals are not merely vehicles for dissemination; they are guardians of memory, builders of community, and custodians of the surgical legacy.

Thank you very much.

Compliance with ethical standards

Informed consent: This study does not involve patients; therefore, it did not require the completion of informed consent or approval by the institutional Research Ethics Committee.

Conflicts of interest: The author serves as Editor of the *Revista Colombiana de Cirugía*, a publication analyzed in part of this article. There are no other conflicts of interest to declare.

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Author's contributions:

- Study design and conception: Mónica Bejarano.
- Data acquisition: Mónica Bejarano.
- Data analysis and interpretation: Mónica Bejarano.
- Manuscript drafting: Mónica Bejarano.
- Critical review and final approval: Mónica Bejarano.

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