This is the unedited version of a profile which appeared in *Australian Doctor* in 2002. The published version may have had minor changes.

Profile: Dr Jeffrey Drazen

CV in brief

2000 -	Editor-in-Chief, New England Journal of Medicine
2000 -	Professor of Medicine, Harvard Medical School
1991-	Professor of Physiology, Harvard School of Public Health
2000-2004:	Council Member, National Heart, Lung and Blood Institut
1989-2000:	Chief, Pulmonary Division, Brigham and Women's Hospital, Boston
1972	M.D. Harvard Medical School
1968	B.S. Tufts University

A CLOCKMAKER OF MANY TALENTS

Jeffrey Drazen doesn't look like a salesman and he certainly doesn't sound like one; he's not the loud or flamboyant type. But the editor-in-chief of The New England Journal of Medicine was indeed on a sales mission during a recent visit to Australia.

While mingling with colleagues at a meeting in Cairns of the Thoracic Society of Australia and New Zealand, Drazen was also spreading the word, in his mild-mannered way, about his journal, how well it looks after its authors, and why researchers should send it their papers.

"We spend a lot of effort trying to be sure that we get good papers because we can't be the number one journal if people don't send us good papers," he explains, during a quick break from his hectic conference schedule for an early-morning interview.

"And people will only send us good papers if they think we will take care of them."

If Drazen sees a paper in a rival journal that he would have liked, he first checks the NEJM didn't reject it. "If they didn't, I will write the authors and ask them to think about the journal next time if they have a paper to submit," he says.

He adds: "Anybody who's number one and doesn't think they have to compete won't be number one for very long."

Drazen emphasises the international focus of the NEJM, widely perceived as the voice of North American medicine. Fifty-five per cent of submissions come from outside the US, which accounts for 60 per cent of published papers. "We're not really North American anymore," he says.

Of the 100-odd papers submitted each week, about one-third are rejected without going to review, and only about nine per cent make to to press. About three-quarters of rejected papers end up being published elsewhere within two years, he says.

When appointed almost two years ago, after a series of controversies at the journal, Drazen's main priority was to make sure that every issue had "a paper of interest to what my mother would call a 'real doctor', somebody who actually has an office and sees patients". His other main goal was to upgrade the journal's presence in cyberspace.

Despite the job's demands, Drazen continues part-time hospital and laboratory work. He says it helps him stay in touch with his audience but you also get the feeling that, as much as he enjoys publishing, it would be giving up too much of himself to stop being a doctor and a scientist altogether.

And Drazen, 56, already has given up quite a lot to take on one of the (italics on "the") most prestigious jobs in medical publishing.

Off the top of his head, he doesn't know exactly how much it was. He stops to do his sums, and then estimates he is probably about $US 250,000 poorer - the value of stocks, shares and patent royalties he surrendered to comply with the journal's strict ethical code.

Much of that money has gone to Harvard Medical School to fund a scholarship, while his share of patent royalties support research

ventures at the Brigham and Women's Hospital in Boston, where he has worked for decades.

There is not a hint of complaint in his voice about this: "I knew that if I was going to do this job, I would have to do it."

Nor is there any sign of aggrieved ego or even impatience when my questioning reveals a dreadful ignorance of his central role in the development of a class of asthma drugs, leukotriene receptor antagonists.

Drazen began research into asthma physiology in the early 1970s and 15 years later had the beginnings of a clinical application. To take it further would not have been possible without industry collaboration, he says.

"By the early 90s, after ten years of mis-steps, it became clear that there were products that were going to be available for the treatment of asthma," he says.

This is, of course, the other side to perceptions that Drazen is "close to industry". He is one of the few medical scientists to see their work translated from the laboratory into widespread clinical use.

Millions take medications resulting from his research, his name is listed on five patents, and he expects to soon hear the outcome of a sixth patent application.

When Drazen says he retained his scientific integrity during the drug development process, he speaks with quiet assurance. "Along the way we had the opportunity to work with people whose research ethic was not for me," he says. "You just have to walk away from them.

"If you look at my CV, you won't find any papers where I didn't have full control of the data. I had lots of opportunities to do other kinds of trials but I didn't want to do that."

Only once was he "trapped", when working with a company which, he says, misused one of his comments in marketing, leading to "the FDA equivalent of a parking ticket".

Despite such experiences and the recent statement from journal editors expressing concern about the independence of company-funded research, Drazen makes it clear, just quietly, that he believes the conflict of interest issue has been overstated.

“We have to address it, but the way we should address it is by establishing ground rules that people pay attention to rather than saying in a shrill voice that you people are being bad,” he replies when asked his view of a provocative editorial by former NEJM editor, Marcia Angell, titled, Is Academic Medicine for Sale?

Sandra Anderson, a respiratory scientist at Royal Prince Alfred Hospital, who has known Drazen and his work for close to 30 years, remembers some of his early research on the effects of leukotrienes in the airways being greeted with scepticism.

She admires that he had the tenacity in persisting with the early observations in animals and to see them all the way though to the development of a phamaceutical product for humans. “He intellectually battled against the orthodoxy of the times,” she says.

She adds: “He’s one of the smartest physiologists around. He is the quintessential Harvard man - the best of the crop, that’s why he’s succeeded.”

Michael Hensley, professor of medicine at the University of Newcastle, spent time with Drazen at Harvard in the late 70s, and describes him as “a classical Harvard academic - extremely bright, hardworking, productive”.

“He has done very well in what is probably the toughest, most competitive academic arena in the world.”

Nick Saunders, dean of medicine at Monash University, who also worked alongside Drazen in Boston years ago, describes him as an unassuming, nice guy who has a touch of eccentricity and “who likes a difficult job and likes doing it well”.

Apart from a “mind like a steel trap”, he has a great sense of humour, adds Judy Black, professor of pharmacology at the University of Sydney.

She helped Drazen shop for opals for his wife during his Cairns visit, and is on his email joke list.

Drazen came to medicine almost by accident. His father, an engineer, died of cancer when Drazen was a teenager.

When time came for university, Drazen couldn't decide between engineering and social work, so studied both and realised that medicine might be a way of combining his interests. The threat of the Vietnam draft (which did not apply to medical students) provided the final impetus.

Despite the high profile of his current job, Drazen gives the impression of not particularly enjoying the public limelight. Asked if he has much to do with the media, he replies: "I prefer to let our work speak for itself."

But ask what he does for relaxation, and he is happy to show off. He displays a photo on his computer of the home workshop where he makes grandfather clocks.

"I took up wood work when I was an intern looking for something to do that occupied my hands, to produce something real," he says. "With science, a lot of stuff, you can't see. You only infer its presence because something that you think will happen actually happens."

Drazen's enthusiasm for his clocks is palpable. He likes that each one he makes is a little better than the last. "If I didn't do anything else and just built clocks I could turn out ten a year but," he trails off, "since I have another job...."

It seems that the doctor, scientist, editor and unassuming salesman is also, at heart, a clockmaker.