

AMJ
American Medical Journal

Media Pack 2025

Elevating the quality of healthcare globally

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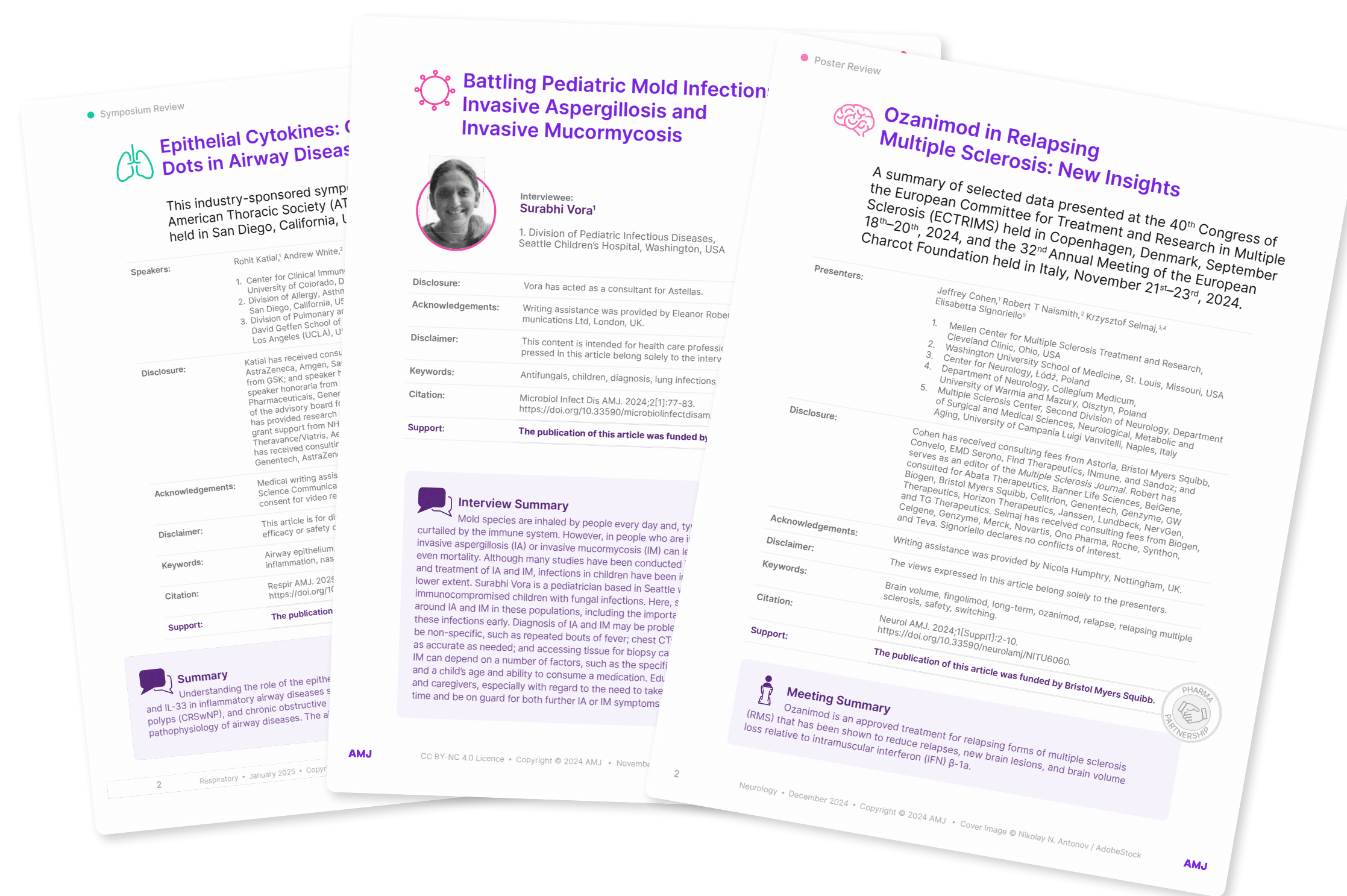
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Pricing

Articles

Be published on our website, providing an instant, searchable reference point.



Symposium Reviews

Capture your symposium in its entirety, and extend the life & reach beyond the confines of the congress.

Poster/Abstract Reviews

Full write-up of any posters/abstracts from congress and accompanying oral presentation.

Interview Articles

Interviewing KOLs of your choice, on a topic of your choice. Hands-on or hands-off, depending on your request.

Interactive Upgrade

Stand out from the crowd with a highly innovative and visual way for HCPs to consume (and retain) content.

Interactive Case Study

A unique learning experience for HCPs.
Provide instant feedback and understand gaps in education.

We can design an interactive learning experience based on fictional or real-life patient case studies. This educational tool is a fantastic way to illustrate the complexity of a disease, educate HCPs on treatment pathways, and provide an understanding of the baseline knowledge on that indication.

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Microbiology & Infectious Diseases

Case Presentation
A previously healthy 17-year-old male was transferred to a tertiary paediatric emergency department due to concern for sepsis.

The patient was febrile, tachycardic, and hypotensive.

Before transfer, he was resuscitated with intravenous fluid boluses and was given a dose of ceftriaxone.

Symptoms:
In the preceding 5 days, the patient had fevers with chills, sore throat, odynophagia with associated trismus, emesis, and right-sided groin pain.

Past Medical History:
His past medical history was unremarkable, with no recent travel or sick contacts.

He disclosed recent marijuana and tobacco use, and ongoing contact with four Rottweilers. His immunisations were complete up until 12 years of age; however, he was unimmunised for COVID-19.

Hypotensive
The patient had low blood pressure

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A new way of learning

Interactive Quiz:
Test your knowledge:
Atypical Lemierre's Syndrome

UNUSUAL NECK PATHOLOGY in a teenager

START

Dear Stacey,

Looking for a fresh alternative to conventional medical education methods?

Discover our [new interactive quiz](#), crafted to make learning engaging and effective. Immerse yourself in a fresh, dynamic approach that maximises your time and knowledge.

Explore an atypical case of Lemierre's syndrome, a rare but potentially life-threatening illness that is often referred to as the 'forgotten' disease. Follow the case step-by-step and test your understanding of the diagnosis, atypical features, and treatment of this condition.

What you'll gain:

- **Instant Feedback:** Receive immediate insights to identify your strengths and areas for improvement
- **Enhanced Learning:** Experience formats designed to boost retention and make knowledge stick
- **Active Engagement:** Dive into content that captivates and actively involves you

START THE QUIZ NOW

Test your knowledge - Question 1: What might be the initial diagnosis made based on the imaging findings of left retromandibular vein thrombosis and infiltrative densities? Choose: A, B, C, or D

Case Presentation: A previously healthy 17-year-old male was transferred to a tertiary paediatric emergency department due to concern for sepsis. The patient was febrile, tachycardic, and hypotensive.

Symptoms: In the preceding 5 days, the patient had fevers with chills, sore throat, odynophagia with associated trismus, emesis, and right-sided groin pain.

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Test your knowledge - Question 1:
What might be the initial diagnosis made based on the imaging findings of left retromandibular vein thrombosis and infiltrative densities? Choose: A, B, C, or D

Lemierre's syndrome

Deep neck space infection

Bacterial tonsillitis

Septic thrombophlebitis

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Treatment and Management

Following the clinical diagnosis of LS, antibiotics were adjusted to ceftriaxone and metronidazole

Anticoagulation with enoxaparin was initiated and later transitioned to rivaroxaban

The patient's clinical presentation improved

No neurological deficits clinically. Imaging findings were found to be clinically non-significant

Patient was discharged on the 12th day of admission with:
• Intravenous ceftriaxone, administered via a **peripherally inserted central catheter line**, over 6 weeks
• Anticoagulation therapy of 3 months

At the 2-month follow-up:

- Stable appearance of thrombus on neck ultrasound
- Satisfactory clinical progress
- Normal laboratory investigations

Microbiology & Infectious Diseases

Infographics

Infographics can convey a story, new or previously undiscovered information, or can present a new angle or fresh perspective on accepted wisdom.

We can commission infographics on a subject of your choice and for any pre-designed content, we are able to host your work on our website and drive traffic to your provided infographic via email campaigns.

Artificial Intelligence in Robotic Urologic Surgery
 Citation: EMJ Urol. 2024;12(1):54-55. <https://doi.org/10.33590/emjuro.24000269>

1. Artificial Intelligence¹

- Artificial Intelligence:** Any technique that enables machines to mimic human intelligence.
- Machine learning:** A subset of AI that uses statistical methods to enable machines to learn tasks without explicit programming.
- Deep learning:** A subset of machine learning that uses artificial neural networks to mimic the learning process of the human brain.

2. Robotic Urologic Surgery²⁻⁴

The da Vinci systemTM remains the main robotic surgical system used since its first approval in 2000 by the US Food and Drug Administration (FDA).

- ADVANTAGE:** Reduced surgeon fatigue
- ADVANTAGE:** Smaller incisions; less blood loss; less pain; less risk of infection
- ADVANTAGE:** Faster recovery, shorter hospital stay, faster return to daily life
- ADVANTAGE:** Better access to areas being operated on
- ADVANTAGE:** Enhanced visualization: highly magnified, 3D, high resolution image
- ADVANTAGE:** Greater range of motion, dexterity, and precision
- DISADVANTAGE:** Lack of experienced robotic surgeons and appropriate training programmes (at least to advance events)
- DISADVANTAGE:** High cost of robotic systems is a barrier in low to middle-income countries

3. AI can overcome challenges in robotic surgery⁵⁻⁷

- AI can be used as a **learning tool** for robotic surgeons at different stages of their careers (recording surgeries, stocking datasets, etc.).
- AI can be used to **predict adverse events** during surgery, such as intra-operative bleeding, to improve patient safety, and evaluate risk of post-operative complications.

AI in Early Diagnosis of Cancer
 Citation: EMJ Innov. 2024;8(1):38-39. DOI:10.33590/emjinnov/11000002. <https://doi.org/10.33590/emjinnov/11000002>

AI in Oncology

"The science of developing machine technologies that are capable of performing tasks usually associated with intelligent beings, including problem solving and learning"

AI has the potential to fundamentally transform the practice of medicine and the delivery of healthcare¹

AI could be pivotal in helping cancer care as part of the European Digital Strategy²

AI Subtypes in Healthcare

- Medical AI
 - Physical AI
 - Virtual AI
- Machine learning
- Deep learning

AI Development Pathway

- Choosing the right problems
- Data collection and processing
- Model construction: Training, Validating, Testing
- Model development
- Continuous monitoring

Spotlighting Lung Cancer⁵

Two Main Types of Lung Cancer

- Small Cell
 - Small Cell Carcinoma (Oat Cell Cancer)
 - Combined Small Cell Carcinoma
- Non-small Cell
 - Adenocarcinoma
 - Squamous Cell Carcinoma
 - Large-Cell Carcinoma

Minimising radiation exposure

- LDCT interpretation in regions with a shortage of skilled radiologists
- Accurately detecting/categorising lung nodules
- Personalising screening schedules

Benefits of AI in Screening

Screening

- LDCT screening is the gold standard for lung cancer detection
- Nodules can act as early indicators
- Early diagnosis in high-risk populations can reduce the death rate by 20%
- CNNs, a class of deep-learning artificial neural networks, have identified high-risk patients, and predicted 1-year lung cancer rate with excellent accuracy (overall AUC: 0.90)⁶

Diagnosis

- Predictive models combine CT images with AI algorithms
- The DL Cade system-higher nodule detection rate (86.2% versus 79.2%) per CT examination than that of a double reading by two radiologists⁷
- 298 histopathological images analysed using deep CNNs classified adenocarcinoma, SCC, and SCLC with accuracies of 89%, 60%, and 70%, respectively⁸

Emerging issues and directions

- Lack of large datasets of clinical data to train models
- Lack of resources, proper training, and education among HCPs
- Patient privacy, data security, and compliance with regulations can be complex
- A framework for AI model deployment in healthcare could ensure patient safety, while maintaining ethical standards
- Creation of standardised dataset of lung cancer and longitudinal data through collaboration of healthcare institutions

Interactive Upgrade

Stand out from the crowd with a highly innovative and visual way for HCPs to consume (and retain) content.

This promotional material by Eli Lilly and Company is for Healthcare Professionals in Germany, Spain, and Switzerland only. Country-specific prescribing information and adverse event reporting information can be found at the bottom of this infographic.

Infographic summary

Which therapies result in the greatest reductions in HbA_{1c} and body weight?

A network meta-analysis of incretin-based therapies in patients with type 2 diabetes^{1,2}

The 2022 ADA/EASD consensus guideline states²:

Study design¹

The systematic review and network meta-analysis included

26,490 patients with type 2 diabetes receiving incretin-based therapies

Study endpoint

Primary endpoint: Disease duration <10 years

How do these data from the meta-analysis link with clinical practice recommendations?

The 2022 ADA/EASD consensus guideline states²:

- Early control in type 2 diabetes is important
- Early intervention
- Proactive approach with early use of treatment combinations
- Life expectancy: People with longer life expectancy have more to gain from early intensive glycaemic management

Tirzepatide may be preferentially considered for **the glycaemic management of early stages of type 2 diabetes**, to exploit its unparalleled weight reductions that may restore insulin secretion and action.¹

Podcasts



Thought-provoking discussions for our audience who prefer to listen on the move.

Our podcasts provide engaging and educational content for healthcare professionals and pharmaceutical executives, featuring a range of thought-provoking interviews with industry experts, and news and insights from the field.

Human versus Machine: Navigating Clinical Safety

3 Jan 2025 | Innovations

Human versus Machine: Navigating Clinical Safety

Tom Bradshaw
General Practitioner, Director and Clinical Safety Officer, BMS Digital Safety, Leeds, UK

The EMJ Podcast | Episode 235

In this episode, Jonathan Sackier sits down with Tom Bradshaw to explore the rapidly evolving landscape of clinical safety. They discuss Bradshaw's expertise in the clinical application of AI and digital technologies, his experience in the NHS and private sector firms, and the challenges of ensuring patient safety in an increasingly digital world.

Spotify | Apple | Amazon Music | Download MP3 (43 mins)

Speaker bio:

Tom Bradshaw is a General Practitioner, Clinical Safety Officer, and the Director of Digital Safety, a consultancy specialising in the safe application of AI and digital technologies. With extensive clinical experience, Bradshaw advises public sector organisations, including the NHS and technology startups, on novel clinical safety standards. He is a key advocate for advancing healthcare through innovative technological solutions, ensuring emerging technologies enhance patient outcomes while meeting stringent legal and regulatory benchmarks.

Onc Now: Episode 8: New Frontiers in Oncology and Drug Development

8 Jan 2025 | Oncology

Onc Now | Episode 8

In this episode of Onc Now, Jonathan welcomes Ahmad Awada, Head of the Oncology Department at Chirec Cancer Institute in Brussels and Editor in Chief of *AMJ Oncology*. Together they discuss groundbreaking developments in cancer care, the promise of targeted therapies, and the importance of global collaboration in oncology.

Spotify | Apple | Amazon Music | Download MP3 (31 mins)

Speaker bio:

Ahmad Awada is Head of the Oncology Department and Director of Chirec Cancer Institute, Brussels, Belgium, and is a global leader in oncology, specialising in the development of new drugs for cancer treatment.

With a medical degree from Université Libre de Bruxelles and advanced training in the Netherlands and the USA, his work has significantly advanced the understanding of cytotoxic and targeted therapies for solid tumours.

AMJ Podcast: Gastroenterology

Episode 232: **Redefining IBD: From Patient to Pioneer**

What insights does living as both a patient and expert bring to IBD care?

Dear Colleague,

In this week's episode, Jonathan Sackier welcomes Philip Smith to discuss his dual perspective as a Crohn's patient and expert. Together, they explore advancements in inflammatory bowel disease (IBD) research, the evolution of gastroenterology, and the impact of digital tools in transforming patient care and medical education.

LISTEN NOW

Topics covered:

- Breakthroughs in monoclonal antibody treatments, like infliximab
- Differences in global approaches to IBD and gastrointestinal care
- Emerging trends in gastroenterology research and publishing

This week's guest:

Philip Smith
Honorary Consultant Luminal Gastroenterologist, Royal Liverpool Hospital; Honorary Senior Clinical Lecturer, University of Liverpool, UK

Smith is a nationally and internationally recognised leader in gastroenterology, with a focus on IBD and intestinal failure. As a patient advocate, researcher, and clinician, he has contributed significantly to advancing care in his field.

Episode 7: Decoding T Cells and Advancing Immunology

How can T cells revolutionise cancer treatment?

Hello Stacey,

This week on Hema Now, Jonathan is joined by Professor at King's College London, UK, and lead of the i4MDS consortium, Dr Shahram Kordasti shares insights into the immunobiology of myeloid malignancies, the crucial role of CD4+ T cells in immunotherapy, and the impact of digital tools in transforming patient care and medical education.

LISTEN NOW

Topics covered:

- CD4+ T cell plasticity and its role in immunotherapy
- Advances in computational biology and multiomics
- The i4MDS consortium and its goals
- Future advancements in haematology

This week's guest:

Dr Shahram Kordasti
Reader and Honorary Senior Lecturer, Immunopathology, Kings College London

A leading expert in the immunobiology of myeloid malignancies, Kordasti leads the i4MDS consortium, an initiative focused on standardising immune monitoring in MDS and integrating cutting-edge computational biology and multiomics to personalise treatment for patients.

Also Available

For more haematology content, check out our previous episode of Hema Now, 'Hema Now: Episode 6: Transforming Stem Cell Transplantation'.



Video

On-demand, KOL-led videos designed to educate HCPs and fit around their busy schedules.

Webinars

AMJ can take care of all your webinar needs, tracking detailed engagement metrics to assess impact.

The screenshot shows the AMJ website interface for an article titled "Precision Medicine in Lung Cancer Treatment" dated 13 Mar 2024. The article features a video player with a purple and white theme, a speaker profile for Nathan Merrill, and a list of themes covered including the state of precision medicine in lung cancer, uses of the precision medicine-based platform, and future directions. A faculty section lists four speakers: Jarushka Naidoo, Terri Conneran, Luis Paz-Ares, and Alexander Drilon. The page also includes a "Podcast" section at the bottom.

The screenshot shows the AMJ Oncology Webinar registration page. The header includes the AMJ logo and "Oncology: Webinar". The main content area features a purple banner with the text "1 day left to register for our genomic profiling in precision Oncology webinar!". Below this is a "Click here to register >>" link and a "Dear Stacey," salutation. The webinar details are: "Webinar 1: The Future of NSCLC Treatment", "Date: Tuesday, September 24th", and "Time: 4:00 PM - 5:00 PM BST". A "REGISTER NOW" button is prominently displayed. The "Featured Speakers" section lists Diego Luigi Cortinovis and Fabio Pagni. At the bottom, there is another "REGISTER NOW" button and the AMJ logo with the tagline "Elevating the quality of healthcare globally".

Interactive Upgrade

Gain additional insight through polls & quizzes, and empower HCPs with more ownership over their learning through branching.



Email Campaigns

Exclusive traffic-driver: the most direct way to disseminate your key messaging to our fully opted-in subscriber base.

We offer sponsorship of targeted emails with guaranteed open rates and click-through rates above the industry norm. Reach active and engaged audiences around the world: those who have registered to receive content alerts from their favourite journals or news about their specialist subjects.

Resend

Drive extra engagements through resharing an email or supplement to those who missed it first time around.

Additional Audience

Would your content benefit specialists in another therapeutic area? Ensure relevant HCPs across disciplines are in the know.

Average
NPS
of 86



Content Hosting

Host your content in a variety of ways with AMJ and boost your engagement.

Supplements

Want to publish your Article or Infographic as a standalone piece? Dedicated supplement available all-year round (subject to availability).



eLicense

How would you like to use your content once it has been published? An eLicense allows you to embed your Article, Infographic, Podcast, or Video, onto your own platforms.

Hosting

Have a piece of your own content, such as audio or videos, hosted on the AMJ website for a 6-month period.

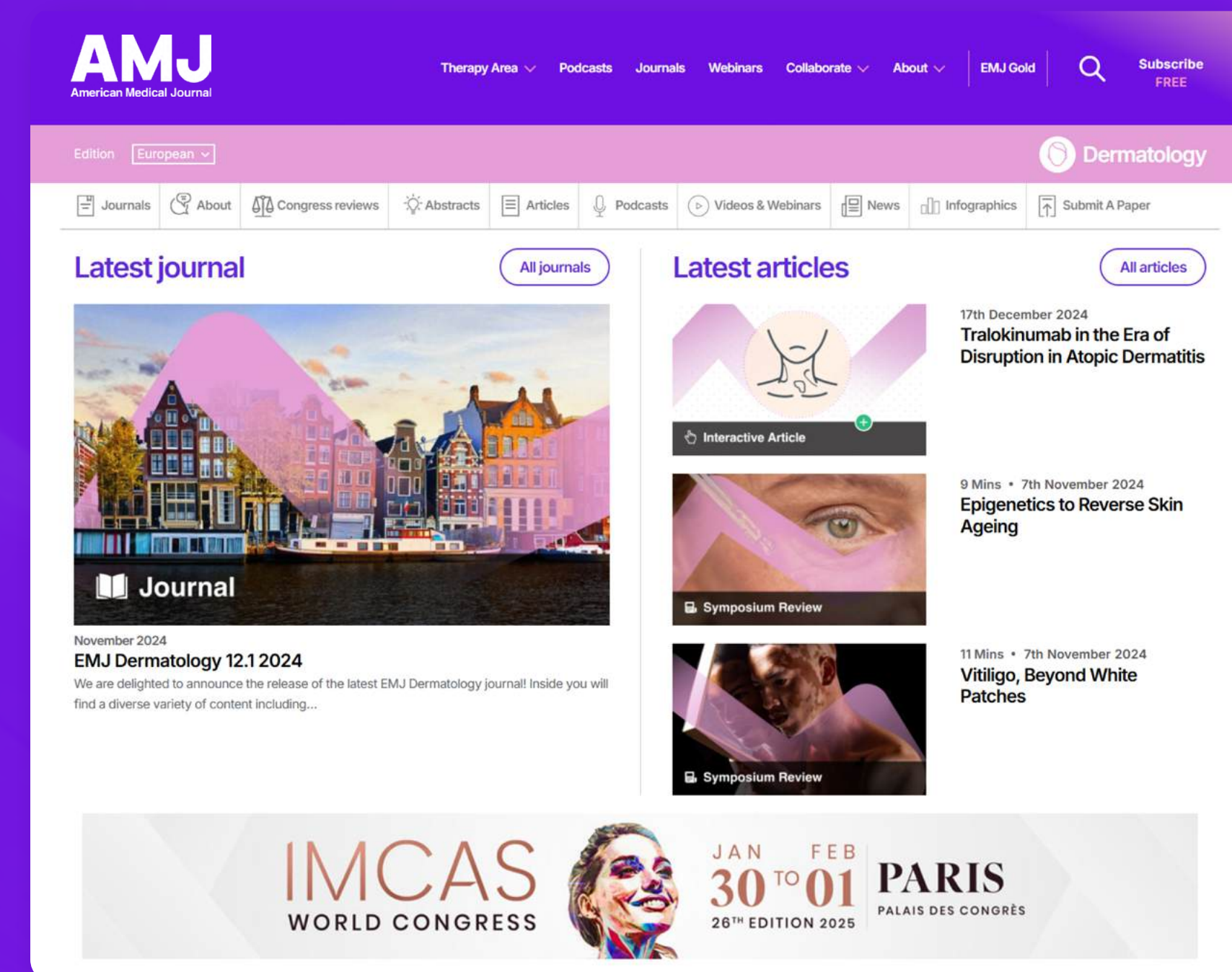
Advertisements

Banner Advertisements

Our Banner advertisements are a simple way to drive traffic through other channels, available in our quarterly email newsletters, or on the AMJ website.

Journal Advertisements

Our Journal Adverts, with limited spaces in our digital flagship journals, can engage your audience through a range of sizes & positioning.



Extend your marketing reach to our audience.

A collage of three overlapping images. The top image is a newsletter titled 'AMJ American Medical Journal Newsletter: Respiratory'. It features two main articles: 'Air Pollution's Role in Rising Global Asthma Cases' with a photo of smokestacks, and 'High Flow Nasal Cannula Therapy Reduces Ventilation Need in Severe COVID-19 Cases' with a photo of a patient wearing a nasal cannula. Below these is a section for 'Explore more of our Respiratory content' with icons for various topics. The bottom image is a survey advertisement for Abbvie. It has a dark background with the Abbvie logo and the headline 'HOW CAN WE IMPROVE THE TREATMENT OF ESSENTIAL TREMOR?'. The text asks for clinical insights on essential tremor and offers two brief surveys to help elevate patient care. A poll asks 'In your experience, how many years does it take for a patient to get diagnosed?' with options: Less than 1 year, 1-2 years, 3-5 years, and 6 or more years. At the bottom, it says 'BE PART OF THE CHANGE' and 'Click below to take the surveys today' with buttons for 'SURVEY 1' and 'SURVEY 2'. The background of the survey ad shows a person's hands.

Pricing

Symposium Review Article	\$65,000
Poster Review Article	\$35,000
+ Per additional Poster	\$5,000
KOL Interview	\$40,000
+ Per additional KOL	\$6,000
Interactive Upgrade (Article)	\$30,000
Interactive Case Study	\$40,000
Infographic	\$40,000
Interactive Upgrade (Infographic)	\$15,000
Podcast	\$32,500
Webinar	\$32,500
Interactive Upgrade (Video)	\$20,000
Email Campaign	\$15,000
+ Per additional audience	\$7,500
+ Per resend	\$7,500
Supplement	\$15,000
Hosting	\$10,000
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Newsletter Banner Advertisement	\$8,000	
Website Banner Advertisement	\$8,000	
Journal Advertisements		
Double Page	Inside Front Cover	\$17,500
	Run of Paper	\$15,000
Full Page	Run of Paper	\$11,000
Half Page	Run of Paper	\$6,500

“AMJ has been a great partner to work with, very reliable and capable of delivering great medical education content”

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