

medicina intensiva



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EDITORIAL

Editorial activity and other events in *Medicina Intensiva* during 2011*

Actividad editorial y otros acontecimientos durante 2011 en MEDICINA INTENSIVA

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A series of events registered during the year 2011 may exert a decisive influence upon the course of our journal.

A key and strategic objective of the editorial board of *Medicina Intensiva* was the inclusion of our journal in the Science Citation Index (SCI) and Journal Citation Report (JCR), with the designation of a corresponding impact factor (IF). The fact that these objectives were reached in mid-2010, with the posterior designation of an IF of 1.496, should not be regarded as a purpose in itself, but rather as a means for achieving other more ambitious goals. In our case, the fundamental aim is for *Medicina Intensiva* to become a valid tool allowing leading Spanish-speaking investigators to make some of their research work known to others. However, reaching the mentioned objectives implies a point of inflexion that obliges us to ponder our future short- and middle-term actions.

Translation of manuscripts into English

Since January 2011, the articles published in the journal have been translated into English-thus allowing readers to consult the publications in both Spanish and in English, and on both the journal website and in PubMed. While this undoubtedly implies a considerable economical effort, it

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ensures a very significant increase in visibility of the published articles, and in the diffusion of our manuscripts among the rest of the non-Spanish speaking scientific community. In effect, contributing authors can obtain a greater impact from their articles, and the latter in turn can be referenced by other investigators, with the consequent bibliometric benefits this implies.

We had been considering the convenience of taking this step for some time. Undoubtedly, the inclusion of our journal in the JCR and the obtainment of an IF have been decisive in taking the decision. It is now when the economical investment can become truly profitable in scientific and bibliometric terms. In the coming years we will have the opportunity to evaluate the true benefits of the decision in these terms.

In addition to the above, the journal has worked to improve the visibility of its articles thanks to the progressive technical improvements made in the diffusion of information. At present, the manuscripts are distributed through the website of the journal, accessible from the Elsevier portal (http://www.elsevier.es/ es/revistas/medicina-intensiva-64), though information on the contents of the journal can also be accessed and received from the SEMICYUC website (http://www.semicyuc.org). The latter has been fully revised during 2011, and Medicina Intensiva presently has its own preferential place on the site (with numerous consultations from physicians all over the world); furthermore, its contents are made available from SEMICYUC access to Facebook (http://www.facebook. com/pages/SEMICYUC/126800840666619) including even the possibility of discussing the published articles.

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^{*} Please cite this article as: Fernández Mondéjar E, et al. Actividad editorial y otros acontecimientos durante 2011 en MEDICINA INTENSIVA. Med Intensiva. 2012;36:1–2.

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Impact factor (IF)

In June 2011 we received the impact factor (IF) corresponding to 2011, based on the Medicina Intensiva citations of 2009 and 2008. The IF obtained was 1.496, which can be regarded as a good beginning-placing us as the only Spanish language publication among the journals belonging to the area of Critical Care Medicine. On analyzing the citations that conformed the IF, we found the proportion of self-citations to be larger than desirable. Language is undoubtedly a decisive factor in this imbalance. As commented above, the current IF was established from the citations corresponding to the years 2009 and 2008; since the journal was exclusively published in Spanish at that time, the citations mainly came from Spanish-speaking authors. There was hardly any access to our publications on the part of the rest of the scientific community. In this context, the aforementioned citation/self-citation balance can be expected to improve considerably as a result of translation of our articles into English.

Number of articles received

In the last four years there has been a discrete 5–10% annual increase in the number of submitted manuscripts. During 2011, however, and particularly after receiving our IF in June of that year, interest in the journal has grown considerably—with a formidable increase in the number of submitted articles. Specifically, the number of originals has increased by over 200%.

Although these developments demand important effort from both the editorial board and the reviewers, they reflect renewed interest in our journal and allow improved manuscript selection with a view to improving the quality of the published articles.

Acknowledgement of the reviewers

Reviewers are a key element for ensuring the quality of any scientific publication. All editors of scientific journals acknowledge the fundamental contribution made by their reviewers. Manuscript reviewing is an altruistic and anonymous activity, and reviewers generally receive no recognition other than an institutional note of gratitude in the December or closing issue of each year. In our case, most of the reviewers who collaborate with *Medicina Intensiva* are intensivists, though we also work to expand the range to other disciplines (radiologists, nephrologists, cardiologists, anesthetists, pneumologists, etc.). It is very important to receive criticism and information from other settings with different viewpoints that can contribute to create and renew our knowledge with the ultimate aim of improving the quality of the publication.

In this context we wish to support the work and training of reviewers, and from the SEMICYUC are considering the creation of a "course for reviewers" with this idea in mind. The mentioned course can serve to update knowledge of critical reading methodology, and may attract new reviewers to this necessary task—the Editorial Board preserving the necessary quality for peer review activities, which will favorably affect the quality of the published manuscripts.

Continuing medical training

The aim of continuing (ongoing) medical training or of "continuing professional development", as it is now preferably called, is to facilitate the transfer to routine clinical practice of those scientific developments that may benefit our patients. We know that simply reading an article is not enough to consolidate changes in patient treatment approach. Additional effort is often needed, contributing to establish concepts and modify behaviors. Many agents are implicated in this effort (health administrations, scientific societies, hospitals, etc.). Our journal has joined this effort, and since 2008 has been involved in a continuing medical training program which each year offers credits to over 300 readers. Our aim is to continue in this line of work, which in addition to its potential clinical benefits may prove useful for the professional careers of our readers.

Reference

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