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EDITORIAL

Farewell from the Editor-in-Chief: eight years is nothing

Despedida del Editor Jefe: ocho años no es nada



Over 8 years have gone by (and eight years is nothing, paraphrasing Carlos Gardel's universal tango of) since I took over this journal. This exciting stage of my life that has enriched me both professionally and personally now comes to an end. During my time at the helm of *Medicina Intensiva*, our journal has consolidated as the leading publication on critical patient research in Spain and Latin America, increasingly becoming the chosen option to disseminate scientific works by researchers from Europe, the United States, or Asia. This is something that can be confirmed by several indicators, but one example is the evolution of the Impact Factor (that has gone from 1.193 in 2015 up to 3 in 2022). Nonetheless, both my team and I are positive that "the true power of a scientific journal does not come from its score in the different comparative metrics that proliferate, but from the trust it generates".¹

All of this would not have been possible without the support of the different Boards of Directors of the Spanish Society of Intensive Medicine, Critical Care, and Coronary Units (SEMICYUC) and the Pan-American and Iberian Federation of Critical Medicine and Intensive Therapy (FEPIMCTI), the journal Editorial Board, the reviewers (to whom I express my deepest gratitude), the authors, and, of course, the Editorial Committee. As I said in my very first editorial, *Medicina Intensiva* is the result of team effort. However, I am especially grateful and proud of the Editorial Committee that I have had the privilege to coordinate. Steve Jobs used to say that the first quality of teamwork is trust in others. Each person is responsible for his/her own process, and as a team, they are supposed to meet regularly to stay updated on the challenges and conflicts they face, what the best way is to help each other and solve common doubts. That is exactly how we have worked in this Editorial Committee, and I want to recognize the excellent work of each of its

members, which has made our work so easy and productive along the way. This has led, for example, to the progressive shortening of the editorial process, with an average response time of just 17 days. This Editorial Committee has always been critical of its work with the sole purpose of improving what we do. This led us to see where the articles rejected by *Medicina Intensiva* ended up, which was, overall, very positive but also provided us with lines regarding room for improvement.³

We have tried to create interactions among this Editorial Committee, the reviewers, and the Editorial Board by renewing it periodically and holding annual meetings conducted remotely during the years of the pandemic. This Editorial Committee has also worked to increase the visibility and representation of women, as stated in a document recently published.⁴ Since the beginning of 2023, the authors' first and last names are now included, rather than just their initials. Additionally, the number of women in both the Editorial Committee and the Editorial Board has been gradually increasing. In an analysis recently published on journals from the Critical Care category, *Medicina Intensiva* ranks 4th out of a total of 28 journals on the presence of women in editorial committees.⁵

Over the past few years, we have faced the greatest challenge modern society and the health care system have experienced in recent memory. I am talking about the pandemic outbreak triggered by SARS-CoV-2. Our specialty played a crucial role here. Intensivists deployed up to 300% more critical care beds in hospitals during the worst weeks of the pandemic, posing an unprecedented challenge of health care and logistics.⁶ It was in 2020, while the pandemic was at its peak and we were facing an unknown disease with high personal risk of infection and endless working hours, that *Medicina Intensiva* received the highest number of manuscripts in its history (50% more compared to 2019). This, along with many articles published by Spanish and South American intensivists in other scientific journals, clearly proves our commitment to create knowledge even

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in the most adverse situations to improve the prognosis of critically ill patients. Also, we have published 10 consensus conferences or expert documents led by intensivists throughout the years, many of them in collaboration with other scientific societies on the management of critically ill patients with SARS-CoV-2 infection, the latest of which was published back in 2022.⁷

Across these 8 years, we have tried to draw original high-quality methodological works capable of improving our impact factor and, while at it, draw new relevant studies to impact or change our clinical practice. In our effort to promote quality research, we published an Update entitled *Advances in Methodology in Intensive Medicine*, to enhance the methodological quality and statistical analysis of the research work conducted in Intensive Care Units. In other series of Updates published across these years, we have addressed current topics such as the management of burn patients, extrarenal depuration techniques in critically ill patients, postoperative care for surgical patients, and more recently, the management of infections due to multidrug-resistant Gram-negative bacilli.⁸ We have already prepared an upcoming new series of Updates on Ultrasonography in Critical Patients that will include downloadable videos for educational purposes.

We have not forgotten other missions of the journal, such as serving as a tool for continuous education for health professionals who treat critically ill patients, especially trainee specialists.⁹ With our younger colleagues in mind, we have tried to provide high-quality educational materials in Reviews, Updates, and Viewpoints, always including clear tables and figures that visually summarize the content of the text, and highlight the authors' message. We have also strengthened the Images section within *Medicina Intensiva* section with images and videos of high educational value. In this regard, we have conducted the Course on planning, writing, and publishing scientific papers, supported by FEPICTI. The 3rd edition is scheduled for publication the last quarter of 2023.

I would like to conclude by mentioning Dr. Gordo Vidal, a key player in the positive evolution of the journal in his role as Associate Editor-in-Chief. SEMICYUC could not have made a better decision than entrusting him with the task of leading our journal as the new Editor-in-Chief. I wish him the greatest success of all, which will undoubtedly have a very positive impact on the prestige of our medical specialty. *Medicina Intensiva*, like all scientific publications out there, must adapt to tomorrow's challenges. Artificial intelligence will undoubtedly change our clinical practice, the way we write scientific articles and the editorial process altogether.¹⁰ Fortunately, artificial intelligence will not take the lead in *Medicina Intensiva* in the years to come.¹¹ I hope this never happens and trust that we have instilled credibility in our readers from day one.

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