

# How far do we want to go?

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*“To carry out war, three things are necessary: money, money, and yet more money. There are cheaper wars, but they are usually lost.”*

No, this was not the statement made by the Ukrainian president when he addressed the EU leaders a few months ago in search of resources to continue his fight against Russia –it was Napoleon Bonaparte\* who uttered it centuries earlier. And as you might imagine, it is perfectly applicable to many more areas than warfare. Excellence in scientific publishing is no exception. Most of the actions aimed at gaining ground in such a competitive environment cost money, and it goes without saying that for a scientific society of our size, economic survival is a constant struggle. We should therefore congratulate ourselves on the decision we made five years ago when, despite the lack of official support, we had the vision and the courage to assume the cost of publishing the journal in English –a project that was costly but which, together with its indexing in Medline, represented a major advance in quality.

The impact of this decision can be seen today in the upward trend recorded in bibliometric indicators such as the h-index, Scimago Journal Rank (SJR), and Scopus CiteScore, since 2020. It is true that we do not have an impact factor (IF) and it is unrealistic to think this will change in the coming years, but it is also true that there are numerous new bibliometric indicators that threaten the hegemony of the IF as the foremost indicator and which better represent our activity. This editorial is not the appropriate place to discuss the shortcomings of the IF as an indicator of journal quality, nor is it a matter of ignoring the fact it is still the crowning glory of any medical publication, but now and again it is worth remembering that

only journals included in the Web of Science can have an impact factor. In addition, it was highly unlikely that a journal published in Spanish by a Spanish publisher and focused on a highly specialized field would be included in this bibliographic repertoire. Moreover, the fact that a journal does not have an IF does not mean that it is not cited, and our case is no exception. In 2004, researchers at the University of Valencia calculated the IF of all Spanish medical journals, and *Cirugía Pediátrica* obtained a (modest) 0.21 for the year 2001<sup>(1)</sup>. Will we achieve an IF in the future? It is impossible to know, since the criteria used by Clarivate Analytics –the company that owns the Journal of Citation Reports– to include new journals in the Web of Science are not clear.

We are in an excellent position to continue climbing the ranks, and we are the only ones who could curtail this development. The best strategy for this is to adopt the highest standards, established by the International Association of Medical Journal Editors, and to focus on attracting quality articles. The collaboration with various Latin American societies ensures the sustainability of the project while increasing the number of potentially publishable articles. It also fosters competition among Spanish authors who, on occasions, have not valued the privilege of having a journal with maximum visibility. For instance, last year, the number of articles submitted by Spanish authors was less than 50% of the total, and not as a result of an exponential increase in articles from abroad, but because of a significant reduction in the number of articles submitted.

However, collaboration with our Latin American colleagues will not automatically bear fruit. A recent bibliometric survey by Lozada Martínez et al.<sup>(2)</sup> provides very interesting data on Latin American publishing activity in

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*\*This phrase has also been attributed to Milanese general Trivulzio and Italian diplomat and military man Raimundo Montecuccoli.*

our field. This information is highly revealing with regard to this new collaborative period:

First, Brazil is the clear leader in scientific production, well ahead of the other countries. Although Brazil attended the meeting in Porto at which the collaboration agreement was conceived, it did not finally join the project. It is impossible to know why, but it is a significant finding that in Lozada's research<sup>(2)</sup>, one of the authors with the highest scientific production is a Brazilian surgeon with numerous articles in international journals, but also in 13 Brazilian journals. All of them are indexed in Medline and published in English, just as our journal is. Therefore, it would appear that our platform is not a marked improvement on what they already have in their own country. It is, however, a magnificent example of the enormous potential high-visibility national journals possess to disseminate work that is not accepted in more prestigious journals.

Another factor is that many of the articles with the highest impact involving Latin American authors are affiliated with European or North American centers, and therefore do not reflect actual clinical activity in their countries of origin, but rather their relations with other institutions, or a working life outside their own country. Previous research has shown that Latin America produces barely 2-3% of the literature in our field<sup>(3)</sup>. This data contrasts with their great experience, especially when compared to European figures, with an ageing population and low birth rates. Various countries in Central and South America are common destinations for Spanish resident doctors when choosing foreign internships due to the high incidence of congenital malformations, but there is not always a correlation between the surgical experience of the teams/professionals and their publishing activity. Lozada<sup>(2)</sup> shows that Argentina, Mexico, Colombia, and Chile are the most active countries when it comes to publishing, which is consistent with our own experience. In the 2019-2023 period, Colombia, Argentina, and Mexico were the countries with the highest number of papers submitted to *Cirugía Pediátrica*, far ahead of the other project members (Chile, Ecuador, Peru, Dominican Republic, Uruguay, Paraguay, and Portugal). However, barely 40% of these papers made it through the reviewers' filter, largely due to the type of article submitted –non-exceptional clinical cases that provide an excuse to conduct

an extensive literature review on a particular topic. The coming years will undoubtedly witness a change in these percentages as the journal's selection criteria become more widely known.

Finally, Latin American publishing shows a clear preference for American rather than European journals. The choice of which journal to publish in is inevitably linked to the subject with which the article deals, but other preferences of both authors and publishers also play their part. A quick Medline review of publishing activity in the 2019-2023 period shows that our colleagues have a presence that equals and even exceeds the Spanish presence in the leading journal in our field (the *Journal of Pediatric Surgery*), decreases in *Pediatric Surgery International*, and is marginal in the *European Journal of Pediatric Surgery*. In this context, our journal is in an excellent position to become an alternative for disseminating the enormous experience of Latin American teams in Europe.

We are now in a new period and we are convinced that we are on the right track. The recent incorporation of a more professional publishing management website is the first step on a path whose ultimate goal is to become a website for the journal itself, which would further increase our visibility and could improve our score in the new bibliometric indicators related to dissemination through social media. Together, on both sides of the Atlantic, we will decide how far we want to go.

Why not?

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