

Online edition in English. A momentous step forward for the REVISTA ESPAÑOLA DE CARDIOLOGÍA

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When we took on editorial duties at the Revista Española de Cardiología 5 years ago, we set certain goals for ourselves. These goals can be summarized as opening the journal to the full range of topics related with cardiovascular disease and authors working in the field, improving the scientific quality of original articles, increasing the distribution and dissemination of the journal, especially in Latin American countries, achieving an impact factor, and making the journal international.¹

Since this declaration of principles was made, activity has increased continuously. We have made many technical changes in the internal organization of the journal that are not readily evident from outside, but they have been important in implementing further innovations and major changes. One of the most important of these technical changes was to reorient the relation between the Sociedad Española de Cardiología (SEC) and the journal publisher (DOYMA) from a position of independence to one of mutual interdependence, in which both organizations work closely together to achieve goals they have established individually. This made it possible to discuss common intermediate and long-term goals in a way that previously would have been impossible. To achieve these goals, we have always considered what is expected of us by both the average reader and authors who submit manuscripts of research articles for publication.

ARTICLE QUALITY AND THE PRESTIGE OF SCIENTIFIC JOURNALS

Scientific journals serve the double purposes of promoting continuing medical education and communicating the results of original studies. These objectives differ fundamentally in terms of the quality of information provided and the proportion of review and research articles.

Years ago, a survey of the readers by the SEC clearly demonstrated that the continuing education sections of the journal were the most appreciated sections, particu-

larly review articles, special articles, and updates,² for which the journal had a long tradition of quality. It would be more difficult to carry out a similar survey now because our readership has increased 5- to 10 fold and has greatly diversified, as a result of increasing distribution to more than 500 public libraries and initiating online publication. However, given the clinical orientation of the journal, the results of such a survey probably would be similar. Nonetheless, it would be incorrect to weigh continuing medical education against the dissemination of scientific information in a journal that aspires to the highest levels of excellence, since both tasks are intimately related. The quality of the original research articles burnishes the prestige of scientific journals and acts as a stimulus to improving the quality of its continuing education articles. This motivates the best scientists to write editorials and review articles, thus enhancing the educational appeal of the journal. Therefore, one of our main tasks from the beginning was to improve the scientific quality of the journal's original papers.

Publication is the phase that culminates a scientific study. A study is considered incomplete, indeed, non-existent for the scientific community until it has been published as an article. However, the journal where a study is published is a key factor in determining its visibility and the scientific recognition that authors receive. Authors generally consider three important points in choosing a journal: its specialization, prestige, and international dissemination.

Prestige is the most valued asset of a journal, and the hardest one to secure. Prestige is a subjective concept, but the need for quantifying the work of scientists has led to the development of bibliometric indicators, such as the number of times an article and, by extrapolation, the journal is cited in the bibliography. Another indicator is the impact factor (IF), which measures the mean percentage of citations per year of the articles published in a journal in the last 2 years.³ The many limitations of this index are well known,⁴ such as its bias toward basic research journals that publish

TABLE 1. Mean impact factor of scientific journals in the JCR 3 according to the type of journal, article, and publication language

Type of journal	MIF	Difference (%)
1. Type of journal		
Basic research	3.46	99%
Clinical journal	1.74	
2. Type of articles		
Review articles	6.05	195%
Original papers	2.05	
3. Type of journal and articles		
Basic research journal publishing only review articles	8.23	120%
Clinical journal publishing only review articles	3.74	
Basic research journal publishing original papers	2.82	76%
Clinical journal publishing original papers	1.60	
4. Language of publication		
English	2.38	693%
Spanish	0.30	

JCR: Journal Citation Reports; MIF: mean impact factor.

only reviews and toward general medicine journals (Table 1). It is evident that this index is less than ideal and that the impact factors of different journals are not comparable. Therefore, in competitive environments it is considered acceptable to publish clinical studies in journals with an IF of more than 1.5, while basic research articles require a journal with an IF of more than 3. However, the most important bias of all is between journals published in English and other languages (Table 1).

THE IMPORTANCE OF ENGLISH IN THE DISSEMINATION OF SCIENTIFIC PUBLICATIONS

Databases of scientific publications, like scientific activity in general, are dominated by the Anglo Saxon world. This, however unfair it may seem, is a reality to which it is futile to offer resistance. English has become the *lingua franca* of scientific activity in the same way that Arabic, Greek, and Latin once were. In spite of the large and growing number of speakers of Spanish and other languages, the predominance of English not only shows no sign of lessening, but is becoming ever stronger. The use of publication language filters by the browsers of databases like MEDLINE is causing non-English literature to be systematically overlooked by the international scientific community. In addition, the inclusion criteria of databases for scientific journals are much more restrictive for journals edited in languages other than English. Consequently, of 2653 biomedical journals included in the Journal Citation Reports (JCR), only 21 are from Spain or Latin American countries.³ Since the IF is based on the citation of articles from a given journal in the JCR in other journals in the JCR, it is evident that

the few journals published in languages other than English have much less possibility of being cited. This explains in part why the mean IF of journals edited in English is much better than that of journals published in Spanish. Finally, it must be added that entities such as PubMed Central, a non-profit recently created for the purpose of disseminating without charge the content of scientific journals that adhere voluntarily, only admits journals published in English.

The weight of the evidence has lead the main journals of non-English-speaking countries to decide to publish in English. In the field of cardiology, the official journals of the cardiology societies of Japan, Germany, Holland, the Scandinavian countries, Greece and Italy have decided to publish in English, while many others, such as France, accept articles in English or publish a bilingual edition, like Portugal and Brazil. Even in Spain and Latin America, 33% of the local journals included in the JCR are published in English. The mean IF of these journals is 0.68, compared with 0.30 for those published in Spanish.⁵

ONLINE EDITION IN ENGLISH OF THE REVISTA ESPAÑOLA DE CARDIOLOGÍA

In recent years we have worked to improve the scientific quality, distribution, and dissemination of the journal in consonance with the current level of development of Spanish and Latin American cardiology.^{6,7} Distribution has increased by 100%. We now publish an international edition for Latin America, where 25% of our readership is found. Dissemination has increased enormously through the electronic online journal, for which 17,000 users are registered. These measures enabled the REVISTA ESPAÑOLA DE CARDIOLOGÍA to achieve a high IF for the first time in 1999 (0.46), and to raise the IF by 50% in 2000 8 (0.70), making it the most rapidly progressing biomedical journal published in Spanish.

However, an analysis of the evolution of other Spanish medical journals shows that we are close to touching the ceiling in the progression of the journal. We are convinced that we should not wait to hit the ceiling before reacting. After prolonged reflection by the publishers and the unanimous support of the Editorial and Advisory Committees of the journal, the Executive Committee of the SEC has decided to publish an electronic online edition of the journal in English on the Internet (www.revespcardiologia.org), beginning with this issue.

We are convinced, as we remarked 2 years ago, that achieving an IF was a milestone in the history of the journal and that today we have reached yet another milestone. The journal will still be published in Spanish and the online edition will be bilingual. This measure will allow us to preserve the identity of the journal and its goals of promoting continuing medical education

and disseminating scientific activity, as we have always defended.^{1,5} At the same time, we offer submitting authors an excellent trampoline for the international dissemination of their studies. From now on, the continuing medical education provided by the journal and, what is most important, the results of research published in REVISTA ESPAÑOLA DE CARDIOLOGÍA, will be completely open to the international scientific community. Better still, we will not stop using our own language of expression, thus doubly reinforcing investigative activity in Spanish-speaking countries. This important decision notably increases the workload of the journal and financial costs to the SEC, which the society has willingly undertaken in order to continue improving its official organ of scientific expression.

A great deal of work awaits us, but we are thrilled with the important step that the journal is taking with this issue. We would like to thank Ediciones DOYMA for the effort they have made to bring this project to fruition and, once more, the decisive support of the SEC Executive Committee, which has fully shared the editorial policy of the journal and respected the independence of our efforts. This is undoubtedly a momentous step forward for the REVISTA ESPAÑOLA DE CARDIOLOGÍA.

ADDENDUM

We would like to recognize the work of our colleague, Dr. Julián Pérez-Villacastín, who has carried out

the tasks of Associate Editor on the journal for the last 6 years, consistently imbuing all of us with his optimistic attitude. He will be substituted by Dr. Javier Bermejo Thomas, who will share with Dr. Fernando Alfonso much of the responsibility from now on. We are convinced that, like their predecessors, both will carry out their work with efficiency and enthusiasm.

REFERENCES

1. Bosch X. Nueva etapa de la Revista Española de Cardiología. Un cambio y un reto para el futuro. *Rev Esp Cardiol* 1998; 51: 1-2.
2. Marrugat J. Encuesta de opinión de los lectores de la Revista Española de Cardiología. *Rev Esp Cardiol* 1997; 50: 1-4.
3. Institute for Scientific Information. *Journal Citation Reports*. Filadelfia, 2000.
4. Bordons M, Zulueta MA. Evaluación de la actividad científica a través de indicadores bibliométricos. *Rev Esp Cardiol* 1999; 52: 790-800.
5. Bosch X, Fuster V, Villacastín J, Alonso J. Nuevo milenio, nueva revista, nuevas perspectivas. *Rev Esp Cardiol* 2000; 53: 1-3.
6. Bosch X, Villacastín JP, Alonso J. Revista Española de Cardiología en *Journal Citation Reports*. *Rev Esp Cardiol* 2000; 53: 1421-1424.
7. Bosch X, Villacastín JP, Alfonso F. Difusión, reconocimiento científico y repercusión internacional. *Rev Esp Cardiol* 2001; 54: 1463-1465.
8. Bosch X, López-Bescós L, Vallés Belsué F. Calidad y repercusión internacional de los estudios publicados. Dos conceptos distintos que deben promocionarse por un igual. *Rev Esp Cardiol* 2001; 54: 131-132.